

**Chapter 572 Oregon Health Sciences University**  
**OREGON ADMINISTRATIVE RULES 1997 COMPILATION**

---

**DIVISION 1**

**PROCEDURAL RULES**

|                     |  |
|---------------------|--|
| <b>572-001-0000</b> | Procedure for Rule Adoption                        |
| <b>572-001-0005</b> | Model Rules of Practice and Procedure              |
| <b>572-001-0020</b> | Availability of Public Records                     |
| <b>572-001-0040</b> | Contested Cases: Appointed Chair/Presiding Officer |
| <b>572-001-0050</b> | Contested Cases: Failure to Comply                 |

**DIVISION 5**

**PUBLIC ACTIVITY**

|                     |                           |
|---------------------|---------------------------|
| <b>572-005-0000</b> | Purpose                   |
| <b>572-005-0010</b> | Definitions               |
| <b>572-005-0020</b> | Limited Public Areas      |
| <b>572-005-0025</b> | Registration and Priority |
| <b>572-005-0030</b> | Access and Noise          |
| <b>572-005-0070</b> | Enforcement               |

**DIVISION 10**

**FACULTY RECORDS AND RELEASE OF STUDENT  
DIRECTORY INFORMATION**

|                     |  |
|---------------------|--|
| <b>572-010-0005</b> | Regulations Governing Faculty Records                    |
| <b>572-010-0010</b> | Definitions  |
| <b>572-010-0015</b> | Information not Included in Faculty Personnel Records    |
| <b>572-010-0020</b> | Release of and Access to Faculty Records                 |
| <b>572-010-0025</b> | Confidential Records — Restrictions on Release           |
| <b>572-010-0030</b> | Evaluation Records                                       |
| <b>572-010-0035</b> | Access to and Correction of Records                      |
| <b>572-010-0040</b> | Excised Material — Preservation of Confidentiality       |
| <b>572-010-0045</b> | Permanence, Duplication, and Disposal of Faculty Records |
| <b>572-010-0050</b> | Location and Custody of Faculty Records                  |

**Release of Student Directory Information**

|                     |  |
|---------------------|--|
| <b>572-010-0055</b> | Release of Student Directory Information |
| <b>572-010-0070</b> | Student Immunizations Requirements       |

**DIVISION 11**

**TRAFFIC AND PARKING ON THE CAMPUS OF THE  
OREGON HEALTH SCIENCES UNIVERSITY**

|                     |   |
|---------------------|---|
| <b>572-011-0005</b> | Statement of Responsibility                         |
| <b>572-011-0010</b> | Authority to Establish Rules and Regulations        |
| <b>572-011-0015</b> | Driving and Parking on Campus                       |
| <b>572-011-0020</b> | Permits and Parking Areas                           |
| <b>572-011-0025</b> | Time Limits and Fees                                |
| <b>572-011-0030</b> | Refunds and Replacement of Parking Permits          |
| <b>572-011-0035</b> | Enforcement   |
| <b>572-011-0040</b> | Penalties for Offenses                              |
| <b>572-011-0045</b> | Parking Appeals                                     |
| <b>572-011-0060</b> | Vehicular Safety, Operation, and Maintenance Policy |

**DIVISION 12**

**PROCEDURE FOR TERMINATION FOR CAUSE OF A  
HOUSE OFFICER**

|                     |   |
|---------------------|---|
| <b>572-012-0005</b> | Introduction  |
| <b>572-012-0010</b> | Definitions of Cause for Termination of a House Officer |
| <b>572-012-0015</b> | Initiation of Formal Proceedings                        |
| <b>572-012-0020</b> | Temporary Suspension of a House Officer                 |

|                     |  |
|---------------------|--|
| <b>572-012-0025</b> | Request for Formal Hearing   |
| <b>572-012-0030</b> | Hearing Committee  |
| <b>572-012-0035</b> | Conduct of Hearing   |
| <b>572-012-0040</b> | Committee Report   |
| <b>572-012-0045</b> | Action by the Director of the University Hospital of the Oregon Health Sciences University |
| <b>572-012-0050</b> | Date of Termination  |
| <b>572-012-0055</b> | No Reprisals   |
| <b>572-012-0060</b> | Personnel Record   |

**DIVISION 13**

**RESIDENCE HALL**

|                     |   |
|---------------------|---|
| <b>572-013-0010</b> | Purpose of Residence Hall Program         |
| <b>572-013-0020</b> | Access to Residence Hall Program          |
| <b>572-013-0030</b> | Assignment Priorities and Lengths of Stay |
| <b>572-013-0040</b> | Rates of Charges and Deposits             |
| <b>572-013-0050</b> | Residence Hall Housing Rules              |

**DIVISION 14**

**STUDENT ACTIVITIES BUILDING**

|                     |   |
|---------------------|---|
| <b>572-014-0005</b> | Student Activities Building Guest Fee                                       |
| <b>572-014-0010</b> | Student Activities Building Fee Schedule, Equipment Rental, and Course Fees |

**DIVISION 15**

**UNCLASSIFIED STAFF GRIEVANCE PROCEDURE  
(Other Than Discrimination Complaints)**

|                     |  |
|---------------------|--|
| <b>572-015-0005</b> | Resolution of Grievances                   |
| <b>572-015-0010</b> | Grievance Panel                            |
| <b>572-015-0015</b> | Initiation of Grievance Procedures         |
| <b>572-015-0020</b> | Informal Procedure                         |
| <b>572-015-0025</b> | Initiation of a Formal Grievance Procedure |
| <b>572-015-0030</b> | Hearing Procedure for a Formal Grievance   |
| <b>572-015-0035</b> | Hearing Committee's Report                 |
| <b>572-015-0040</b> | Appeals                                    |

**DIVISION 16**

**EQUAL OPPORTUNITY GRIEVANCE PROCEDURES**

|                     |  |
|---------------------|--|
| <b>572-016-0005</b> | Introduction                           |
| <b>572-016-0010</b> | The Affirmative Action Grievance Panel |
| <b>572-016-0015</b> | The Grievance Procedure                |

**DIVISION 17**

**HEALTH INSURANCE REQUIREMENTS FOR NONIM-  
MIGRANT STUDENTS AND THEIR DEPENDENTS**

|                     |  |
|---------------------|--|
| <b>572-017-0200</b> | Health Insurance Requirements for Nonimmigrant Foreign Students and Their Dependents |
|---------------------|--|

**DIVISION 18**

**STUDENT AND TRAINEE GRIEVANCE PROCEDURES**

|                     |   |
|---------------------|---|
| <b>572-018-0000</b> | Grievance for Complaints Other Than Discrimination, Sanction for Cause, or Academic Performance |
| <b>572-018-0010</b> | Grievance Panel/Committee/Counselors  |
| <b>572-018-0020</b> | Initiation of Grievance Procedures  |
| <b>572-018-0030</b> | Informal Procedure  |
| <b>572-018-0040</b> | Initiation of a Formal Grievance Procedure  |
| <b>572-018-0050</b> | Appeals   |

**DIVISION 19**

**REVOLVING CHARGE ACCOUNT PLAN**

**572-019-0000** Statement of Responsibility

**DIVISION 20**

**SCHOOL OF DENTISTRY**

**Dental Clinic Fees and Fee Payment Policies**

**572-020-0005** Instructional Aids Fee  
**572-020-0010** Continuing Dental Education Fee Schedule  
**572-020-0015** Student Activity and Publication Fee  
**572-020-0020** Dental Clinic Fee Schedule  
**572-020-0025** Oral Pathology Laboratory Fees  
**572-020-0030** General Payment Policy  
**572-020-0033** Patients Covered by Insurance Plans  
**572-020-0035** Emergency Treatment  
**572-020-0050** Dental Student Fine

**DIVISION 30**

**SCHOOL OF MEDICINE**

**Fee Schedules**

**572-030-0005** Children's Psychiatric Day Treatment Center Fees  
**572-030-0010** Microscope Rental Fee  
**572-030-0015** Instructional Aids Fee  
**572-030-0020** Continuing Medical Education

**DIVISION 50**

**UNIVERSITY HOSPITAL**

**Fee Schedules**

**572-050-005** Fee Schedules

**Financial Policies**

**572-050-0010** General  
**572-050-0015** Provision of Care  
**572-050-0020** Financial Responsibility  
**572-050-0025** Rates  
**572-050-0030** Allowances  
**572-050-0035** Payments  
**572-050-0040** Collections

**DIVISION 60**

**CHILD DEVELOPMENT AND REHABILITATION CENTER**

**Fee Schedules**

**572-060-0015** Fee Schedules  
**572-060-0100** Function and Responsibility  
**572-060-0105** Definitions  
**572-060-0110** Eligibility: General  
**572-060-0115** Eligibility: Disabling Conditions  
**572-060-0120** Eligibility: Financial  
**572-060-0125** Appeal Process  
**572-060-0130** Payment for Services  
**572-060-0135** Availability of Services  
**572-060-0140** Rates of Payment  
**572-060-0145** Standards for Health Care Professionals  
**572-060-0150** Standards for Health Care Facilities

**DIVISION 70**

**LIBRARY**

**Fee Schedules**

**572-070-0005** Library Fees and Services for Outside Users

**DIVISION 80**

**SCHOOL OF NURSING**

**Fee Schedules**

**572-080-0005** Continuing Nursing Education

**DIVISION 90**

**OFFICE OF RURAL HEALTH**

**572-090-0005** Procedures for Financial Assistance to Rural Communities  
**572-090-0010** Definitions  
**572-090-0020** Procedures for Classifying Rural Hospitals  
**572-090-0030** Certification Process for State Income Tax Credit Program

**DIVISION 100**

**OREGON POISON CENTER**

**Household Toxic Product Rules**

**572-100-0000** Aversive Agent Required  
**572-100-0010** Applications for Time Extensions  
**572-100-0020** Applications for Exemptions  
**572-100-0030** Contested Case Procedures  
**572-100-0040** Statutory Obligations of Manufacturers  
**572-100-0050** Procedures for Rule Adoption  
**572-100-0060** Quorum and Vote Requirement  
**572-100-0100** Application of Law and Rule Concerning Products Used in Professional Automotive Repair Facilities  
**572-100-0110** Application of Law and Rules Generally to Antifreeze

**DIVISION 1**

**PROCEDURAL RULES**

**572-001-0000**

**Procedure for Rule Adoption**

Prior to the adoption, amendment, or repeal of any rule except a temporary rule, the Oregon Health Sciences University shall give notice of the proposed adoption, amendment, or repeal:

- (1) In the Secretary of State's Bulletin referred to in ORS 183.360 at least 15 days prior to the effective date;
- (2) By posting on appropriate institutional bulletin boards;
- (3) By mailing a copy to the Oregonian and the Scanner;
- (4) By mailing a copy of the notice to persons on the Oregon Health Sciences University mailing list established pursuant to ORS 183.335(3). This mailing list may, at the discretion of the responsible official, be purged at yearly intervals if the affected individual has not affirmatively indicated a request that mailing be continued.

Stat. Auth.: ORS Ch. 183 & 351

Hist.: UOD 6, f. & ef. 1-6-76; HSU 3-1985, f. & ef. 7-2-85

**572-001-0005**

**Model Rules of Practice and Procedure**

Pursuant to the provisions of ORS 183.340, the Oregon Health Sciences University adopts Division 1 of the Attorney General's Model Rules of Practice and Procedure under the Administrative Procedures Act.

Stat. Auth.: ORS Ch. 183 & 351

Hist.: UOD 1, f. 10-29-73, ef. 11-25-73; HSC 2-1982, f. & ef. 2-8-82; HSU 3-1985, f. & ef. 7-2-85

#### 572-001-0020

##### Availability of Public Records

The public may review all University documents that are designated public records, except medical records. Documents, except medical records, will be available for review in the Office of the OHSU Vice President or such other place as designated by the Vice President during regular working hours. Copies of public records, except medical records, are available to the public upon request. The following charges will be made, payable in advance or when the materials are received:

(1) Administrative Rules of Oregon Health Sciences University, and revisions for a two-year period — \$15.

(2) Copies of documents:

(a) 1 - 10 copies, \$0.20 per page;

(b) 11 or more copies, \$0.15 per page.

(3) Documents and other materials such as computer tapes, microfilm and microfiche copies, audio tape cassettes, computer services, etc. shall be provided at a fee reasonable calculated to reimburse the University for actual costs.

(4) The President of the University may waive these charges if their imposition would cause undue hardship or in the presence of mitigating circumstances.

Stat. Auth.: ORS Ch. 183, 192 & 351

Hist.: HSU 2-1987(Temp), f. & ef. 2-12-87; HSU 7-1987, f. & ef. 9-3-87;

HSU 9-1987(Temp), f. & ef. 12-17-87

#### 572-001-0040

##### Contested Cases: Appointed Chair/Presiding Officer

Notwithstanding anything in OHSU administrative rules to the contrary, the President or the President's designee may elect to appoint as Chair or Presiding Officer of any contested case hearing committee a person with legal training or expertise whether or not that person is a member of the committee which would otherwise hear the contested case. The Chair or Presiding Officer will have the authority to make all necessary rulings related to the conduct of hearing and will have control of all discovery.

Stat. Auth.: ORS 183.450(7) & Ch. 351

Hist.: HSU 10-1992(Temp), f. & cert. ef. 11-20-92; HSU 1-1993(Temp), f. & cert. ef. 1-28-93; HSU 2-1993, f. & cert. ef. 5-11-93

#### 572-001-0050

##### Contested Cases: Failure to Comply

Failure or refusal to comply with an order entered against or directed to a particular named individual as a result of a contested case hearing at the Oregon Health Sciences University may serve as a basis for further discipline or other appropriate action against that individual who so fails or refuses to comply. The original findings of fact, conclusions of law and final order will be provided to the hearings committee as the background of the history of the original order. Further review or evidence regarding the underlying facts or causes of the original order will not occur and are not required to serve as the basis for further action. The further action authorized under this rule will be based upon necessary proof of failure or refusal to comply with the original order.

Stat. Auth.: ORS 183.450(7) & Ch. 351

Hist.: HSU 11-1992(Temp), f. & cert. ef. 11-20-92; HSU 3-1993, f. & cert. ef. 5-11-93

## DIVISION 5

## PUBLIC ACTIVITY

#### 572-005-0000

##### Purpose

(1) It is the purpose of this rule to inform members of the

public and the University community of the time, place, and manner in which they may engage in constitutionally protected public activities on the University campus. It also has the further purpose of insure non-interference with the University's missions of education, research and public service/patient care.

(2) This rule does not limit otherwise authorized University community use of University facilities.

(3) This rule does not affect any right which an employee organization certified as the exclusive representative for OHSU employees pursuant to ORS 243.005 et seq., may have been granted pursuant to its collective bargaining agreement or Oregon Revised Statutes.

Stat. Auth.: ORS 192.430 - 192.450 & 351.070

Hist.: HSU 6-1992, f. & cert. ef. 7-15-92; HSU 4-1993, f. & cert. ef. 5-11-93

#### 572-005-0010

##### Definitions

(1) "Plazas" means outdoor open space within the campus community used as gathering/social area by faculty, staff, students and visitors.

(2) "Person" means any member of the public or the University community.

(3) "Public" means any individual or group not included in the definition of "University community".

(4) "Public Activity" means leafletting, picketing, speech-making, video tape recording, demonstration, petition circulation, and similar activities which are not limited or restricted to a particular person or class of persons but are open to observation and are likely to be seen by persons casually passing by.

(5) "University" means Oregon Health Sciences University.

(6) "University Community" means all University recognized student, faculty, and staff sponsored organizations, University alumni organizations, and University Foundation and their affiliates which are engaged in activities directly related to the statutory mission of the University.

(7) "University Assistant Vice President for Facilities Management" shall include any University official later designated by the University to perform the functions of the Assistant Vice President for Facilities Management under this rule.

Stat. Auth.: ORS 192.430 - 192.450 & 351.070

Hist.: HSU 6-1992, f. & cert. ef. 7-15-92; HSU 4-1993, f. & cert. ef. 5-11-93

#### 572-005-0020

##### Limited Public Areas

(1) The University grounds open to the public and the University community for public activity, including soliciting, leafletting, picketing, speech-making, video tape recording and demonstrating, are sidewalks and plazas within the campus proper at 3181 S.W. Sam Jackson Park Road, Portland, OR.

(2) Additional areas open to the University community for public activities, except picketing, speech-making, video tape recording and demonstrating, are the first floor corridor adjacent to the cafeteria in MacKenzie Hall, the main lobby of the University Library, the third floor corridor adjacent to the cafeteria in University Hospital South, the first floor corridor adjacent to the cafeteria in University Hospital North and the second floor corridor adjacent to the cafeteria in the Child Development and Rehabilitation Building. Activity in these areas must take place from a table located by the University Assistant Vice President for Facilities Management.

(3) Access to and scheduling of conference rooms, auditoriums, classrooms and other non-public forums by the University community are not covered by this rule. Scheduling of such use shall be in accordance with other established institutional manuals or procedures.

Stat. Auth.: ORS 192.430 - 192.450 & 351.070

Hist.: HSU 6-1992, f. & cert. ef. 7-15-92; HSU 4-1993, f. & cert. ef. 5-11-93

#### 572-005-0025

##### Registration and Priority

(1) In order to allow scheduling and assure public safety, persons wishing to engage in speech activities in the above

designated areas are encouraged to register 24 hours in advance with the University Assistant Vice President for Facilities Management. The registration should include a statement of the number of people expected to participate, the anticipated length of the activity, the area where it will occur, and the name and phone number of a contact person. The registration shall not be used to regulate the content of the proposed public activities.

(2) Priority for the use of public areas is given to University sponsored events and, after that, to those who schedule an event in advance. If all or part of such an area is reserved for a University sponsored event, the University Assistant Vice President of Facilities Management may require a non-sponsored or non-scheduled use to reschedule for a different time or for an area not previously reserved.

Stat. Auth.: ORS 192.430 - 192.450 & 351.070

Hist.: HSU 6-1992, f. & cert. ef. 7-15-92; HSU 4-1993, f. & cert. ef. 5-11-93;

Renumbered from 572-05-040

### **572-005-0030**

#### **Access and Noise**

(1) All public activities must be conducted in such a manner that both pedestrian and vehicle traffic are not impeded, and the normal activities in classrooms, offices, hospitals and other University facilities are not disrupted.

(2) The University Assistant Vice President for Facilities Management may require any public activities to be conducted 15 feet or more away from any exit, entrance, staircase, parking lot or roadway if necessary to allow normal pedestrian or vehicle traffic.

(3) Devices for the amplification of sound are prohibited.

(4) The Assistant Vice President for Facilities Management may designate the portion of a University street and the time of day during which a University street is not available for public activities in order to meet traffic, emergency access, and public transit needs.

Stat. Auth.: ORS 192.430 - 192.450 & 351.070

Hist.: HSU 6-1992, f. & cert. ef. 7-15-92; HSU 4-1993, f. & cert. ef. 5-11-93

**572-005-0040** [Renumbered to 572-05-025]

### **572-005-0070**

#### **Enforcement**

(1) Any person violating these rules is subject to:

(a) Institutional disciplinary proceedings, if a student or employee;

(b) An order to leave the immediate premises or property owned or controlled by the University by a person in charge of University property.

(2) Persons failing to comply with an order by a person in charge to leave or to remain off the immediate premises or property owned or controlled by the University are subject to arrest for criminal trespass.

(3) The President, Vice President for Development and Public Affairs, Assistant Vice President for Facilities Management, and their designees, have the authority of "persons in charge" of University property for purposes of ORS 164.205(5) and these rules.

Stat. Auth.: ORS 192.430 - 192.450 & 351.070

Hist.: HSU 6-1992, f. & cert. ef. 7-15-92

## **DIVISION 10**

### **FACULTY RECORDS AND RELEASE OF STUDENT DIRECTORY INFORMATION**

### **572-010-0005**

#### **Regulations Governing Faculty Records**

These regulations govern faculty records, their content, accessibility, custody, and location. They comply with ORS 351.065, the basic state law on this subject, and OAR 580-022-0060 to 580-022-0125 of the Administrative Rules of the State Board of Higher Education. They are so formulated as to preserve the faculty member's right to privacy and to accommodate

legitimate public interest.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76; HSU 4-1985, f. & ef. 7-2-85

### **572-010-0010**

#### **Definitions**

OAR 580-022-0065 of the Board of Higher Education's rules, establishes the two following definitions:

(1)(a) "Personal Records" means records containing information kept by the institution, school, division, or department concerning a faculty member and furnished by the faculty member or by others, including, but not limited to:

(A) Information as to discipline, membership activity, other behavioral records;

(B) Administrative counseling;

(C) Professional preparation and experience;

(D) Professional performance (e.g., assignment and workload, quality of teaching, research, and service to the institution);

(E) Personnel data relating to such matters as promotions, tenure, leaves, retirement credits, and the like; and

(F) Professional activities external to the institution, including, but not necessarily limited to, awards, recognition, research activities, travel.

(b) Additionally, "Personal Records" include:

(A) Correspondence file relating to original appointment including faculty application form, curriculum vitae, and letters of reference;

(B) Personnel action forms and letters from department chairmen relating to salary, rank, tenure, and other changes; and

(C) Initial and annual notice of appointment.

(2) "Records of Academic Achievement" for purposes of compliance with ORS 351.065, shall mean the record of credits earned toward a degree or in post doctoral work and/or certificate(s), diploma(s), license(s), and degree(s) received.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76; HSU 4-1985, f. & ef. 7-2-85

### **572-010-0015**

#### **Information Not Included in Faculty Personnel Records**

(1) No faculty member shall be required to give, although he or she may voluntarily provide, information as to race, religion, sex, political affiliation or preferences, except as required by state statute, federal law, or valid federal rules, regulations, or orders. In those instances in which the faculty member is asked for such self-designation for any purpose (including federal requests for information), the request shall state the purpose of the inquiry and shall inform the individual of the right to decline to respond. Except as the faculty member makes the foregoing information available, or except as required by state or federal law, rule, or regulation, there shall be no designation in faculty personnel record files as to the faculty member's race, religion, sex, political affiliation, or national origin.

(2) Medical and psychiatric records, institutional time and effort reports, affirmative action data compiled by OHSU Affirmative Action Office, and patent rights agreements are not part of personnel files.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76; HSU 4-1985, f. & ef. 7-2-85

### **572-010-0020**

#### **Release of and Access to Faculty Records**

(1) Appropriate information about the faculty member may be released upon request and without the faculty member's consent. Such information shall be limited to the following:

(a) Directory information, that is, information generally needed in identifying or locating a named faculty member including such information as is readily to be found in published documents such as institutional catalogs;

(b) Objective evidence of a faculty member's academic achievement, limited to information as to the number of credits earned toward a degree or in post doctoral work, and certificate(s), diploma(s), license(s), and degree(s) received;



(c) Salary information and the record of terms or conditions of employment.

(2) All information in the faculty member's personal record file, apart from that identified above, shall be considered personal and subject to restricted access as hereinafter set forth.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76

#### **572-010-0025**

##### **Confidential Records — Restrictions on Release**

(1) Personal records designated as subject to restricted access shall be available only to institutional personnel, such as faculty administrators, students, and others serving on official institutional committees or in other official institutional capacities, who have a demonstrably legitimate need to review them in order to fulfill their official, professional responsibilities and to the faculty member who is the subject of the records. These records may not be released to any other person or agency without the faculty member's written consent, unless upon receipt of a valid subpoena or other court order or process or as required by state statute, federal law, or valid federal or state rules, regulations, or orders.

(2) Where a subpoena or other court order or process seeking access to faculty records is received, the recipient must notify the President or the President's designee prior to any institutional response. The latter will determine whether the validity of the subpoena, court order, or process shall be tested in court and will designate the officer responsible for so doing.

(3) Personal records of faculty members will be made available to the OHSU Affirmative Action Committee by the institutional executive in those instances where there is a need to obtain information regarding possible violations of the OHSU affirmative action procedure or the need to investigate a charge of discrimination. When possible, permission of the faculty member will be obtained.

(4) Information about faculty members may be released for research purposes provided that the identity of the faculty member is adequately concealed. If the confidentiality of the records appears to be jeopardized in any way by the release of information for research purposes, the researcher must obtain the written consent of the faculty member and provide it to the Office of Academic Affairs prior to the release of the date by the Oregon Health Sciences University.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76; HSU 4-1985, f. & ef. 7-2-85

#### **572-010-0030**

##### **Evaluation Records**

(1) A copy of a written record of a faculty member's annual evaluation will be given to the faculty member after discussion with him or her. A copy of the evaluative statement, duly signed by the faculty member signifying that he or she has been given a copy thereof, shall be placed in the faculty member's personal file.

(2) Classroom survey evaluation by students of a faculty member's classroom or laboratory performance shall be anonymous.

(3) After July 1, 1975, the OHSU, when evaluating its employed faculty members, shall not solicit nor accept letters, documents, or other materials, given orally or in written form, from individuals or groups who wish their identity kept anonymous or the information they provide kept confidential.

(4) Any evaluation received by telephone shall be documented in the faculty member's file by means of a written summary of the conversation with the names of the conversants identified.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76; HSU 4-1985, f. & ef. 7-2-85

#### **572-010-0035**

##### **Access to and Correction of Records**

(1) The faculty member has the right to review with appropriate institutional personnel any information contained in

his or her personal file. The file may be reviewed in the office in which it is maintained and shall not be removed from that office.

(2) Letters and other information submitted in confidence prior to July, 1975, shall be maintained in the personal file. However, if a faculty member requests access to those files, the anonymity of the contributor of letters and other information obtained prior to July 1, 1975, shall be protected. The full text shall be made available except that portions of the text which would serve to identify the contributor shall be excised.

(3) Confidential letters and other information submitted to or solicited after July 1, 1975, prior to the employment of a prospective employee are exempt from the provisions of this section. However, if a prospective employee is employed, the confidential pre-employment materials shall be placed in the personal file. If a faculty member requests access to his or her files, the anonymity of the contributor of confidential pre-employment letters and other pre-employment information shall be protected. The full text shall be made available except that portions of the text which would serve to identify the contributor shall be excised and retained in a file other than the personal file.

(4) A faculty member shall be entitled to submit evidence rebutting, correcting, amplifying, or explaining any document contained therein and other material which the member believes might be of assistance in the evaluation process.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76; HSU 4-1985, f. & ef. 7-2-85

#### **572-010-0040**

##### **Excised Material — Preservation of Confidentiality**

OHSU is obligated to observe the right to privacy of individuals who submit, pursuant to OAR 572-010-0035(3) and (4), whether by solicitation or voluntarily, evaluative materials respecting present or prospective faculty members, including materials labeled "confidential". This is the counterpart of the right to privacy observed within the institution and is accomplished as follows:

(1)(a) Evaluative materials respecting faculty members now employed shall have names or other matter that would serve to identify the contributor(s) excised by a faculty committee appointed for that purpose by the President of the OHSU. Excision shall be made on a xerox copy of the original document. The excised xerox copy is to remain in the faculty member's file. The original document is to be transferred to the member's Excised Materials File, stamped and dated as having been excised;

(b) A statement is to be appended to the excised xerox copy attesting that *only* the material which would identify the contributor(s) has been excised and that in all other respects, the material is unaltered from the original.

(2) Pre-employment evaluative materials respecting persons not subsequently employed shall be placed in an inactive file and plainly stamped "Subject to Excision". Before such materials are returned to an active file, they must be excised, as necessary, per section (1) of this rule.

(3) Access to files of excised materials is limited to deans or higher ranks, to appropriate State System personnel, and to such faculty committees as the President may designate.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76; HSU 4-1985, f. & ef. 7-2-85

#### **572-010-0045**

##### **Permanence, Duplication, and Disposal of Faculty Records**

(1) An individual faculty member's record shall be maintained only for the minimum period required to serve the basic official functions of the office which generates and maintains it. In the case of resignation or retirement of the faculty member, the file will be maintained for not more than five years and then disposed of by incineration.

(2) The permanent retention of faculty records shall be limited to those which the President or the State Archivist shall determine to be of long-range value to the individual faculty member, to the institution, or to the public. Access to personal records more than 25 years old may not be limited.

(3) Duplication of faculty records shall be kept to a

minimum. At the appropriate time, duplicates shall be disposed of as specified in section (1) of this rule.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76

#### **572-010-0050**

##### **Location and Custody of Faculty Records**

(1) The OHSU generates and maintains only such personal records as are demonstrably and substantially relevant to the educational and related purposes of the institution. **Table 1** is a summary of these records and their location.

(2) All records containing personal information about faculty members shall be kept in secured files.

(3) The head of each academic or administrative unit maintaining faculty records shall be responsible for maintaining the confidentiality and security of all faculty records within that unit in accordance with the provisions of these rules.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 11, f. & ef. 6-7-76

[ED NOTE: The Table referenced in this rule is not printed in the OAR Compilation. Copies are available from the Oregon Health Sciences University.]

##### **Release of Student Directory Information**

#### **572-010-0055**

##### **Release of Student Directory Information**

(1) The following information maintained by the Oregon Health Sciences University in its student record files is considered to be directory information and may be disclosed upon request, except that the student has the right to designate any or all of this information as not being subject to release without his consent:

- (a) Full name;
- (b) Address;
- (c) Telephone number;
- (d) Name of spouse;
- (e) Major field of study.

(2) On or about the time of registration, the Registrar's Office, or other appropriate office, will provide to each student a form entitled "Request to Restrict Directory Information" to be used by the student to designate those items of directory information which may be released without the student's consent. If the student does not return the completed form within seven days, it will be assumed that the institution may release any or all of the directory information pertaining to that student. Other departments and divisions of the Oregon Health Sciences University which receive directory information requests about students are to refer such inquiries to the Registrar's Office, except that if the inquiry concerns interns or residents, it is to be referred to the Office of the Director of Graduate Medical Education.

(3) With respect to inquiries for information about students other than directory information, no such information is to be released without the student's consent.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 18(Temp), f. & ef. 10-1-76; UOD 20, f. & ef. 12-2-76; HSU 4-1985, f. & ef. 7-2-85

#### **572-010-0070**

##### **Student Immunization Requirements**

(1) Oregon Health Sciences University, for the protection of the public health and benefit of the students, requires that students as a condition of enrollment must present appropriate proof of a current tuberculin skin test, chest x-ray (if positive tuberculin) and proof of up to date immunizations for:

- (a) Diphtheria-Tetanus;
- (b) Polio;
- (c) Rubella;
- (d) Rubeola;

(e) Hepatitis B or proof of prior disease (Required for Dental School, Medical School, and Nursing School students);

(f) Immunization for Mumps is recommended for all students but is not required.

(2) An acceptable proof of current immunization must be provided to the Student Health Services Department prior to completion of the registration process.

(3) All of these tests and immunizations are available at the time of registration in the Student Health Services Department. Any student needing these tests or immunizations will be charged for each immunization needed at the current Student Health Service rate.

(4) The Director of Student Health Services may waive the requirement for Hepatitis B vaccination for short term students who will have *no* contact with patients or blood borne pathogens during their course of study.

(5) Students who are unable to meet these requirements due to medical conditions shall furnish an explanation from their health care provider which will be reviewed by the Student Health Services Department Director who will make a recommendation to the Vice President for Academic Affairs, or his/her designee, who may waive the requirement if deemed appropriate.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 13-1990(Temp), f. & cert. ef. 11-15-90; HSU 5-1992, f. & cert. ef. 5-15-92; HSU 7-1993, f. & cert. ef. 6-30-93

##### **Traffic and Parking on the Campus of the Oregon Health Sciences University**

**572-010-0100** [Renumbered to 572-011-0005]

**572-010-0105** [Renumbered to 572-011-0015]

**572-010-0110** [Renumbered to 572-011-0020]

**572-010-0115** [Renumbered to 572-011-0020]

**572-010-0120** [Renumbered to 572-011-0025]

**572-010-0125** [Renumbered to 572-011-0020]

**572-010-0130** [Renumbered to 572-011-0040]

**572-010-0135** [Renumbered to 572-011-0015]

**572-010-0140** [Renumbered to 572-011-0015]

**572-010-0145** [Renumbered to 572-011-0035]

**572-010-0150** [Renumbered to 572-011-0035]

**572-010-0155** [Renumbered to 572-011-0040]

**572-010-0160** [Renumbered to 572-011-0020 and 0030]

##### **Procedure for Termination for Cause of a House Officer**

**572-010-0200** [Renumbered to 572-012-0005]

**572-010-0205** [Renumbered to 572-012-0010]

**572-010-0210** [Renumbered to 572-012-0015]

**572-010-0215** [Renumbered to 572-012-0020]

**572-010-0220** [Renumbered to 572-012-0025]

**572-010-0225** [Renumbered to 572-012-0030]

**572-010-0230** [Renumbered to 572-012-0035]

**572-010-0235** [Renumbered to 572-012-0040]

**572-010-0240** [Renumbered to 572-012-0045]

**572-010-0245** [Renumbered to 572-012-0050]

**572-010-0250** [Renumbered to 572-012-0055]

**572-010-0255** [Renumbered to 572-012-0060]

**Residence Hall House Rules**

**572-010-0300** [Renumbered to 572-013-0005]

**Student Activities Building Guest Fee**

**572-010-0400** [Renumbered to 572-014-0005]

**572-010-0405** [Renumbered to 572-014-0010]

**DIVISION 11**

**TRAFFIC AND PARKING ON THE CAMPUS OF THE  
OREGON HEALTH SCIENCES UNIVERSITY**

**572-011-0005**

**Statement of Responsibility**

All members of the University community will be held responsible for reading and knowing these regulations and for all violations of the regulations involving vehicles under their control or registered by them with the OHSU Parking/Traffic Management.

Stat. Auth.: ORS 352.360

Hist.: UOD 16, f. 8-30-76, ef. 9-1-76; HSC 9-1979, f. 10-12-79, ef. 11-1-79;

HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSU 1-1984, f. 5-11-84, ef. 5-14-84;

Renumbered from 572-10-100; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

**572-011-0010**

**Authority to Establish Rules and Regulations**

(1) To regulate vehicular traffic on the campus of the Oregon Health Sciences University, rules and regulations are established under the authority provided by ORS 352.360.

(2) The Oregon Health Sciences University, through the President and the President's designees, is hereby authorized to place these rules and regulations into effect and to enforce them as provided in ORS 352.360.

(3) All motor vehicle laws and regulations promulgated by the State of Oregon are enforceable on the OHSU campus.

Stat. Auth.: ORS 352.360

Hist.: HSU 1-1984, f. 5-11-84, ef. 5-14-84; HSU 12-1990, f. & cert. ef. 7-26-90

**572-011-0015**

**Driving and Parking on Campus**

(1) No motor vehicle will be parked on the campus except in those areas set aside for University parking. A map designating these areas will be kept on file in the Parking/Traffic Management Office. The manner of parking will be in accordance with the provisions of these rules and regulations.

(2) No driver of a vehicle will stop or park contrary to parking regulations or disobey the instructions of any sign posted by the University City or State, except when necessary to avoid conflict with other traffic or as directed.

(3) A motor vehicle parked on the campus shall be parked within lines or markings and/or in a manner prescribed by signs.

(4) No vehicle shall stop or park in any of the following places on campus 24 hours/day:

(a) In a crosswalk;

(b) In a loading zone, except for loading/un-loading, (20 minute limit unless otherwise posted);

(c) At any place where official traffic signs prohibit stopping or parking;

(d) At any place where the vehicle will be double parked (except where designated);

(e) At any place where the vehicle will occupy more than one parking space including parking over a designated parking space

line;

(f) At any place where the vehicle will obstruct a roadway;

(g) Occupying and/or obstructing a fire zone;

(h) In or on any landscaped area (unless authorized by special permit from the Parking/Traffic Management Office);

(i) In a restricted handicapped-designated space unless displaying Department of Motor Vehicles disabled license plates or permit in accordance with State directives, ORS 487.915 - 487.940, or in an OHSU disabled employee assigned space;

(j) No unauthorized vehicle shall be parked at a hooded meter, indicating restricted parking;

(k) No vehicle shall be parked in a space/area which has been reserved on a 24 hour basis for Carpoolers. These spaces/areas shall be designated by signage;

(l) In a space designated "State Service Vehicles";

(m) Any parking lot or space which is designated as a 24 hour restricted zone;

(n) Any parking lot or space which is signed "No Parking";

(o) Any space/area which is indicated "Reserved" or "Restricted" by specific signage.

(5) All motor vehicles approaching a clearly marked crosswalk will come to a complete stop if the crosswalk is occupied by a pedestrian.

(6) Motor vehicles will not be driven faster than the posted speed limit (emergency vehicles will be exempt as designated by state law). Vehicles will not exceed five miles per hour in any parking lot or structure. No person will drive a vehicle faster than is reasonable or prudent for traffic, street surface or width, or any hazardous conditions.

(7) Any campus parking area or roadway may be closed to the general public at the discretion of the Parking/Traffic Management Director.

(8) Any motor vehicle accidents which occur on OHSU property involving damage to state property, personal injury, or substantial personal property damages will be investigated by University Parking/Traffic Management Director/Designee.

Stat. Auth.: ORS 352.360

Hist.: UOD 16, f. 8-30-76, ef. 9-1-76; HSC 9-1979, f. 10-12-79, ef. 11-1-79;

HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSU 1-1984, f. 5-11-84, ef. 5-14-84;

Renumbered from 572-10-105, 572-10-135 & 572-10-140; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

**572-011-0020**

**Permits and Parking Areas**

(1) Visitors. Specific metered parking areas will be designated for use by visitors to the campus. Long term parking may also be available to visitors for a fee. Use of the Patient Parking Structure is governed by current campus Parking Rules and Regulations and University Hospital and Clinics Policy.

(2) Patients. All Hospital/Clinic patients may park in the patient designated area and have their parking validated. Others using the patient designated parking area will pay a fee as posted at the entrance of the area:

(a) Patient parking will be validated Monday - Friday, during daytime hours;

(b) Patients will have their parking cards validated by the primary department where they are receiving care. Patients being admitted or discharged will have their parking cards validated by the Admitting Departments;

(c) Patients utilizing the Emergency Room will continue to be able to park in the designated spaces adjacent to the Emergency Room;

(d) Use of the parking garage is available to employees and their families only during the period of time they are being seen as a patient;

(A) Other campus visitors, sales representatives, faculty, staff, students, volunteers, etc., will be directed to obtain a permit to park in areas other than the patient designated areas;

(B) Evening and night shift personnel with current parking stickers may utilize this lot between 5 p.m. and 6 a.m.

(e) Long-Term Parking: Should a patient require long-term parking (i.e., an unaccompanied admission), the parking attendant will make note of the vehicle make, license number, driver's name



and expected length of stay.

(3) Visitors:

(a) Patient visitors will receive a meter validation card from the campus Parking/ Information Booth;

(b) Other campus visitors will use metered areas or purchase a permit from the Parking/ Information Booth or Parking Office.

(4) Faculty, staff, and students:

(a) Specific parking areas on campus will be designated for use by faculty, staff and students, and appropriate signs will clearly indicate the restricted use of such areas and the exact time during which parking in these areas is restricted. Only those with specific authorization in the form of a permit or sticker will park in these areas. Permits will be sold on an "as space is available" basis;

(b) Faculty, staff and students will not park in metered areas 8 a.m. to 5 p.m., Monday through Friday, except as designated in OAR 572-011-0025(9);

(c) Permits for on campus parking assignment will be issued as space becomes available in the parking program. Permit assignments will be for designated zones only. Responsibility for locating a legal parking space will rest with the operator of the motor vehicle;

(d) Special parking area will be identified for use by evening and night shift permit holders. Security measures including lighting, surveillance cameras, and officer patrol will be provided in this area;

(e) Preferential or zone parking assignments will be offered to carpoolers. Only one vehicle may be on campus at a given time. When it is necessary for more than one pool vehicle to be on campus simultaneously, the carpool member may purchase a one day permit for the additional vehicle from the Parking/Traffic Management Office, or the Parking Booth, as space is available.

(5) Permits for additional vehicles. Parkers may acquire additional vehicle permits for cars used interchangeably for driving to work. Only one vehicle will be on campus at any given time. Each registrant will be limited to three vehicles.

(6) Loaned vehicles. Faculty, staff and students who are members of the parking program and who are required to bring a loaned vehicle to campus must obtain a free temporary permit from the Parking/Traffic Management Office/Parking Information Booth. Permit must be obtained and displayed on vehicle; phone calls are not accepted in lieu of permit.

(7) Visiting residents, interns, and students. Residents, interns, and students who are on rotation from another institution may purchase short term permits for a designated zone on a space available basis. Prior arrangements should be made with the Parking/Traffic Management Office.

(8) Government vehicles:

(a) City, county, state or other governmental body owned with the state "E" license plate or federally-owned vehicles with federal license plates may park free in any metered or monthly space on campus not having 24 hour restrictions for short periods of time. University assigned State "E" License vehicles will pay a monthly fee to the Parking/Traffic Management Office for vehicles utilizing space on a continual monthly basis;

(b) University assigned state vehicles parking rate. State-owned vehicles used on a permanent basis at the University will be charged a rate equal to the average on-campus fee. Department Heads responsible for each vehicle will provide either monthly cash payment or a department account number for Journal Voucher charges to the Parking/Traffic Management Office;

(c) University assigned state vehicle "reserved" parking rate. State-owned vehicles used on a permanent basis at the University may purchase a "Reserved" space including a sign in any monthly zone for a fee of twice the Gold Zone rate. This will reserve the space 24 hours per day, Department Heads responsible for each vehicle will provide either monthly cash payment or a department account number for Journal Voucher charges to the Parking/Traffic Management Office.

(9) Emergency parking. In case of an emergency where staff must respond to urgent calls for assistance in the University Hospital, it is appropriate for the staff member currently registered and paying for parking, to park in the nearest non-metered parking

space. In this event, the Parking/ Traffic Management Office must be notified within one hour or as soon as possible without endangering a patient's life.

(10) Volunteer staff. Volunteers who have a 20percent of full-time, or less staff appointment and are registered in the volunteer program at OHSU may be issued a permit to allow parking in a designated non-metered zone and in specially designated volunteer staff spaces. Permits will be issued by the Parking/Traffic Management Office, and may be renewed annually. A parking fee for volunteer staff will be paid by the appropriate administrative unit. All volunteer staff must register and show proof of vehicle ownership to the Parking/Traffic Management Office and will be personally responsible for any citation received for violating the parking rules/regulations.

(11) Complimentary parking:

(a) Permits will be issued through the office of the Vice President to the members of the State Board of Higher Education, representatives of the Board's Office, OHSU Foundation Board of Trustees, Legislative Fiscal Analyst, Department of Administrative Services Budget Analyst, and others designated by the Vice President. Permits will be effective for a limited time, and will allow parking in any metered or non-metered zone. The office of the Vice President will inform the Parking/Traffic Management Office of all permits issued. A parking fee for special guests will be paid by the office of the Vice President;

(b) One day permits for parking in specified zones may also be issued at the discretion of the President, Vice President, or their designated representative. These permits will be available by making arrangements through the Parking/Traffic Management Office/Parking Information Booth.

(12) Special events. Parking for participants in continuing education seminars, lectures, campus tours, and other special events will be arranged through the Parking/Traffic Management Office. Two weeks advance notice will be required. Parking must be paid for in advance by either the department or the individuals involved unless alternate arrangements have been made. Parking arrangements will be authorized on an "as space available basis."

(13) Commercial representatives, delivery vehicles, and contractors:

(a) Vendors may purchase parking permits utilizing a reserved parking area between the hours of 7 a.m. - 1:30 p.m. in a specified zone and rate identified in the **OHSU Campus Parking Fee Schedule**;

(b) Commercial representatives (vendors) may purchase permits to park, subject to the restrictions of these rules and regulations. Commercial representatives may also purchase a day or long term permit for parking in a specified monthly space, when space is available, from the Parking/ Traffic Management Office;

(c) Delivery vehicles may use any designated loading zone or may purchase a parking permit from the Parking/Traffic Management Office/ Parking Information Booth, for any delivery which is estimated to take longer than 20 minutes;

(d) Contractors, construction employees, and contract maintenance personnel shall purchase parking permit(s), at the Parking/Traffic Management Office or the Parking Information Booth for all vehicles parked on campus and all revenue generating spaces that are occupied/utilized during construction. Parking will be specified in the terms of the contract prior to award. Parking will be sold on an "as available" status and arrangements for contractors, construction employees and construction maintenance personnel must be made *prior* to beginning work on campus.

(14) Use of personal vehicles for University business. A Department Zone Pass will be issued upon receipt of an approved application from a Department Head or Principal Administrative Officer for those needing to use their vehicles during working hours. The requesting Departments will be responsible for the correct use of the Department Zone Pass. The Department Zone Pass remains the property of the Parking/Traffic Management Office. Use is limited to OHSU faculty, staff, and students currently enrolled in the parking program. In the event of misuse of the Department Zone Pass, the Parking/Traffic Management



Office may revoke the Department Zone Pass after notifying the responsible department. Application guidelines and restrictions will be available in the Parking/Traffic Management Office. A monthly charge will be assessed the requesting department.

(15) Bicycles. Bicycle racks are provided in several areas throughout Campus. Bicycles may not be parked in any area designated for vehicle parking or chained to railings, parking meters or sign posts. Bicycles are not allowed in campus buildings, stairwells, or chained to any trees, shrubbery or vegetation. Maps identifying the bicycle rack locations are available in the Parking/ Traffic Management Office.

(16) Motorcycles. Motorcycles/mopeds may be parked in special motorcycle lots or in any other non-metered lot at the rate specified in the **OHSU Campus Parking Fee Schedule**. Motorcycles/ mopeds can be combined with other vehicles for multiple vehicle status.

(17) Parking permits will be unaltered and permanently affixed and/or displayed in the manner prescribed, and only on the vehicles for which they are assigned. Except where specified, permits will not be transferable between vehicles or individuals. Permits remain the property of OHSU and there will be a charge for any permit not returned as specified in OAR 572-011-0025.

(18) All parking permits remain the property of OHSU and must remain in possession of the purchaser during their use. In applying for a parking permit, the applicant will certify that he or she owns the vehicle and/or controls its use. Ownership will be established by presenting a copy of the vehicle registration/title to Parking/Traffic Management Office personnel. If an individual sells the vehicle or withdraws from the parking program he or she must return the permit to the Parking/ Traffic Management Office. A \$25 fee will be charged for each lost or stolen monthly parking permit. Cash permits, including short-term, and quarterly, will be replaced at a cost equal to the balance of the current cash contract term.

(19) OHSU will not be responsible for any motor vehicle or its contents parked on University property. Individual parkers assume all risk of accident and expressly agree that the University shall not be liable for any reason for injury to persons, for losses, or for property damage.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University.]

Stat. Auth.: ORS 352.360

Hist.: UOD 16, f. 8-30-76, ef. 9-1-76; UOD 28, f. 8-31-77, ef. 9-1-77; HSC 9-1979, f. 10-12-79, ef. 11-1-79; HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSC 6-1982, f. & ef. 7-1-82; HSC 10-1982, f. & ef. 10-20-82; HSU 1-1984, f. 5-11-84, ef. 5-14-84; Renumbered from 572-10-110, 572-10-115, 572-10-125 & 572-10-160; HSU 5-1985, f. & ef. 7-2-85; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

#### 572-011-0025

##### Time Limits and Fees

(1) Parking fees shall be charged to faculty, staff, and students to allow parking in one of five designated zones or satellite parking area(s). These zones will be identified as Gold Zone, Red Zone, Blue Zone, Satellite Green Zone and Purple Zone. A map designating these areas will be kept on file in the Campus Parking Office. Fees for parking in these locations will be identified by the **OHSU Campus Parking Fee Schedule**. This fee schedule is based on projections for 3,600 on and off campus parking spaces and anticipated utilization by various categories of parkers. The rates in the attached schedule shall be effective upon adoption of this rule and/or as indicated in the **OHSU Campus Parking Fee Schedule**.

(2) Monthly payroll deductions will be offered to faculty and staff who have .1 FTE or greater. School term cash sales (in advance) will be offered to students. All other fees will be payable in quarterly cash payments at the Campus Parking Office.

(3) Proof of part-time employment is required to qualify for part-time rates.

(4) The Parking/Traffic Management Office must be notified within 30 days by an employee of any change in FTE status. Back fees must be paid if the change results in increased parking use.

(5) The parking fees for participants in the carpool program

will be divided between the members in the carpool. Each participant will pay their portion by payroll deduction or quarterly cash payments. Participation in this program will be governed by Guidelines and Contract Applications which are available from the Parking Traffic/ Management Office.

(6) Gold, Red, Blue, Green and Purple monthly zone permits will be observed during the following periods:

(a) Day Rate — 8 a.m. to 5 p.m. in designated zone, any zone 5 p.m. to 8 a.m.;

(b) Evening Rate — 2 p.m. to midnight;

(c) Night Rate — 10 p.m. to 8 a.m.

(7) All students not participating in the parking program must register their vehicles with OHSU Campus Parking Office and will receive a permit valid from 5 p.m. to 8 a.m., Monday through Friday and all day Saturday and Sunday, in order to park in the designated zones.

(8) Registered parkers in satellite parking areas may utilize any designated zone from 5 p.m. to 8 a.m. with a valid permit displayed.

(9) The metered parking areas are designated for use as follows:

(a) Visitors, guests and patients — 8 a.m. - 5 p.m. Monday thru Friday;

(b) Faculty, staff and students\* — 10 p.m. to 8 a.m. Monday through Friday and 24 hours per day on Saturday and Sunday.

\*Faculty, staff and students may park in the metered areas during the designated hours without paying the meter.

(10) The parking meter rate is identified by the **OHSU Campus Parking Fee Schedule**.

(11) The display of a sign showing expired parking on any meter while the motor vehicle is parked in a space assigned to the meter shall be prima facie evidence that the motor vehicle has been parked overtime unless a campus parking permit is displayed in accordance with section (6) of this rule. Violations will result in citation, fine, and/or towing.

(12) Vehicles remaining on University property for more than 72 hours without a proper permit or notification to the Campus Parking Office will be considered abandoned and removed at owner's expense.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University.]

Stat. Auth.: ORS 352.360

Hist.: UOD 16, f. 8-30-76, ef. 9-1-76; UOD 28, f. 8-31-77, ef. 9-1-77; HSC 9-1979, f. 10-12-79, ef. 11-1-79; HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSC 6-1982, f. & ef. 7-1-82; HSU 4-1983, f. & ef. 8-1-83; HSU 1-1984, f. 5-11-84, ef. 5-14-84; Renumbered from 572-10-120; HSU 3-1987, f. 3-4-87, ef. 4-1-87; HSU 6-1988, HSU 6-1988, f. 8-19-88, cert. ef. 9-1-88; HSU 3-1990(Temp), f. & cert. ef. 3-1-90; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

#### 572-011-0030

##### Refunds and Replacement of Parking Permits

(1)(a) Monthly payroll deductions will not be refundable except for the current pay period. There will be no retroactive refunds — It is the responsibility of each person to verify their payroll deduction and notify the Parking/Traffic Management Office within five days of any error. All permits must be returned prior to the 20th of the month in order to stop participation in the parking program and subsequent payroll deductions. A temporary permit will be issued for the balance of the paid month;

(b) Students or staff who have paid cash for parking on a quarterly basis may receive a pro-rata refund from the Parking/Traffic Management Office if the permit is returned within ten days from the start of the term. Students or staff who have paid cash for annual parking are eligible for pro-rata refunds upon return of their parking permit. Pro-rating will only be for successive months already paid after the return of the OHSU permit.

(c) Maternity/Sabbatical Leave. All stickers/ permits for all vehicles must be turned in to the Parking/Traffic Management Office prior to the taking of a maternity or sabbatical leave to receive a pro-rated refund of prepaid parking fees, or to stop automatic payroll deductions;

(d) Vacations. No refunds are offered for vacations, as that time away from OHSU is built into the anticipated parking lot usage/fee schedule.

(2) Permit holders must report lost or stolen permits to the Parking/Traffic Management Office as soon as the loss is discovered. Regular and evening/night shift permits will be replaced for a \$25 service charge. All stolen/lost permits must be reported on a Report Form prior to replacement. Any vehicle found to have a permit which has been reported lost or stolen is subject to citation, and/or impoundment at the owner's expense.

Stat. Auth.: ORS 352.360

Hist.: UOD 16, f. 8-30-76, ef. 9-1-76; HSC 9-1979, f. 10-12-79, ef. 11-1-79; HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSC 6-1982, f. & ef. 7-1-82; HSC 10-1982, f. & ef. 10-20-82; HSU 1-1984, f. 5-11-84, ef. 5-14-84; Renumbered from 572-10-160; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

#### **572-011-0035**

##### **Enforcement**

(1) Campus parking enforcement regulations are in effect 24 hours a day, seven days a week.

(2) It is unlawful for any person to refuse or fail to comply with any lawful order, signal or direction of any traffic officer displaying an official badge and vested by law with the authority to direct, control or regulate traffic or parking on campus.

(3) Tickets issued by the University will be payable in full to the OHSU Parking/Traffic Management Office within ten days of the ticket date. Failure to pay within ten days will result in the amount doubling. In lieu of payment faculty, staff, students, and visitors may petition to the Parking/Traffic Management Director, as described in OAR 572-011-0045 Parking Appeals if such appeal is made within ten days of issue date. If appeal is not made within the specified ten days, all rights to further appeal will be forfeited.

Stat. Auth.: ORS 352.360

Hist.: UOD 16, f. 8-30-76, ef. 9-1-76; HSC 9-1979, f. 10-12-79, ef. 11-1-79; HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSU 1-1984, f. 5-11-84, ef. 5-14-84; Renumbered from 572-10-145 & 572-10-150; HSU 5-1985, f. & ef. 7-2-85; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

#### **572-011-0040**

##### **Penalties for Offenses**

(1) Citations for both single and multiple offenses will be issued with fines as specified in the **Oregon Health Sciences University Schedule of Fines** for the following offenses:

- (a) Overtime Limit;
- (b) Improper Display of Permit;
- (c) Illegal Use/Altered Permits;
- (d) Unauthorized Zone;
- (e) Expired /No Permit;
- (f) Unauthorized Use of Patient Parking Structure;
- (g) No Parking Anytime;
- (h) More Than One Car on Campus;
- (i) Improper Parking;
- (j) Student/Staff at Meters;
- (k) 24 Hour Restricted Zone;
- (l) Impoundment Fee;
- (m) No DMV Handicap Permit Displayed.

(2) If no action is taken (either in the form of payment or written petition to the appropriate authority) within the times specified on the citation, fines will be deducted from faculty or staff salaries, student deposits, or other funds in the possession of the institution, as provided by ORS 352.360(2). *Right to further appeal will then be forfeited.*

(3) Patients and visitors to campus may choose to appeal citations through the campus appeals process. If no action is taken (either in the form of appeal or payment) within the specified times, enforcement of the citation will be turned over to the District Court, and the vehicle may be restricted from parking on campus.

(4) Repeated violation of parking regulations may result in a parker's termination from the parking program, and/or citation, and/or towing.

(5) In cases involving repeat violations, unlawful parking which creates a traffic hazard, or other circumstances identified by a Campus Patrol Officer, vehicles may be booted, towed, and/or impounded; thus subjecting the vehicle operator to storage and towing fees in addition to penalties. Tampering with or destruction of an impoundment lock may result in criminal charges being brought against the violator.

(6) The penalty for violation of the bicycle parking rules will be impoundment of the bicycle. Impoundment may involve the destruction of the operator's locking device. It may be reclaimed by contacting the Parking/Traffic Management Office and after paying the fine you will receive a release to claim property. If bicycle is not claimed within ten days it will be sold by the Parking/Traffic Management Office in order to recoup storage charges.

(7)(a) Towing and Impoundment. Vehicles in violation of parking or payment regulations are, in addition to penalties provided herein, subject to being towed away or impounded. Release of towed or impounded vehicle will be made upon payment of all outstanding fines to the Parking/Traffic Management Office;

(b) Tow Notice. A vehicle having any outstanding parking citations may be subject to a Tow Notice and subsequent tow;

(c) Vehicles remaining on University property, including mechanical break-downs, for more than 72 hours without a proper permit or notification to the Parking/Traffic Management Office will be considered abandoned and removed at owner's expense.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University — Vice President.]

Stat. Auth.: ORS 352.360

Hist.: UOD 16, f. 8-30-76, ef. 9-1-76; HSC 9-1979, f. 10-12-79, ef. 11-1-79; HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSC 6-1982, f. & ef. 7-1-82; HSC 10-1982, f. & ef. 10-20-82; HSU 1-1984, f. 5-11-84, ef. 5-14-84; Renumbered from 572-10-130 and 572-10-155; HSU 5-1985, f. & ef. 7-2-85; HSU 5-1986, f. 10-30-86, ef. 11-1-86; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

#### **572-011-0045**

##### **Parking Appeals**

(1) Faculty, staff and students of OHSU may appeal any parking citation. Petitions of appeal shall be presented in writing on an Appeals Form to the Parking/Traffic Management Director within ten days of the citation date.

(2) The Parking/Traffic Management Director or designee will issue a written response to the petitioner. After the petitioner receives this response, the petitioner may within five days, file a second appeal and either request a meeting with the Parking/Traffic Management Director to discuss any factors pertaining directly to the citation which they feel were not considered or request a review by the University Parking Appeals Board.

(3) The Parking/Traffic Management Director will have the authority to:

- (a) Dismiss the citation;
- (b) Reduce the penalty of the citation;
- (c) Issue a reprimand or warning and suspend full or partial payment of the citation;

(d) Make recommendations to the Vice President as to the restriction or suspension of driving and parking privileges on campus;

(e) Refer the matter to the Parking Appeals Board;

(f) Uphold the citation as written.

(4)(a) Should the second appeal petition request a hearing with the University Parking Appeals Board, the appeal will be heard at the next regularly scheduled meeting. The petitioner must demonstrate that the decision of the Parking Director was unreasonable, arbitrary, or unsupported by evidence. The decision of the Board will be final;

(b) No further appeal is allowed after determination of the second appeal; and the petitioner will have ten days in which to pay the fine before the University takes action. Payments for fines after ten days will be twice the original amount.

(5) The Parking Appeals Board shall consist of five persons selected from the University Parking Committee. A quorum shall be three members. Appointments to the Board shall be made by the Vice President. A majority vote of the members present is needed to overturn the decision of the Parking/Traffic Management Director. The Parking Appeals Board may:

(a) Confirm the Parking/Traffic Management Director's decision and uphold the citation as written;

(b) Provide information to prevent repetition of the offense, issue a reprimand or warning, and dismiss payment;

(c) Reduce citation fine.

(6) The Parking Appeals Board shall meet regularly, on a timely basis, to review parking citation appeals.

(7) Patients and visitors to campus may choose to appeal citations through the campus appeals process. If they choose to do so, all decisions of the process will be binding. All citation fines must be paid within the required time limits. If a citation is reduced, dismissed or suspended an appropriate refund will be made.

Stat. Auth.: ORS 352.360

Hist.: HSU 1-1984, f. 5-11-84, ef. 5-14-84; HSU 12-1990, f. & cert. ef. 7-26-90; HSU 3-1994, f. & cert. ef. 3-31-94

#### **572-011-0060**

##### **Vehicular Safety, Operation, and Maintenance Policy**

(1) The Oregon Health Sciences University is committed to taking every practical step which will result in providing safe, vehicular transportation for faculty, staff, and students traveling on University approved business. This rule is adopted in accordance with the requirement of the Oregon State Board of Higher Education embodied in OAR 580-040-0030 that each state system institution enact travel safety rules that are consistent with that of the Board.

(2) This rule shall apply to all vehicles used for University business, whether owned by or loaned to the state, and to private vehicles owned or used by the employee/driver or student/driver, if carrying passengers on University business.

(3) No person convicted within the past three years of a major traffic offense as defined in ORS 153.500 shall be permitted to drive vehicles owned by or loaned to the state for University approved business, or to drive a private vehicle, if carrying passengers on University business. A major traffic offense, as defined in ORS 153.500, includes:

(a) Reckless driving as defined in ORS 811.140;

(b) Driving while under the influence of intoxicants, as defined in ORS 813.010;

(c) Failure to perform the duties of a driver involved in an accident or collision, as defined in ORS 811.700 or 811.705;

(d) Criminal driving while suspended or revoked, as defined in ORS 811.182;

(e) Fleeing or attempting to elude a police officer, as defined in ORS 811.540.

(4) Vehicles loaned to the state shall be covered by insurance approved by the Office of Administration.

(5) Travel on University business in private vehicles owned or used by an employee/driver or a student/driver shall be authorized only in accordance with Department of Administrative Services rules and upon condition that the driver waive any and all liability which may accrue to the Board of Higher Education because of the driver's failure to abide by the travel safety rules required under OAR 580-040-0030.

(6) All vehicles owned by or loaned to the state and all private vehicles owned or used by an employee/driver or a student/driver carrying passengers traveling on University approved business shall be equipped with operable seat belts for every person to be transported; an emergency reflector kit; flares; an ice scraper; an operable flashlight; service station credit cards, except in private vehicles owned or used by an employee/driver or a student/driver; a first aid kit; accident reporting blanks; and instructions for handling emergencies. Exceptions to requirements that vehicles carry emergency reflector kits, flares, flashlights, service station credit cards, shall be made for vehicles used only within the campus boundaries or for trips to locations within the

community around the campus.

(7) Employees or students driving private cars carrying passengers on University business shall be expected to certify through a signed statement filed annually with the departmental office (employees) or with the appropriate Dean's office (students) that their vehicle is equipped as is specified in section (6) of this rule; that to the best of the driver's knowledge the car is in good repair; that the driver holds a valid U.S. driver's license; and that the driver has not been convicted within the past three years of a major traffic offense as defined in ORS 153.500.

(8) Employees traveling on University business in state, loaned, or private vehicles shall file a trip itinerary with their office.

(9) Employees or student drivers of cars owned by or loaned to the state carrying passengers on University business shall be expected to certify through a signed statement filed in the course of checking out a car prior to the beginning of the trip that the driver holds a valid U.S. driver's license and has not been convicted within the past three years of a major traffic offense as defined in ORS 153.500.

(10) In the event of an injury accident, the Vice President or a designee shall attempt to notify next of kin of the injured employee of the accident and the Dean or a designee of the respective school in which an injured student is enrolled shall attempt to notify next of kin of the injured student.

(11) The University may require private cars driven by employees or students which carry passengers on University business to be equipped with approved traction devices depending on weather conditions.

(12) State owned vehicles and loaned vehicles available through the OHSU motor pool shall be equipped as prescribed in section (6) of this rule. Such vehicles shall be subjected to periodic safety inspections and shall be given appropriate maintenance. Before being released to an authorized driver, vehicles available through the OHSU motor pool shall be checked for fuel, oil, tire conditions, any other visible maintenance problem, and for the presence of equipment identified in section (6) of this rule. Additional equipment including tire chains, civilian band radios, and trauma kits shall be available for use in OHSU vehicles to be driven long distances.

(13) OHSU shall make available for check-out a small number of kits containing safety equipment described in section (6) of this rule to drivers of private cars traveling on University approved business. Additional equipment including tire chains, civilian band radios, and trauma kits also shall be available in small numbers for check-out by drivers of private cars who are driving a long distance on University approved business.

(14) OHSU owned vehicles and vehicles loaned to the state shall not be released when weather conditions are adverse and pose an undue risk to the safety and welfare of the vehicle occupants.

(15) OHSU owned vehicles and vehicles loaned to the state shall not be driven at night over hazardous roads in adverse weather conditions.

(16) Authorized drivers of OHSU owned vehicles or vehicles loaned to the state shall make provision for a relief driver on trips involving four or more hours of travel without a break. Drivers shall be encouraged to drive no more than two hours without a rest break, where it is practical to do so.

(17) The University shall enroll employees whose primary job duty is driving in an appropriate defensive driving course.

(18) The University shall review periodically the records of accidents involving OHSU owned vehicles as well as vehicles loaned to OHSU. Should it appear that certain drivers have been involved in a disproportionate number of accidents, the University shall require that these individuals successfully complete a defensive driving course before allowing them to drive on institutional business in a state car or to carry passengers on institutional business in a private car.

Stat. Auth.: ORS 351.070

Hist.: HSU 1-1986, f. 3-4-86, ef. 3-15-86; HSU 3-1994, f. & cert. ef. 3-31-94



**DIVISION 12**

**PROCEDURE FOR TERMINATION FOR CAUSE OF A  
HOUSE OFFICER**

**572-012-0005**

**Introduction**

(1) Whereas each University Hospital house officer (intern, resident, or fellow), hereinafter referred to as house officer, successfully completing a course of training at the Oregon Health Sciences University is certified to be competent to perform the duties of a physician or other professional; and

(2) Whereas a certain level of competence is required to perform the duties of a physician or other professional; and

(3) Whereas certain types of behavior and conduct are not compatible with performing the duties of a physician or other professional;

(4) Therefore the Oregon Health Sciences University may terminate the appointment of any house officer demonstrated not to have the level of competency required for the performance of duties assigned to him/her or for behavior or conduct proscribed by the rules of the Oregon State Department of Higher Education and the Oregon Health Sciences University.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-200

**572-012-0010**

**Definitions of Cause for Termination of a House Officer**

Cause for termination of a house officer includes, but is not limited to:

(1) Conviction of a felony.

(2) Obstruction or disruption of institutional activities.

(3) Malicious damage, misuse, or theft of institutional property.

(4) Illegal use, possession, or distribution of drugs on institutional property.

(5) Failure to perform the responsibilities of a house officer toward patients and colleagues, including incompetency, gross inefficiency, default of professional integrity, and intentional or habitual neglect of duty.

(6) Other conduct proscribed by Administrative Rule OAR 580-022-0245 of the Oregon State Board of Higher Education.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-205; HSU 4-1985, f. & ef. 7-2-85

**572-012-0015**

**Initiation of Formal Proceedings**

If the Director of the University Hospital of the Oregon Health Sciences University shall determine to his or her satisfaction that there is probable cause to terminate the appointment of a house officer, the Director shall authorize the preparation of formal written charges. The charges shall state specifically the facts alleged to be the cause for termination. Within ten days after the authorization to prepare formal written charges, they shall be filed with the Director of the University Hospital. A copy shall be delivered personally or sent by certified mail to the house officer.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-210; HSU 4-1985, f. & ef. 7-2-85

**572-012-0020**

**Temporary Suspension of a House Officer**

If at any time during the pendency of the charges against a house officer the Director of the University Hospital finds that there is danger that the house officer's continued performance of duty presents a hazard to the institution or its patients, students, or staff, the Director of the University Hospital may suspend the house officer without financial penalty from any or all duties.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

**572-012-0025**

**Request for Formal Hearing**

Within ten days after the delivery or mailing of the formal written charges to the house officer, the house officer will file in writing to the Director of the University Hospital whether he/she desires a formal hearing on the charges. If the house officer requests in writing that he/she not have a formal hearing, the Director of the University Hospital may then terminate the appointment of the house officer and give written notice thereto to the house officer terminated. The date of termination shall be no sooner than 10 days from the date of the written notice from the Director of the University Hospital and shall be specified in the written notice. One month's pay shall be given to the house officer beyond the date of termination.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-220; HSU 4-1985, f. & ef. 7-2-85

**572-012-0030**

**Hearing Committee**

Unless the house officer requests in writing that he/she not have a formal hearing on the charges, such hearing shall be before a special *ad hoc* committee of five members. Two members of this committee shall be members of the house staff of the Oregon Health Sciences University, appointed by the Director of Graduate Medical Education. Two members of the hearing committee shall be members of the active Medical Staff of the Oregon Health Sciences University Hospital and shall be appointed by the Executive Committee of the Medical Staff. The chairman of the hearing committee shall be a faculty member of one of the Basic Science Departments of the School of Medicine of the Oregon Health Sciences University and shall be appointed by the Dean of the School of Medicine. The hearing committee shall be constituted promptly and shall complete the hearing and its report within thirty days of its constitution, if possible.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-225; HSU 4-1985, f. & ef. 7-2-85

**572-012-0035**

**Conduct of Hearing**

The committee shall set a date for the hearing giving sufficient time to the house officer to prepare his/her case. Not less than one week before the hearing date, the house officer shall file with the committee any written statement of his/her case that he/she elects to make. At the hearing, the testimony of witnesses and other evidence concerning any disputed facts shall be received by the committee. All testimony must be taken under oath or affirmation by the witness from whom received. The chairman has the authority to administer an oath or affirmation. The house officer shall have the right to appear and to participate in the hearing and to present relevant evidence to the committee, and he/she may be represented by counsel or any other advisor of his/her choosing. Subpoenas may be issued on a showing by an interested party of need, general relevancy and within reasonable scope of the proceedings. An interested party may petition for an order that the testimony of a material witness be taken by deposition. Fees and mileage are to be paid by the Oregon Health Sciences University Hospital as determined by applicable statutes. The house officer and the person or persons bringing the charges shall have the right to confront and cross-examine all witnesses and reasonable opportunity to submit rebuttal testimony or other evidence. At the conclusion of the testimony, each side may present an oral or written summation. When the committee is satisfied that all pertinent and available evidence has been received, the hearing will be adjourned. At all times, the hearing shall be under the control of the committee chairman and subject to the procedure of the committee. A verbatim record of the hearing shall be kept. At the adjournment of the hearing, the committee will go into executive session for the purpose of



deliberation.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-230

#### **572-012-0040**

##### **Committee Report**

The committee, by agreement of at least a majority of the members, shall make explicit findings and conclusions of law based upon the hearing record with respect to each specification in the formal charges, and shall, within ten days of the hearing, submit a written report on their findings and conclusions of law and a recommendation as to whether there should be a termination of the appointment of the house officer. The Director of the University Hospital and the house officer shall be given copies of the findings and recommendations.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-235; HSU 4-1985, f. & ef. 7-2-85

#### **572-012-0045**

##### **Action by the Director of the University Hospital of the Oregon Health Sciences University**

The Director of the University Hospital shall promptly, after receipt of the committee's report and after having a reasonable opportunity to consult with the Dean of the School of Medicine and the President of the Oregon Health Sciences University, give the house officer written notice of his decision as to whether to terminate the appointment of the house officer.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-240; HSU 4-1985, f. & ef. 7-2-85

#### **572-012-0050**

##### **Date of Termination**

If the appointment of the house officer is to be terminated, the appointment shall not be terminated sooner than ten days following the date of written notice from the Director of the University Hospital and shall be specified in the written notice; provided, however, that the house officer shall receive salary for one month from the date of termination.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-245; HSU 4-1985, f. & ef. 7-2-85

#### **572-012-0055**

##### **No Reprisals**

No employee of the Oregon Health Sciences University shall be subject to reprimand or other adverse action by reason of appearing as a witness or for participating as a member of a committee in any of the proceedings provided for in these procedures.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-250

#### **572-012-0060**

##### **Personnel Record**

No notations shall be made in the personnel record of a house officer of any charges brought against him or her or any investigation of the charges unless the charges are found to be fact by the hearing committee through the procedures specified in this document.

Stat. Auth.: ORS Ch. 351

Hist.: UOD 14, f. & ef. 8-24-76; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-255; HSU 4-1985, f. & ef. 7-2-85

## **DIVISION 13**

## **RESIDENCE HALL**

#### **572-013-0010**

##### **Purpose of Residence Hall Program**

The Residence Hall program's purpose is to extend educational opportunity to students and to contribute to Oregon Health Sciences University's educational, research and patient care mission.

Stat. Auth.: ORS Ch. 351 & 352.055

Hist.: HSU 5-1993, f. & cert. ef. 5-11-93

#### **572-013-0020**

##### **Access to Residence Hall Program**

Students or authorized persons attending educational activities at the University, or who are a part of the University's educational, research or patient care mission, are eligible to stay in the Residence Hall. The Vice President of Academic Affairs or his or her designee shall examine the qualifications of each person who applies to the Residence Hall program, and shall approve or deny an application utilizing the following criteria, however, for good cause, an access exception may be made if it is in the best interest of the University's educational, research, or patient care mission. For the purposes of this rule, the following definitions will be used:

(1) "Student". A student who is admitted and enrolled in an academic degree program at the Oregon Health Sciences University or Portland State University.

(2) "Authorized Person":

(a) An undergraduate, graduate or post graduate student or health professional who attends educational activities sponsored by the University or who is a part of the University's educational, research, or patient care mission;

(b) A member of an educationally-related conference group which has signed a contract with the University;

(c) A University Hospital patient, who contributes to the University's educational, research or patient care mission;

(d) An immediate family member of a University Hospital patient, or an immediate family member of a Residence Hall tenant, who is adjunct to the University's educational, research or patient care mission.

(3) "Tenant". A student or authorized person who has signed a long term tenancy Residence Hall Contract and who resides in the Residence Hall for one month or longer.

(4) "Occupant". A student or authorized person who has signed a short term occupancy Residence Hall Contract and who resides in the Residence Hall for less than one month.

Stat. Auth.: ORS Ch. 351 & 352.055

Hist.: HSU 5-1993, f. & cert. ef. 5-11-93

#### **572-013-0030**

##### **Assignment Priorities and Lengths of Stay**

Room assignments shall generally be made utilizing the following priority classifications. Priority classifications and occupancy constraints shall govern lengths of stay. For good cause, the Vice President of Academic Affairs or his or her designee shall advance a priority or extend a stay if it is in the best interest of the University's educational, research, or patient care mission. For the purposes of this rule, the following definitions will be used:

(1) "First Priority". An Oregon Health Sciences University or Portland State University student, on a short term occupancy or long term tenancy basis, for a maximum of four terms per academic year.

(2) "Second Priority". An authorized person who is an undergraduate, graduate or post graduate student or a health professional, on a short term occupancy or long term tenancy basis, for a maximum of four terms per academic year.

(3) "Third Priority". An authorized person who is a member of an educationally-related conference group which has signed a contract with the University, on a short term occupancy basis, for a maximum of four weeks.

(4) "Fourth Priority". An authorized person who is a University Hospital patient, on a short term occupancy basis, for a maximum of two weeks.

(5) "Fifth Priority". An authorized person who is an immediate family member of a University Hospital patient, or an

immediate family member of a Residence Hall tenant, on a short term occupancy basis, for a maximum of two weeks.

Stat. Auth.: ORS Ch. 351 & 352.055

Hist.: HSU 5-1993, f. & cert. ef. 5-11-93

#### **572-013-0040**

##### **Rates of Charges and Deposits**

(1) "Room Rates". Based on provisions found in OAR 580-040-0040, Residence Hall room rates are set by the Oregon State Board of Higher Education following a public hearing. Room rates will be available from the Residence Hall Director following action by the Oregon State Board of Higher Education. The State Board of Higher Education has the authority and reserves the right to change room rates during the academic year.

(2) "Proration of Room Charges":

(a) If a tenant or occupant moves into the Residence Hall prior to the first day of classes or commencement of a University sponsored educational activity, the tenant or occupant shall pay to the University for each day a daily charge based on 1/30th of the selected Residence Hall Contract monthly rate;

(b) The date on which the tenant or occupant officially checks out of the Residence Hall will be used to determine the proration of charges rather than the date on which the tenant or occupant withdraws from an academic degree program at the Oregon Health Sciences University or Portland State University, or from an Oregon Health Sciences University sponsored educational activity. The tenant or occupant shall pay to the University for each day a daily charge based on one thirtieth of the selected Residence Hall Contract monthly rate. In no case, however, will the proration of charges be based on a check-out date earlier than the date the tenant or occupant officially withdrew from an academic degree program at the Oregon Health Sciences University or Portland State University or from an Oregon Health Sciences University sponsored educational activity.

(3) "Rent Payments". Rent is due the first of each month from tenants. A \$15 charge shall be assessed to a Residence Hall tenant on the 15th of the month, unless the Residence Hall Director is notified that the rent payment will be late. For late receipt of financial aid monies, a tenant shall sign a non-interest bearing promissory note payable to the Oregon Health Sciences University and signed and delivered to the Residence Hall Director. Occupants staying at the OHSU Residence Hall on a short term basis shall pay room charges in full on the first day of occupancy, unless prior arrangements have been made with and approved by the Residence Hall Director.

(4) "Deposits". A deposit specified in the Oregon Health Sciences University Residence Hall Contract shall be assessed to each Residence Hall tenant as an application fee/security deposit for the faithful performance by the tenant of all terms, covenants, and conditions of the Residence Hall Contract, to include occupancy during the entire Contract period.

(5) "Social Fee". A \$15 social fee charge shall be assessed each academic year to a tenant who has signed a three or four term Residence Hall Contract.

(6) "Keys and Entry Cards". A \$25 charge shall be assessed to a tenant or occupant for each lost key and entry card. No refund shall be given to a tenant or occupant for a key or entry card returned more than two days after he or she vacated the Residence Hall.

(7) "Laundry Facility Charge". Each month, a \$5 laundry charge will be assessed to each tenant for use of the laundry facilities. The laundry charge shall be prorated at \$1.25 per week when a tenant moves in or moves out of the Residence Hall. An occupant staying in the Residence Hall for more than two consecutive days shall pay the weekly charge of \$1.25 for use of the laundry facilities.

(8) "Contract Termination Charge". A charge specified in the Residence Hall Contract will be assessed to a tenant who is evicted from, moves from, or otherwise leaves the Residence Hall, but is not released from the Residence Hall Contract or does not withdraw from an academic degree program at the Oregon Health Sciences University or Portland State University or an Oregon

Health Sciences University sponsored educational activity.

Stat. Auth.: ORS Ch. 351 & 352.055

Hist.: HSU 5-1993, f. & cert. ef. 5-11-93

#### **572-013-0050**

##### **Residence Hall Housing Rules**

(1) "General Rules". Each Residence Hall tenant or occupant shall abide by all federal laws, Oregon laws, Portland city ordinances, Oregon State Board of Higher Education rules or policies, and all University rules and policies. The Residence Hall Director shall have the authority to define and adopt general housekeeping, public safety, good neighbor, and miscellaneous housing policies.

(2) "Behavior". Good judgement, personal honesty, and common sense are expected of each tenant or occupant staying in the Residence Hall.

(3) "Alcoholic Beverages". In compliance with Oregon State Law, each Residence Hall tenant or occupant must be 21 years of age or older to possess or consume any alcoholic beverage. Excessive use or drunkenness is prohibited. No alcoholic beverages are allowed in common areas on the Residence Hall premises during sponsored events, unless an alcohol permit form has been applied for an authorized in writing by the Vice President of Academic Affairs or his or her designee, and a copy of which has been submitted to the Residence Hall Director. Violations may result in University disciplinary action.

(4) "Appliances":

(a) The following appliances are prohibited in Residence Hall rooms:

(A) Heating or cooking appliances;

(B) Sun lamps;

(C) Air conditioners.

(b) Refrigerators are allowable if counter size (2.5 cubic feet maximum). Electric toaster ovens, toasters, crock pots, microwave ovens, and frying pans may be used in kitchen areas only.

(5) "Flammables". Open flames such as candles, lab burners, or torches are prohibited, as they create a fire hazard.

(6) "Laundry Facilities". Laundry facilities are only for the use of tenants and occupants of the Residence Hall.

(7) "Noise". Each Residence Hall tenant or occupant is expected to be considerate of other residents at all times. This means respecting another's right to sleep, study, and generally not to be disturbed. Quiet hours are from 10 p.m. to 6 a.m. Sunday through Thursday, and 12 a.m. to 6 a.m. on Fridays and Saturdays.

(8) "Personal Property". Each Residence Hall tenant or occupant is responsible for the custody and security of his or her personal belongings at all times. The University is not responsible for loss or damage of personal property in the Residence Hall due to fire, theft, water or interruptions of water, heat, or other utilities or resulting from any other cause.

(9) "Pets". Except for fish in aquariums, pets are prohibited in the Residence Hall.

(10) "Damages/Loss". Each Residence Hall tenant or occupant is financially responsible for the general condition of the room and equipment assigned to him or her, including loss and damages, and shall keep the assigned room, equipment and fixtures free from damage. The tenant or occupant shall reimburse the University for any costs, expenses or liabilities resulting from damage to the assigned room, fixtures, equipment, or Residence Hall common areas by the tenant or occupant or guest(s) or invitees of the tenant or occupant.

(11) "Drugs". Controlled substances not prescribed by a physician are prohibited on the Residence Hall premises.

(12) "Smoking". Each Residence Hall tenant or occupant may only smoke in the privacy of his or her own room. Smoking is expressly prohibited in all common areas of the Residence Hall.

(13) "Fire Safety Equipment". Tampering with fire safety equipment (smoke alarms, pull stations, hoses, sprinklers, room signs, etc.) or setting off fire alarms is prohibited and punishable by eviction. Fire escapes shall be used only in emergency situations.

(14) "Firearms". Firearms and dangerous weapons are

prohibited in the Residence Hall.

(15) "Fireworks". Possession of fireworks, volatile chemicals, or explosives are prohibited in the Residence Hall.

(16) "Room Painting, Remodeling and Repairs". The tenant or occupant is not permitted to paint, remodel, or repair any Residence Hall rooms or common area without written permission from the Residence Hall Director. Any needed repair work or damaged equipment or fixtures shall be reported promptly to the Residence Hall Director. The tenant or occupant may individualize his or her living area, but shall not create safety, fire or health hazards.

(17) "Roof Access". Access to the Residence Hall room is prohibited, and a tenant or occupant staying in the Residence Hall who is found on the roof is subject to eviction. A \$50 charge shall also be assessed.

(18) "Single Rooms". Single rooms are limited. If available single rooms have not been assigned, incoming tenants will be given single rooms based on the date they move into the building contingent upon their commitment to a three or four term Residence Hall Contract. If there are more tenants requesting single rooms than there is space available, and a three or four term Residence Hall Contract has been signed, a tenant will be placed on the Single Room Waiting List. The priority of the list is based on the move-in date of the tenants waiting; i.e., the earlier a tenant has moved in, the higher he or she is on the waiting list. In the absence of single room availability, an incoming tenant, even if he or she has requested a single room, will be given a double room, will be charged the double room rate, and will be subject to having a roommate. Tenants signing a Residence Hall Contract for less than three terms are not eligible for a single room. An exception to this priority list rule may occur during Summer term when occupancy is low and single rooms may be rented without displacing tenants, conference attendees, or other occupants provided that the tenant shall be reassigned to a double room during the subsequent Fall term, thus returning the tenant to his or her former status on the Single Room Waiting List. For good cause, the Vice President of Academic Affairs or his or her designee may advance a tenant or occupant on the Single Room Waiting List if it is in the best interest of the University's educational, research or patient care mission.

(19) "Room Assignments". The Residence Hall Director may make assignments and reassignments of room accommodations at any time during any term.

(20) "Rights of Entry". The University shall have reasonable access to a tenant's or occupant's assigned room and at reasonable times for the purpose of performing any of the University's responsibilities with regard to maintenance, cleaning, replacement and repairs of utilities and fixtures on or about the premises, for the purpose of inspecting the premises to determine whether a tenant or occupant is complying with all of the terms and conditions of the Residence Hall Contract, for locating missing common area furniture and fixtures, and for the purpose of performing any work in those premises which may be necessary by reason of the tenant's or occupant's default under the terms of the Residence Hall Contract. The University shall have an absolute right of entry to the tenant's or occupant's assigned room whenever the University reasonably believes that emergency conditions exist which might threaten the health, safety, welfare or property of the University, the tenant or occupant, or other tenants and occupants living in the Residence Hall.

(21) "Contract Renewal". The University reserves the right not to renew a Residence Hall Contract with any tenant or occupant.

(22) "Previous Contracts". The Residence Hall Contract, as executed each academic year, or for the purposes of short term occupancy, supercedes and replaces all prior housing Contracts between the University and the tenant or occupant.

(23) "Cancellation of Residence Hall Contract". Cancellation of the Residence Hall Contract at the request of a Residence Hall tenant shall occur upon submission to and approval by the Residence Hall Director of a completed Contract Waiver Form.

(24) "Termination of Residence Hall Contract". Termination of the Residence Hall Contract with any Residence Hall tenant or

occupant shall be for late arrivals/no shows, for default or breach of Residence Hall Contract, for non-admission and enrollment in an academic degree program at the Oregon Health Sciences University or Portland State University, academic disqualification or suspension from Oregon Health Sciences University or Portland State University, or for withdrawal from an Oregon Health Sciences University sponsored educational activity.

(25) "Notice of Eviction". Any Residence Hall tenant or occupant who violates any federal law, Oregon law, Portland city ordinance, Oregon State Board of Higher Education rule or policy, or any University rule and policy or the Residence Hall contract may be subject to eviction.

(26) "Legal Costs". A Residence Hall tenant or occupant shall pay all costs of proceedings by the University for recovery of the possession of the premises, or for the enforcement of any terms and conditions of the Residence Hall Contract, including reasonable attorneys fees at trial or upon appeal.

Stat. Auth.: ORS Ch. 351 & 352.055

Hist.: HSU 5-1993, f. & cert. ef. 5-11-93

## DIVISION 14

### STUDENT ACTIVITIES BUILDING

#### **572-0140-005**

##### **Student Activities Building Guest Fee**

The **Schedule of Fees** of the Oregon Health Sciences University for use by guests of the Student Activities Building is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the OHSU Vice President.]

Stat. Auth.: ORS Ch. 351

Hist.: HSC 1-1979, f. 1-31-79, ef. 2-1-79; HSC 5-1981, f. 7-29-81, ef. 8-1-81;

Renumbered from 572-10-400; HSU 4-1985, f. & ef. 7-2-85

#### **572-0140-010**

##### **Student Activities Building Fee Schedule, Equipment Rental, and Course Fees**

The **Student Activities Building Fee, Equipment Rental, and Course Fees Schedules** for the Oregon Health Sciences University are hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the OHSU Vice President.]

Stat. Auth.: ORS Ch. 351

Hist.: HSC 4-1979, f. 6-21-79, ef. 7-1-79; HSC 9-1980, f. 12-30-80, ef. 1-1-81;

HSC 5-1981, f. 7-29-81, ef. 8-1-81; HSC 6-1981, f. 8-20-81, ef. 9-1-81;

Renumbered from 572-10-405; HSU 4-1985, f. & ef. 7-2-85

## DIVISION 15

### **UNCLASSIFIED STAFF GRIEVANCE PROCEDURE (Other Than Discrimination Complaints)**

#### **572-015-0005**

##### **Resolution of Grievances**

(1) The following procedures are intended to provide an aggrieved person who is a member of the unclassified staff at Oregon Health Sciences University (or a recently terminated employee, i.e., within one month), and for whom no other grievance procedure exists with an opportunity to have the grievance examined by an appropriate group of colleagues. Unclassified staff means:

(a) Teaching Faculty;

(b) Administrative Faculty; and

(c) Research Assistants and Associates;

(d) Resolution of a grievance shall be sought as quickly as possible within the framework of these rules.

(2) The following procedures fulfill OHSU's obligations under OAR 580-021-0050 to adopt grievance procedures for academic employees. These procedures apply to all members of



the unclassified staff of OHSU, including those who are not acting in an academic role. However, the Medical Board of the University Hospital may establish grievance procedure bylaws for members of the medical staff for actions relating to the member's clinical appointment at the University Hospital. These rules shall govern in the absence of any grievance procedures adopted or addressed in the by laws of the Medical Board.

(3) These procedures apply to persons who have a grievance as defined by OAR 580-021-0050(2). They are not available to grieve or appeal sanctions for cause. Detailed procedures covering sanctions for cause are provided in the Administrative Rules of the Oregon State Board of Higher Education. This grievance procedure also is not intended for use in cases involving affirmative action or discrimination grievances. A separate grievance procedure applies to these grievances. It is also not intended for use in the case of termination of tenured faculty due to program elimination or reduction. The University procedure for program elimination or reduction includes an appeal process.

(4) The Institution may elect not to proceed with a grievance if the grievant also seeks resolution in another forum.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90

#### **572-015-0010**

##### **Grievance Panel**

(1) A 50 member Grievance Panel shall be selected from:

(a) Teaching Faculty, as represented by the Faculty Senate;

(b) Administrative Faculty; and

(c) Research Assistants and Research Associates;

(d) Each group shall have proportional representation on the Panel based on the size of each group as determined by the Office of Academic Affairs. Members from Teaching Faculty will be selected by the Faculty Senate. Members from the Administrative Faculty and from the Research Assistants and Associate group will be selected by a process each group develops. Lacking that, they will be appointed by the President or his designee.

(2) The President of the University, or his designee, shall convene and charge the Grievance Panel. The Panel shall elect from among its members a Chair and a Vice Chair. The Chair and Vice Chair shall serve two year terms. The Vice Chair shall succeed the Chair for a two year term following the end of the Chair's term. Upon the succession, the Panel shall elect a new Vice Chair. The Chair and Vice Chair may not be from the same school or affiliated units.

(3) Grievance Panel members shall serve for four year terms. Individuals are eligible to be reappointed for a second term after which a period of at least one year must elapse before they are eligible to be reappointed. Each constituent group will make new appointments and/or reappointments by the same mechanism described in section (1) of this rule.

(4) If a Panel member cannot complete a term, the remaining portion of the member's term will be completed by an individual from and appointed by the same constituent group as the resigning member.

(5) When the Panel is initially formed, each constituent group will designate approximately half of their appointees to serve for a period of two years, and half to serve a full term of four years. After two years, each person appointed to serve for this period shall be eligible to be reappointed for a full four year term. Those members who are reappointed shall have the same limitations on reappointment as described in section (3) of this rule.

(6) A Panel member who is serving on a Hearing Committee considering a grievance at the time the appointment to the Panel expires, shall continue to serve in this capacity until the grievance has been adequately resolved, even though a replacement on the Grievance Panel has been appointed.

(7) The Panel is empowered to set its own rules regarding internal operations, such as replacing a Chair who resigns.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90

#### **572-015-0015**

##### **Initiation of Grievance Procedures**

(1) A person who has a grievance shall bring the grievance to the attention of an appropriate individual (i.e., immediate supervisor, advisor, department chairman, or appropriate administrator) within 20 week days from the date that the grievant knew or should have known of the alleged grievance. Upon being notified of the matter, the appropriate individual will arrange for a meeting, at a time convenient to the grievant, but within five working days of notification.

(2) If the grievant is unable to resolve the grievance to the grievant's satisfaction, the grievant may file a grievance with any of the following designated individuals or offices: Office of Academic Affairs, Affirmative Action/Equal Opportunity Department, Chairman of the Grievance Panel, or acting representative of the Chairman of the Grievance Panel. The grievant will briefly describe the nature of the grievance and the nature of the redress which the grievant is seeking. The grievant also will choose whether to enter the informal process (OAR 572-015-0020) or the formal process (OAR 572-015-0025).

(3) All grievances will be forwarded to the Affirmative Action/Equal Opportunity Department to determine whether the grievance should be classified as a discrimination complaint.

(4) The Chair of the Grievance Panel, with the assistance of the Office of Academic Affairs, will ascertain that the person or persons being grieved against have been properly identified.

(5) The Vice President for Academic Affairs may waive the time limits of section (1) of this rule.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90

#### **572-015-0020**

##### **Informal Procedure**

(1) The Chair of the Grievance Panel, in conjunction with the Office of Academic Affairs, will appoint a mediator or mediators acceptable to both parties within five week days of receipt of the grievance. In the event the parties fail to agree to one of the nominated mediator(s) the Vice-President for Academic Affairs or the Vice-President's designee may declare mediation unsuccessful in which case the grievance shall move to the next stage of the grievance procedure. The mediator and the two parties will meet within the next ten working days to discuss the problem. Further meetings will continue to be arranged as long as the mediator and both parties believe that progress is being made. The mediator will apprise the Chair of the Grievance Panel every 20 working days of the progress being made.

(2) The grievant will be informed by the mediator of the grievant's right to have a resolution of the grievance within 180 calendar days of having filed a grievance. The grievant will also be informed that by entering the informal process, it is possible to take longer than 180 days, but that no other internal administrative rights accorded to the grievant will be lost by attempting to resolve the grievance through the informal process. Additionally, the grievant may at any time choose to enter the formal procedure (OAR 572-015-0025) which shall be concluded in no more than 180 days of entering the formal procedure.

(3) If a satisfactory resolution is reached, the mediator will prepare a statement for both parties to sign. The statement will include a summary of the grievance and the agreed to resolution. A copy of the agreement will be given to both parties, the Office of Academic Affairs, and the Chair of the Grievance Panel.

(4) The Office of Academic Affairs will be responsible for overseeing the implementation of the agreement.

(5) The mediator may withdraw from negotiations if the mediator believes that an acceptable resolution is not likely to occur. If the mediator decides to withdraw, the mediator will inform both parties, the Chair of the Grievance Panel, and the Office of Academic Affairs. The Chair then has five week days to either appoint another mediator, with the help of the Office of Academic Affairs, or to inform both parties that the Chair is terminating the informal procedure.



(6) Whenever the informal procedure is terminated without a resolution, the mediator will prepare a written report within ten week days of the termination. The report will include:

- (a) A summary of the grievance;
- (b) A summary of the information gathered by the mediator;
- (c) A recommendation concerning the merits of the grievance; and
- (d) any recommended remedial action.

(7) The report will also inform the grievant of the grievant's right to file a formal grievance and explain to the grievant the steps necessary to accomplish this as described in OAR 572-015-0025(1). A copy of the report will be sent to both parties and the Chair of the Grievance Panel. If the grievant chooses to enter the formal grievance process, the report will also be sent to the Hearing Committee assigned to the grievance under OAR 572-015-0025.

(8) When the informal grievance procedure is terminated without a resolution, the grievant has ten week days after receiving the mediator's written report as described in section (6) of this rule to file a formal grievance as described in OAR 572-015-0025. The grievant may terminate the informal procedure by informing the mediator in writing. The mediator will acknowledge receipt of the termination notice in writing to both parties and the Chair of the Grievance Panel.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90; HSU 2-1992(Temp), f. & cert. ef. 1-14-92; HSU 7-1992, f. & cert. ef. 9-11-92

#### **572-015-0025**

##### **Initiation of a Formal Grievance Procedure**

(1) To initiate the formal grievance procedure, the grievant must file a written grievance with the Chair of the Grievance Panel within either:

- (a) 20 week days of the time the grievant's first meeting with the appropriate individual; or
- (b) Within ten days of receiving the mediator's report; or
- (c) The Vice President for Academic Affairs may waive the time limits of section (1) of this rule. To file the grievance, the grievant will submit documentation describing the nature of the grievance, a description of the circumstances under which the grievance took place, and the redress which the grievant is seeking to the Chair of the Grievance Panel.

(2) Upon being notified of the existence of a formal grievance, the Chair of the Grievance Panel shall select a Hearing Committee consisting of three to seven members of the Panel. The Hearing Committee will attempt to resolve the matter. The size of the committee will depend on the circumstances of the case in question and will be determined by the Chair. If the Chair is unable to act because of reasons set out in section (4) of this rule, or if the Chair is unable to appoint a Hearing Committee in five week days, or for any other reason, the Vice Chair shall select the Hearing Committee. If neither the Chair nor the Vice Chair can act in the allotted time, responsibility for committee selection shall go to the most senior available member of the Panel. For this purpose, seniority shall be determined first by length of service on the Panel and second by alphabetical order of last name. This seniority list will be maintained by the Office of Academic Affairs and that office will notify the appropriate person so that a grievance may be acted upon speedily.

(3) Use of the hearing committee must be at the grievant's option.

(4) Both parties to the grievance shall be accorded two general peremptory challenges in which they may object to the inclusion of a member selected to serve on the Hearing Committee.

(5) Both parties shall be accorded two additional peremptory challenges in which each party may object to the inclusion of a member selected to serve on the Hearing Committee who is not a member of either party's constituent group as defined in OAR 572-015-0010(1). In this event, other members of the Panel will be selected to serve on the Hearing Committee.

(6) Panel members are not eligible to serve on the Hearing

Committee if they belong to the same academic department or office as either party, believe themselves to have a special interest in, or have special knowledge of the grievance. The person responsible for committee selection as described in section (2) of this rule who fulfills any of the above conditions is disqualified from the committee selection process, which will then be carried out by the next most senior qualified member of the Panel.

(7) The Hearing Committee will be convened within ten week days following receipt by the Grievance Panel Chair of the grievant's written complaint. The President, or his designee shall instruct the hearing committee regarding the conduct of the hearing and the scope of their authority.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90

#### **572-015-0030**

##### **Hearing Procedure for a Formal Grievance**

(1) At the first meeting, the Hearing Committee shall elect one member to act as Chair until the grievance under consideration has been resolved or until a recommended solution has been forwarded to the appropriate administrative head as defined in OAR 572-015-0040.

(2) The hearing will be open to the public at the option of the grievant, to the extent allowed by law.

(3) The Committee will hear all sides of the matter and review such documentation as is made available to it. All parties to the grievance and individuals having custody of records, special knowledge, or other factors relevant to the grievance, will be expected to cooperate with the Hearing Committee, to supply any relevant documentation it requests, and to appear before the Committee if it so requests.

(4) Each party must have an opportunity to present argument and the grievant has the right of rebuttal at the hearing.

(5) The grievance procedure outlined in this document is not intended to be an adversarial legal procedure. However, at any stage of the proceedings, each party to the grievance may be accompanied by an advisor of that party's choice. If authorized by the party to the grievance and the Chair of the Committee, such advisors may speak on the party's behalf. A written summary of this hearing must be maintained by the Committee. All parties to the grievance have access to this summary. Each party is responsible for the costs of that party's representation.

(6) Besides its role as a fact finding body, the Hearing Committee will attempt to mediate the grievance. Any time during the hearing procedure that an acceptable resolution is reached, the Hearing Committee will prepare a statement for both parties to sign. The statement will include a summary of the grievance and the agreed to resolution. A copy of the agreement will be given to both parties, to the Office of Academic Affairs, and to the Chair of the Grievance Panel.

(7) The Office of Academic Affairs will be responsible for overseeing implementation of the agreement.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90

#### **572-015-0035**

##### **Hearing Committee's Report**

(1) The hearing may be recorded and all parties to the grievance shall have access to this recording.

(2) The Chair of the Hearing Committee will prepare a written summary of each meeting. After amendments as appropriate, each committee member will sign and thus attest to the accuracy of these summaries. The summaries shall be appended to the copy of the committee's report which is sent to the President of the university.

(3) If a satisfactory resolution is reached, the Chair of the Hearing Committee will prepare a statement for both parties to sign. The statement will include a summary of the grievance and the agreed to resolution. A copy of the agreement will be given to both parties, to the office of Academic Affairs, and to the Chair of the Grievance Panel.

(4) The Office of Academic Affairs will be responsible for overseeing the implementation of the agreement.

(5) If a satisfactory resolution to the problem cannot be found within 30 calendar days after convening the Hearing Committee, then a written report from the committee shall be forwarded to the President of the University. The report shall include:

(a) A report of the committee's findings of fact in the matter;

(b) Written conclusions based only on the evidence presented at the hearing;

(c) A list of solutions and/or compromises which have been proposed to the parties to the grievance by the Hearing Committee; and

(d) The recommended solution to the grievance. Copies of the Hearing Committee's report shall be forwarded to all parties to the grievance.

(6) Each party will have ten working days after receipt of the Hearing Committee's Report to submit comments on the report to the President of the University.

(7) The President will take action to resolve the grievance within 20 week days of receiving the Hearing Committee's report.

(8) If the President rejects or modifies the recommendation of the Hearing Committee, the reasons shall be stated in writing and a copy given to both parties to the grievance, the Hearing Committee, and the President of the Grievance Panel.

(9) A description of reports is already provided in situations where the parties have already reached an acceptable resolution (OAR 572-015-0020(3) for resolutions reached during the informal process and OAR 572-015-0030(6) for resolutions reached during the formal hearing procedure).

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90

#### **572-015-0040**

##### **Appeals**

The President's decision may be appealed within ten week days of receipt of the President's decision to the Board of the Oregon State System of Higher Education as specified in OAR 580-021-0055.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 7-1988, f. & cert. ef. 12-1-88; HSU 1-1990, f. 2-13-90, cert. ef. 2-9-90

### **DIVISION 16**

#### **EQUAL OPPORTUNITY GRIEVANCE PROCEDURES**

#### **572-016-0005**

##### **Introduction**

(1) In accordance with the Affirmative Action Policy of the Oregon Health Sciences University, the procedures that follow are established to provide an opportunity to request and receive consideration of any grievances relating to services and/or terms and conditions of employment or education that are believed to be the result of prohibited discrimination.

(2) The procedures described below are applicable to any member of the public, student, trainee, employee or applicant for educational programs, services or employment who believes that she/he has been the victim of illegal discrimination on the basis of race, color, religion, marital status, national origin, sex, age, handicap, Vietnam era veteran's status, or any other applicable basis in Law. These procedures are promulgated for their accessibility, simplicity, speed, and high standards of fairness in seeking redress of perceived injustices. The Affirmative Action/Equal Opportunity (AA/EO) Department shall provide assistance to any person at any point in the process.

(3) Persons who make use of these procedures are entitled to a fair hearing without fear of harassment or retaliation. Retaliation of any kind taken against anyone as a result of that person's using or attempting to use these procedures, cooperating in an investigation, or participating in any manner in any activities

under these procedures is prohibited and shall be regarded as a separate and distinct grievable matter.

(4) These grievance procedures are intended to fulfill the requirements of OAR 580-015-0015 and to provide a procedure for nondisciplinary personnel decisions in matters of employment discrimination pursuant to OAR Chapter 580, Division 21. The Oregon Health Sciences University may elect not to proceed with a grievance if the complainant also seeks resolution in another forum.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 8-1988, f. & cert. ef. 12-1-88; HSU 2-1990, f. & cert. ef. 2-13-90

#### **572-016-0010**

##### **The Affirmative Action Grievance Panel**

(1) The Affirmative Action Grievance Panel shall be formed to provide a pool from which Affirmative Action Grievance Committees are appointed. The Grievance Committee has the responsibilities specified under OAR 572-016-0015(3) STEP 3: Committee Hearing, below.

(2) The Grievance Panel shall be composed of individuals representing the diverse population of the University, including racial/ethnic minorities and both sexes. The Panel shall include representation from the following categories:

(a) Teaching faculty, administrative faculty, research assistants and research associates who are members of the Division 15 Grievance Panel shall also be members of this grievance panel;

(b) Five students: one from each school, the graduate programs and allied health programs;

(c) Ten classified-represented employees from bargaining units that represent OHSU employees;

(d) Five from management service;

(e) A representative from the University Hospital Patient Advocate's Office;

(f) Two members of the executive staff.

(3) All representatives to the Panel are to be selected according to the following guidelines:

(a) Every attempt shall be made to ensure that nominees reflect the diverse population of the University;

(b) The groups of employees concerned and/or their representatives shall be given adequate opportunity to express interest and provide nominations of employees to serve on the panel.

(c) The emphasis shall be on nominating able individuals who are willing to serve;

(d) Students are nominated by the All-Hill Student Council;

(e) Classified-represented personnel, management service personnel, executive staff personnel, and the patient advocate's representative shall be nominated by the Executive Staff and the AA/EO Department;

(f) Except for the members of the Division 15 Grievance Panel, at least twice the number of names necessary to fill the positions allocated to each of the groups shall be submitted to the President. The President shall appoint the members to the Grievance Panel from the individuals nominated.

(4) The Grievance Panel shall elect a Chair and a Vice Chair. For purposes of this election representation from the Division 15 Grievance Panel shall consist of the following:

(a) Six members of the teaching faculty plus three administrative faculty;

(b) Three research associates or research assistants. The Chair shall serve for a period of one year, and then shall be succeeded by the Vice Chair. Thereupon, the Grievance Panel shall elect a new Vice Chair. The Chair and the Vice Chair shall be from different organizational units within the University. The Chair shall be responsible for notifying the President of vacancies on the Panel.

(5) The term of service on the Panel is four years. Individuals may be reappointed for a second term after which a period of at least one year must elapse before any further reappointment. When the Panel is initially formed, the President shall designate approximately one half of the members to serve a two year term,

the remaining members shall serve the full term of four years. At the expiration of an individual's term of service, that individual shall be replaced by an individual from the same category of representation. In the event that a Panel member is serving on an Affirmative Action Grievance Committee when their term of service expires, the member shall continue to serve in that capacity until the Committee has completed its activities.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 8-1988, f. & cert. ef. 12-1-88; HSU 2-1990, f. & cert. ef. 2-13-90

## **572-016-0015**

### **The Grievance Procedure**

(1) STEP 1: Informal Process: Any person having a discrimination grievance is encouraged to bring the grievance to the attention of the Appropriate Individual with direct responsibility for the work, service, or academic unit involved; (i.e., immediate supervisor, patient advocate representative, or advisor), within 20 week days from the date that the person knew or should have known of the alleged discrimination. Upon being notified of the matter, the Appropriate Individual shall arrange for a meeting, at a time convenient to the complainant, but within five week days of notification. The AA/EO Department shall provide assistance in preparing for this meeting, including identifying the Appropriate Individual. The Appropriate Individual and the complainant shall discuss the grievance in an attempt to resolve the matter in a mutually satisfactory manner. For purposes of this document a mutually acceptable resolution is one that is acceptable to the complainant, the Appropriate Administrator<sup>2</sup>, the party or parties complained against, and the AA/EO Department. Within five week days of the conclusion of the meeting the Appropriate Individual shall send a brief dated written summary of the grievance and any mutually acceptable resolution(s) to the complainant, the party or parties complained against and the AA/EO Department. The statement shall be read and reviewed by the complainant with the understanding that this is merely to record this informal attempt at resolution. The complainant and the party or parties complained against may include a brief version of the same with this summary. The complainant, the party or parties complained against, the Appropriate Individual, and the AA/EO Department shall retain a copy of the summary(ies). The AA/EO Department shall assist in implementing the resolution(s) and shall periodically inform the Appropriate Administrator of the progress in implementing the resolution(s).

(2) STEP 2: Grievances Filed with the AA/EO Department. If the complainant, the party or parties complained against and the Appropriate Individual are not able to reach a mutually acceptable resolution of the grievance, or if the complainant chooses not to use STEP 1, the complainant may file a written grievance with the AA/EO Department. The written grievance must be filed within five week days from the date that the complainant received the summary of the STEP 1 meeting. If the complainant chooses not to use STEP 1, then the written grievance should be filed within 20 week days from the time the complainant knew or should have known of the alleged discrimination. The written grievance shall include a full description of the alleged discrimination and the redress sought. Within ten week days following the filing of the written grievance the AA/EO Department shall interview the complainant, begin a thorough investigation<sup>2</sup> into the facts surrounding the grievance, and attempt to arrive at a mutually satisfactory resolution. After completing the investigation or arriving at a mutually satisfactory resolution, the AA/EO Department shall prepare a report for the Appropriate Administrator. The report shall contain the following:

- (a) A summary of the grievance;
- (b) A summary of the activities taken in response to the grievance;
- (c) A summary of the information obtained as a result of these activities;
- (d) An evaluation of the information in light of the allegations; and applicable law(s) and/or policy(ies);
- (e) Where appropriate, a record of any mutually acceptable resolution;

(f) If there is no mutually acceptable resolution, then a recommendation concerning the merits of the grievance and any remedial action. The AA/EO Department shall forward a copy of the report to the complainant, the party or parties complained against and the Major Unit administrator.<sup>3</sup> The Appropriate Administrator shall inform the complainant, the party or parties complained against and the AA/EO Department of their decision concerning the recommendation(s) contained in the STEP 2 report within five week days of receiving the STEP 2 report. The AA/EO Department shall assist in implementing the action(s) taken in response to the grievance. The AA/EO Department shall periodically inform the Appropriate Administrator of the progress in implementing these action(s). Students who are not satisfied with the results of STEP 2 may appeal directly to the Oregon State System of Higher Education in accordance with Administrative Rule 580-015-0105.

(3) STEP 3: Committee Hearing: In the event that the complainant is not satisfied with the results of STEP 2, the complainant may request a hearing before an Affirmative Action Grievance Committee. The request for a hearing shall be in writing, include a copy of the STEP 2 report, and shall be delivered to the Chair of the Grievance Panel within ten week days following the complainant's receipt of the notice of the STEP 2 results. The AA/EO Department shall assist in making the request for a hearing. Within ten week days following receipt of the request for hearing, a Grievance Committee shall review the grievance in its entirety. As part of this review, the Committee shall conduct an independent investigation of the grievance to the extent that they, in consultation<sup>4</sup> with the AA/EO Department, determine necessary for a complete and thorough consideration of the grievance. The investigation may require participation of any and all persons with knowledge pertaining to the grievance. Upon receiving a request for a hearing the Chair of the Grievance Panel shall select an Affirmative Action Grievance Committee consisting of three to seven members. If the Chair is subject to disqualification because of reasons set out below, or is unable to perform these duties within the prescribed time-lines, the Vice Chair shall select the Committee. If both the Chair and the Vice Chair are disqualified or unable to perform these duties within the prescribed time-lines, responsibility for committee selection shall go to the most senior available member of the Grievance Panel. For this purpose, seniority shall be determined first by length of service on the Panel, and second, by alphabetical order of the last name. The Committee shall contain at least one member who belongs to the same job group<sup>5</sup> as the complainant and one member who belongs to the same job group as the party accused. If the complainant or party accused is a student, then at least one member of the Committee shall be a student. The seniority list and a list of job groups shall be maintained in the AA/EO Department. The AA/EO Department shall provide assistance so that a grievance may be acted on within the prescribed time-lines. Reasons for disqualification from serving on an Affirmative Action Grievance Committee include; belonging to the same department or immediate administrative unit as a party to the grievance, working closely with any of the parties to the grievance, or having a special interest in the case. The Committee shall elect a Chair to preside over the hearing. Any parties to the grievance and individuals having custody of any documents, records, or knowledge of the grievance shall cooperate with the Committee, supply any documents requested, and appear before the Committee. The grievance procedures described in this document are not intended to be an adversarial legal procedure. The hearing shall be open to the public at the option of the complainant to the extent allowed by law. At any stage of the proceedings parties may be accompanied by an advisor of their choice at their own expense. If authorized by the Committee and the party such advisors may speak on behalf of their clients. A written summary of this hearing must be maintained by the committee. All parties to the grievance have access to this summary. The hearing may be recorded and all parties to the grievance shall have access to this recording. Within 5 week days of the completion of the review of the grievance the Committee shall prepare a report and recommendation for the President. The



report shall include:

(a) A copy of the STEP 2 report prepared by the AA/EO Department;

(b) A copy of the request for a hearing;

(c) A summary of the hearing and the information obtained;

(d) An evaluation of the information in light of the allegations and applicable law(s) and/or policy(ies);

(e) A recommendation concerning the merits of the grievance and, where appropriate, any remedial action.

(f) A copy of this report will be forwarded to the complainant, the party or parties complained against, the AA/EO Department, and the Major Unit Administrator. The President or designee shall have 10 week days from receipt of the report to accept, modify, or reject the recommendation(s) of the Committee. The President or designee will notify the complainant, party complained against, AA/EO Department, Chair of the Affirmative Action Grievance Committee, Chair of the Grievance Panel, and the Major Unit Administrator, of the President's decision within these ten week days. In cases where the President's decision is to modify or reject the recommendation(s) of the Committee the notice must list the reasons for these actions. The President's decision shall be final and binding insofar as internal administrative procedures are concerned. Members of the academic staff and students may appeal the President's decision to the Oregon State System of Higher Education in accordance with Administrative Rule 580-021-0055. In the event that the grievance involves the President, then the Affirmative Action Grievance Committee shall forward their report to the Chancellor of the Oregon State System of Higher Education for action.

<sup>1</sup>The Appropriate Administrator is the administrator having responsibility for the work, service, or academic unit involved and who is not an accused party or a complainant. This person has responsibility for the appropriate individual identified in step 1.

<sup>2</sup>A thorough investigation is one that conforms to the Affirmative Action/Equal Opportunity Department's procedures and includes, among other things, notice of the complaint to any party accused of discrimination and an opportunity to for any such party to present, and have considered, any relevant information.

<sup>3</sup>The Major Administrative Units are defined in the Oregon Health Sciences University Affirmative Action Plan. They currently are: the School of Medicine, the School of Nursing, the School of Dentistry, University Hospital and Clinics, Central Administration, the Vollum Institute for BioMedical Research, the Child Development & Rehabilitation Center, the Biomedical Information & Communication Center, and the Center for Research or Occupational and Environmental Toxicology.

<sup>4</sup>A portion of this consultation shall consist of a Grievance Committee Orientation conducted according to Affirmative Action/Equal Opportunity Department's procedures which includes, among other things, orientation concerning confidentiality issues, managing the hearing, processing evidence, evaluating the grievance, and findings and recommendations.

<sup>5</sup>Job Groups, or Primary Occupational Activity, (P.O.A.), are defined in the OHSU Affirmative Action Plan and currently consist of the following: P.O.A. 10 Executive; P.O.A. 20 Faculty Tenured; P.O.A. 21 Faculty on Tenure Track; P.O.A. 22 Faculty Other; P.O.A. 30 Professional Non-Faculty Health Care Provider; P.O.A. 31 Professional Non-Faculty Administrative; P.O.A. 32 Professional Non-Faculty Nurses; P.O.A. 33 House Officers, P.O.A. 40 Clerical & Secretarial; P.O.A. 50 Technical Para-Professional Health Care Provider; P.O.A. 51 Technical Para-Professional Administrative; P.O.A. 60 Skilled Crafts, P.O.A. 70 Service & Maintenance.

Stat. Auth.: ORS Ch. 351

Hist.: HSU 2-1988(Temp), f. & cert. ef. 5-26-88; HSU 8-1988, f. & cert. ef. 12-1-88; HSU 2-1990, f. & cert. ef. 2-13-90

**572-016-0020** [Renumbered to 572-016-0015]

## DIVISION 17

### HEALTH INSURANCE REQUIREMENTS FOR NONIMMIGRANT STUDENTS AND THEIR

## DEPENDENTS

### **572-017-0200**

#### **Health Insurance Requirements for Nonimmigrant Foreign Students and Their Dependents**

(1) In order to assist the University in executing its reporting and certifying obligations under federal regulations, nonimmigrant foreign students at the Oregon Health Sciences University must demonstrate their ability to meet their financial responsibilities in full. The University hereby establishes that these responsibilities include the provision by nonimmigrant foreign students for health and accident care for themselves and dependent family members in the United States.

(2) All nonimmigrant foreign students enrolled part- or full-time at the Oregon Health Sciences University will be required to carry health and accident insurance for themselves and all their dependent family members in the United States.

(3) The health and accident policy carried by each nonimmigrant foreign student must provide coverage comparable to the one offered through OHSU or meet guidelines established by the National Association for Foreign Student Affairs or the American College Health Association. The policy may be underwritten by a foreign insurance carrier but it must be payable in the United States for medical expenses incurred in this country.

(4) Such insurance policy must be in force for a 12 month period commencing during the registration period of the student's first term at the University. Request for term-by-term insurance coverage, or for any coverage extending for a period of less than one year from the date of a student's first registration, must be made in writing to a foreign student advisor in the University's Office of Student Services. Exceptions may be granted in cases involving factors including, but not limited to, graduation during the academic year.

(5) Nonimmigrant foreign students must provide proof of adequate insurance coverage acceptable to the Office of Student Services before they are permitted to register for classes during their first term of enrollment for any given academic year. Documentation of such adequate coverage must indicate in English the insurance company's name and address for billing purposes, policy number, the coverage terms of the policy, the effective dates of the policy, any exclusions, the names of the individuals covered by the policy, and the maximum amount of coverage per accident and illness and/or in terms of cumulative benefits.

(6) If an enrolling nonimmigrant foreign student does not provide acceptable proof of adequate health insurance for him- or herself and for dependent family members in the United States, the Office of Student Services may restrict University registration and issuance of immigration documents (for travel, extensions of stay, employment request, practical training, dependent matters, etc.) for the student and the student's dependent family members.

(7) Nonimmigrant foreign students shall be notified in writing of these requirements before departing for Portland and again before they complete matriculation at the University. A similar notice shall appear in the University Bulletins next regularly published after the adoption of this rule. These notices shall inform such students that they may contest the factual premise underlying and proposed restriction referred to in section (6) of this rule by presenting their documentation and arguments before the Director of Student Services or that person's designee.

(8) Pending the resolution of any dispute over the conformity of a proffered policy with guidelines referred to in section (3) of this rule, the student proffering the insurance in question shall be permitted to register, and shall, in the event of an adverse decision compelling withdrawal from the University subsequent to registration, be guaranteed a refund of any tuition paid for the term in which withdrawal took place.

Stat. Auth.: ORS Ch. 351 & 352

Hist.: HSU 1-1989, f. & cert. ef. 1-25-89

## DIVISION 18



## STUDENT AND TRAINEE GRIEVANCE PROCEDURES

### 572-018-0000

#### Grievance for Complaints Other Than Discrimination, Sanction for Cause, or Academic Performance

(1) The following procedures are intended to provide an aggrieved person who is a formally admitted student or post-doctoral trainee and who was so enrolled at the time the action grieved occurred, and for whom no other grievance procedure exists with an opportunity to have the grievance examined by an appropriate group of colleagues.

(2) The institution may elect not to proceed with a grievance if the grievant also seeks resolution in another forum.

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: HSU 2-1995, f. & cert. ef. 6-30-95

### 572-018-0010

#### Grievance Panel/Committee/Counselors

Mechanisms to appoint grievance counselors, and hearing committees are described in the grievance section for each academic unit.

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: HSU 2-1995, f. & cert. ef. 6-30-95

### 572-018-0020

#### Initiation of Grievance Procedures

(1) A grievant shall bring the grievance to the attention of an appropriate individual within his/her academic unit/program (i.e., advisor, department chairperson, or administrator) within 20 week days from the date that the grievant knew or should have known of the alleged grievance. That individual shall arrange for a meeting with the grievant within 5 week days of the notification.

(2) If the appropriate individual, the grievant and the person or persons complained against are unable to resolve the grievance to their mutual satisfaction, the grievant may file a grievance with the designated individual or Student Affairs Officer for their academic unit/program. The grievant shall briefly describe the nature of the grievance and the nature of the redress which the grievant seeks. The grievant must also choose whether to enter the informal process (OAR 572-018-0030) or the formal process (OAR 572-018-0040).

(3) All grievances will be forwarded to the Affirmative Action/Equal Opportunity Officer to determine whether the grievance should be classified as a discrimination complaint.

(4) The Student Affairs Officer shall determine that the person or persons being grieved against have been properly identified, and have been informed of the grievance.

(5) The Dean of the academic unit may waive the time limits of section (3) of this rule.

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: HSU 2-1995, f. & cert. ef. 6-30-95

### 572-018-0030

#### Informal Procedure

(1) The selection of a mediator(s) is done in the school/unit in which the student/trainee is enrolled (see individual sections), but the process will be the same in all cases.

(2) The mediator and the two parties will meet within 10 week days to discuss the problem. Further meetings will continue to be arranged as long as the mediator and both parties believe that progress is being made. The mediator will apprise the Student Affairs Officer for the unit every 20 week days of the progress being made.

(3) The grievant shall be informed by the mediator of the grievant's right to a resolution within 180 calendar days of filing a formal written grievance. The grievant shall also be informed that by entering the informal process, the 180 day limit shall not apply, but that no other internal administrative rights accorded to the grievant shall be lost solely for attempting to resolve the grievance

through the informal process. Additionally, the grievant shall be advised that he or she may at any time choose to enter the formal procedure (see section (5) of this rule) which shall be concluded in no more than 180 calendar days of filing the formal written grievance.

(4) If a satisfactory resolution is reached, the mediator shall prepare a statement for both parties to sign. The statement shall include a summary of the grievance and the agreed to resolution. A copy of the agreement shall be provided to both parties and to the Student Affairs Officer for the unit.

(5) The office of the Dean of the academic unit shall oversee the implementation of the agreement.

(6) The mediator may terminate the mediation efforts if the mediator believes an acceptable resolution is not likely to occur.

(7) Whenever the informal mediation is terminated without a resolution, the mediator shall prepare a written report within 10 days of the termination. The report shall include:

(a) A summary of the grievance;

(b) A summary of the information gathered by the mediator;

(c) A recommendation concerning the merits of the grievance; and

(d) Any recommended remedial action. A copy of the report shall be provided to both parties and to the Student Affairs Officer for the unit. The grievant shall be notified of her/his right to file a formal grievance. If a formal grievance is filed, a copy of the report shall also be sent to the Hearing Committee assigned to the grievance under OAR 572-018-0040.

(8) The grievant may terminate the informal procedure by informing the mediator in writing. The mediator shall acknowledge receipt of the termination notice in writing to both parties and Student Affairs Officer of the Unit.

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: HSU 2-1995, f. & cert. ef. 6-30-95

### 572-018-0040

#### Initiation of a Formal Grievance Procedure

(1) To initiate the formal grievance procedure, the grievant must file a written grievance with the Student Affairs Officer of the unit within either:

(a) Twenty week days of the time of the meeting with the individual noted in OAR 572-018-0020; or

(b) Within 10 days of receiving the mediator's report. The written grievance must describe the nature of the grievance, the circumstances under which the grievance took place, and the redress the grievant is seeking.

(2) Management of the formal grievance procedure is vested in the individual academic units. The procedures followed by a hearing committee and the preparation of the hearing committee report are described in each section for that unit. The report will be forwarded to all parties to the grievance, and to the Student Affairs Officer for the unit. The Student Affairs Officer shall take action within 20 week days of receiving the hearing committee's report.

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: HSU 2-1995, f. & cert. ef. 6-30-95

### 572-018-0050

#### Appeals

Within ten week days of the Student Affairs Officer's decision, the grievant may appeal the student Affairs Officer's decision to the Dean of the academic unit.

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: HSU 2-1995, f. & cert. ef. 6-30-95

## DIVISION 19

## REVOLVING CHARGE ACCOUNT PLAN

**572-019-0000**

**Statement of Responsibility**

A Revolving Charge Account Plan is available to all Oregon Health Sciences University students under the following terms and conditions:

(1) Student: For the purposes of this rule a student is defined as anyone accepted into a program at OHSU and attending half-time or more as defined by the program the student is enrolled in.

(2) Payment: One third of the current term's charges must be paid prior to or at the beginning of the current term. Any unpaid balance is part of the Revolving Charge Account Plan. Any subsequent payments will be applied to the unpaid balance on a first in, first out basis. Financial aid, refunds, and any other amounts due to the student from this institution will be applied toward any amount due this institution *before* any monies are released to the student. The option to pay the unpaid balance in full always exists.

(3) Interest: Interest will be charged each month on any unpaid balance at the rate of one percent per month, or fraction thereof (12% APR).

(4) Due Date: All current term's charges (tuition and fees) are due and must reach the Cashier's Office by the date specified in the "Student Handbook" each term. Irrespective of the fact that only a payment of one third of the amount due (plus full payment of any past due balance) is required to validate the current term's registration, the balance of the amount due will incur interest charges each month until paid. Payment of the remaining amount due for the current term is required by the last day of the current term. Payment for all additional charges (i.e., parking fines, telephone charges, library fines, etc.) are due on the first day of each month after the charges are incurred.

(5) Past Due Accounts: It is the student's responsibility to make the scheduled payments by the due dates regardless of the circumstances. Failure to receive a billing prior to the first of the month is *not* an acceptable excuse for late payment. Interest charges and applicable late fees will be assessed on all past due accounts. The following penalties will apply:

(a) An institution collection fee not to exceed \$100 will be assessed to any account not paid in full at the beginning of the subsequent term;

(b) Registration may be denied to any student whose account has a past due balance;

(c) The extension of credit, provision of services, grade reports, diplomas, and transcripts may be withheld from any student with a past due balance;

(d) Telephone services may be disconnected or denied when past due accounts relate to tele-communication charges;

(e) Delinquent accounts referred to outside collection agencies will be assessed all costs and charges incurred, including, but not limited to, collection costs, attorney's fees and court filing fees. The status of this account may be reported to credit bureaus.

(6) Address information: The student is responsible for informing this institution's Business Affairs Office of any name and/or address change occurring during the life of this contract.

(7) Billing Rights: A student may challenge a charge within 60 days of the origination of the charge by direction his/her inquiry to: Oregon Health Sciences University, Accounts Receivable, 3181 SW Sam Jackson Park Road, Portland, Oregon 97201-3098, (503) 494-7955. Any questions regarding this agreement can also be directed to the above address.

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: HSU 3-1995, f. & cert. ef. 6-30-95

**DIVISION 20**

**SCHOOL OF DENTISTRY**

**Dental Clinic Fees and Fee Payment Policies**

**572-020-0005**

**Instructional Aids Fee**

The **Schedule of Fees of the Oregon Health Sciences University for the Instructional Aids Fee of the School of Dentistry** is hereby adopted by reference. The Instructional Aids Fee is for the purchase and maintenance of instructional aids including microscopes, slides, disarticulated skeleton bones, instrument carts and other instruments or assemblies essential to the instructional programs.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Dentistry — Vice President.]

Stat. Auth.: ORS Ch. 351

Stats. Implemented: ORS

Hist.: UOD 22, f. & ef. 2-16-77; HSU 6-1985, f. & ef. 7-2-85

**572-020-0010**

**Continuing Dental Education Fee Schedule**

The **Schedule of Fees of the Oregon Health Sciences University Continuing Dental Education Program** is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Dentistry.]

Stat. Auth.: ORS Ch. 351

Stats. Implemented: ORS

Hist.: UOD 3, f. & ef. 8-8-75; UOD 17, f. 9-20-76, ef. 1-1-77; HSC 4-1978, f. 8-14-78, ef. 9-1-78; HSU 6-1985, f. & ef. 7-2-85

**572-020-0015**

**Student Activity and Publication Fee**

The **Schedule of Fees of the Oregon Health Sciences University** for the student activity and publication fee of the School of Dentistry is hereby incorporated by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Dentistry.]

Stat. Auth.: ORS Ch. 351

Stats. Implemented: ORS

Hist.: UOD 4(Temp), f. & ef. 9-17-75; UOD 5, f. 10-21-75, ef. 11-10-75; HSU 6-1985, f. & ef. 7-2-85; HSU 13-1985, f. & ef. 9-3-85

**572-020-0020**

**Dental Clinic Fee Schedule**

The **Schedule of Fees for the Oregon Health Sciences University School of Dentistry** is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Dentistry.]

Stat. Auth.: ORS 351.070(c)

Stats. Implemented: ORS 351.070(c)

Hist.: UOD 2, f. 11-15-74, f. 12-11-74; UOD 7, f. & ef. 1-8-76; HSC 2-1978, f. 3-13-78, ef. 4-1-78; HSC 6-1978, f. 8-29-78, ef. 9-1-78; HSC 7-1979, f. 7-25-79, ef. 8-1-79; HSC 10-1979, f. 12-28-79, ef. 1-1-80; HSC 2-1980, f. & ef. 6-2-80; HSC 2-1981, f. 2-27-81, ef. 3-1-81; HSC 7-1981, f. 8-21-81, ef. 9-1-81; HSC 8-1982, f. & ef. 9-1-82; HSU 5-1983, f. & ef. 9-1-83; HSU 3-1984, f. & ef. 9-13-84; HSU 6-1985, f. & ef. 7-2-85; HSU 14-1985, f. & ef. 9-3-85; HSU 3-1986, f. & ef. 7-1-86; HSU 3-1988, f. 6-29-88, cert. ef. 7-1-88; HSU 5-1989, f. 8-25-89, cert. ef. 9-1-89; HSU 8-1990, f. 6-29-90, cert. ef. 7-1-90; HSU 3-1991, f. & cert. ef. 6-26-91; HSU 8-1992, f. & cert. ef. 9-11-92; HSU 6-1993, f. & cert. ef. 5-11-93; HSU 5-1995, f. & cert. ef. 10-9-95

**572-020-0025**

**Oral Pathology Laboratory Fees**

The **Schedule of Fees of the Oregon Health Sciences University for Oral Pathology Laboratory Fees for the School of Dentistry** is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Dentistry.]

Stat. Auth.: ORS 351.070

Stats. Implemented: ORS

Hist.: UOD 7, f. & ef. 1-8-76; UOD 26, f. & ef. 8-1-77; HSC 5-1980, f. 8-27-80, ef. 9-1-80; HSC 1-1982, f. 1-27-82, ef. 2-1-82; HSU 4-1984, f. & ef. 10-1-84; HSU 6-1985, f. & ef. 7-2-85; HSU 9-1990, f. 6-29-90, cert. ef. 7-1-90;

### **572-020-0030**

#### **General Payment Policy**

(1) Patients admitted to the Dental Clinics for treatment are provided an estimate for recommended services. The fee to be assessed shall be that fee established and made public under OAR 572-020-0020 and ORS 351.070(1)(c).

(2) The responsibility for collecting patient fees shall be the patient's assigned student or others involved in the treatment process or business office. Payment may be made by cash, check, or Visa or Mastercharge credit cards. When appropriate and as authorized by the Associate Dean for Clinical Affairs or the Associate Dean's designee an extended payment plan may be authorized for qualified patients if it is necessary to insure continuity of the student experience and the comprehensive care of the patient.

Stat. Auth.: ORS Ch. 351

Stats. Implemented: ORS

Hist.: HSC 2-1978, f. 3-13-78, ef. 4-1-78; HSC 6-1978, f. 8-29-78, ef. 9-1-78; HSU 1-1985, f. 1-21-85, ef. 2-1-85; HSU 6-1985, f. & ef. 7-2-85

### **572-020-0033**

#### **Patients Covered by Insurance Plans**

For patients covered by insurance, the student and the clinic business office will assist the patient in obtaining pre-authorization for services and determination of benefits. The School of Dentistry will collect the proportionate amounts from the patient's insurance company and the patient.

Stat. Auth.: ORS Ch. 351

Stats. Implemented: ORS

Hist.: HSC 6-1978, f. 8-29-78, ef. 9-1-78; HSU 1-1985, f. 1-21-85, ef. 2-1-85; HSU 6-1985, f. & ef. 7-2-85

### **572-020-0035**

#### **Emergency Treatment**

Patients accepted for emergency treatment shall pay the appropriate fee for the service rendered at the time the service is performed. Patients with insurance will be assisted in completing the necessary forms so that the fee can be paid by the insurance company. Those patients with insufficient funds will be billed by the School of Dentistry clinic business office or the Oregon Health Sciences University business office.

Stat. Auth.: ORS Ch. 351

Stats. Implemented: ORS

Hist.: HSC 2-1978, f. 3-13-78, ef. 4-1-78; HSC 6-1978, f. 8-29-78, ef. 9-1-78; HSU 1-1985, f. 1-21-85, ef. 2-1-85

### **572-020-0050**

#### **Dental Student Fine**

The School of Dentistry shall assess a fine specified in the **Schedule of Fees and Fines of the Oregon Health Sciences University** against dental students who fail to return any issued patient's dental record to the chartroom by the close of business on the day issued. Exception: If an extenuating circumstance develops precluding same day return of the record it is the responsibility of the student to notify the chartroom of the reason for late return, location of the record and expected date of return (no fine under these circumstances). All fines must be paid prior to the beginning of each teaching interval as a requirement for continued clinic participation. Fines for spring interval of the senior year must be paid as a requirement for graduation.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Dentistry.]

Stat. Auth.: ORS Ch. 351

Stats. Implemented: ORS

Hist.: HSC 8-1979, f. 8-30-79, ef. 9-1-79; HSU 6-1985, f. & ef. 7-2-85

## **DIVISION 30**

## **SCHOOL OF MEDICINE**

## **Fee Schedules**

### **572-030-0005**

#### **Children's Psychiatric Day Treatment Center Fees**

The **Schedule of Fees of the Oregon Health Sciences University for Children's Psychiatric Day Treatment Center** is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Medicine.]

Stat. Auth.: ORS Ch. 351

Hist.: UOD 10, f. & ef. 6-4-76; HSU 7-1985, f. & ef. 7-2-85

### **572-030-0010**

#### **Microscope Rental Fee**

The **Schedule of Fees of the Oregon Health Sciences University for microscope rental** is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Medicine.]

Stat. Auth.: ORS Ch. 351

Hist.: UOD 27, f. & ef. 8-16-77; HSU 7-1985, f. & ef. 7-2-85

### **572-030-0015**

#### **Instructional Aids Fee**

The **Schedule of Fees of the Oregon Health Sciences University for instructional aids** is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Medicine.]

Stat. Auth.: ORS Ch. 351

Hist.: UOD 27, f. & ef. 8-16-77; HSC 8-1981, f. & ef. 9-21-81; HSU 7-1985, f. & ef. 7-2-85

### **572-030-0020**

#### **Continuing Medical Education**

The **Schedule of Fees of the Oregon Health Sciences University for Continuing Medical Education** courses is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Medicine.]

Stat. Auth.: ORS Ch. 351

Hist.: UOD 29, f. 9-30-77, ef. 10-1-77; HSC 1-1978, f. & ef. 2-21-78; HSU 7-1985, f. & ef. 7-2-85

## **DIVISION 50**

## **UNIVERSITY HOSPITAL**

## **Fee Schedules**

### **572-050-0005**

#### **Fee Schedules**

The **Schedule of Fees for the University Hospital** as adopted by the Oregon Health Sciences University is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University.]

Stat. Auth.: ORS 351.070 & 352.055

Hist.: UOM 1, f. 11-5-73, ef. 11-25-73; UOM 2, f. 5-14-74, ef. 6-11-74; UOM 3, f. 1-21-75, ef. 2-11-75; UOM 4(Temp), f. & ef. 9-2-75; UOM 5, f. 9-8-75, ef. 9-25-75; UOD 7, f. & ef. 1-8-76; UOD 8(Temp), f. 3-31-76, ef. 4-1-76; UOD 9, f. & ef. 5-19-76; UOD 12, f. 6-30-76, ef. 7-1-76; UOD 13(Temp), f. 7-30-76, ef. 8-1-76; UOD 15, f. 8-30-76, ef. 9-1-76; UOD 19 (Temp), f. & ef. 12-1-76; UOD 21, f. 1-13-77, ef. 1-15-77; UOD 24(Temp), f. & ef. 4-4-77; UOD 25, f. 6-30-77, ef. 7-1-77; UOD 32(Temp), f. 12-16-77, ef. 1-1-78; HSC 3-1978, f. 3-24-78, ef. 4-1-78; HSC 7-1978, f. 11-30-78, ef. 12-1-78; HSC 2-1979(Temp), f. 2-28-79, ef. 3-1-79; HSC 6-1979, f. 6-29-79, ef. 7-1-79; HSC 11-1979, f. 12-28-79, ef. 1-1-80; HSC 3-1980, f. 6-30-80, ef. 7-1-80; HSC 8-1980, f. 12-26-80, ef. 1-1-81; HSC 4-1981, f. 6-25-81, ef. 7-1-81; HSC 10-

1981, f. 12-28-81, ef. 1-1-82; HSC 4-1982, f. 6-30-82, ef. 7-1-82; HSC 7-1982 (Temp), f. 8-19-82, ef. 9-1-82; HSC 9-1982, f. 9-30-82, ef. 10-1-82; HSC 11-1982, f. 12-28-82, ef. 1-1-83; HSU 1-1983, f. 1-27-83, ef. 2-1-83; HSU 2-1983, f. 6-28-83, ef. 7-1-83; HSU 6-1983, f. 12-27-83, ef. 1-1-84; HSU 2-1984, f. & ef. 7-3-84; HSU 8-1985, f. & ef. 7-2-85; HSU 12-1985, f. & ef. 8-12-85; HSU 5-1987, f. 4-23-87, ef. 5-1-87; HSU 1-1988, f. 5-19-88, cert. ef. 6-1-88; HSU 2-1989, f. 4-28-89, cert. ef. 5-1-89; HSU 6-1989, f. 12-29-89, cert. ef. 1-1-90; HSU 4-1990, f. & cert. ef. 3-1-90; HSU 15-1990, f. 12-31-90, cert. ef. 1-1-91; HSU 4-1992, f. & cert. ef. 2-14-92; HSU 13-1993, f. 12-30-93, cert. ef. 1-1-94

### **Financial Policies**

#### **572-050-0010**

##### **General**

(1) University Hospital financial policies included in OAR 572-050-0010 to 572-050-0045 are authorized under Oregon Department of Higher Education administrative rule OAR 580-041-0010 and pertain only to Hospital patient accounts receivable management. Financial policies applicable to professional services, which are authorized under Oregon Department of Higher Education administrative rule OAR 580-030-0030, are not covered by these policies.

(2) Patients will be informed at the time of registration or admission of billing practices and policies of University Hospital and Clinics, University Medical Associates, and other professional service arrangements.

(3) Patients are discouraged from bringing valuables to the hospital. The hospital shall not be liable for loss or damage to money, valuables or other personal property unless deposited for safekeeping.

(4) Discrimination based on race, color, religion, sex, age, handicap or national origin is prohibited.

Stat. Auth.: ORS Ch. 351

Hist.: HSC 7-1980(Temp), f. 9-5-80, ef. 9-8-80; HSC 1-1981, f. 2-19-81, ef. 2-20-81

#### **572-050-0015**

##### **Provision of Care**

(1) Each patient or responsible party shall be required to sign a statement of terms and conditions of service. Services will not be provided without execution of the statement of terms and conditions except in bona fide emergencies.

(2) Pursuant to the hospital's policy of providing medical services to the general public, patients requiring services with insufficient resources to pay for services will be treated subject to the provisions of OAR 580-030-0025 of the administrative rules, Board of Higher Education.

Stat. Auth.: ORS Ch. 351

Hist.: HSC 7-1980(Temp), f. 9-5-80, ef. 9-8-80; HSC 1-1981, f. 2-19-81, ef. 2-20-81

#### **572-050-0020**

##### **Financial Responsibility**

(1) Third party billing is available as a convenience to patients and to improve collectibility, provided that benefits are assigned, timely proof of coverage is furnished, benefits are verified, and prompt payment is expected. The hospital may refuse to bill specific third parties, and in such cases will notify the patient.

(2) The determination of payment sources shall be made prior to the provision of service except in bona fide emergencies.

(3) Patients indicating difficulty in meeting payment obligations will be financially screened to determine eligibility for social agency programs or allowances.

(4) The hospital will assist patients in seeking agency financial support to meet medical care costs. Until such time as patients are qualified for third-party sponsorship, they are responsible for the charges for services rendered.

(5) Deposits covering the patient's anticipated liability for services are encouraged whenever possible. Deposits may be required for specified elective services or when third party benefits cannot be readily verified.

Stat. Auth.: ORS Ch. 351

Hist.: HSC 7-1980(Temp), f. 9-5-80, ef. 9-8-80; HSC 1-1981, f. 2-19-81, ef. 2-20-81

#### **572-050-0025**

##### **Rates**

All patients will be charged for inpatient, clinic and ancillary services in accordance with established University Hospital rate schedules.

Stat. Auth.: ORS Ch. 351

Hist.: HSC 7-1980(Temp), f. 9-5-80, ef. 9-8-80; HSC 1-1981, f. 2-19-81, ef. 2-20-81

#### **572-050-0030**

##### **Allowances**

(1) Courtesy discounts will not be granted for hospital or clinic services except for University Hospital Volunteers who may be granted a ten percent discount, on the cash sale price when purchasing outpatient prescriptions through the University Hospital/Clinics Outpatient Pharmacy. To qualify the volunteers must meet the qualifications as defined by the Volunteer Services Department at the University Hospital.

(2) Teaching and research allowances for services that are primarily for the benefit of a specific teaching or research need, program or project may be authorized. Such authorization must be approved prior to admission or provision of service.

(3) Educational allowances may be authorized based on retrospective reviews when the level of charges is extraordinary due to the teaching program or the teaching hospital setting.

(4) Parameters for the determination of allowances shall be made at the time of registration, or provision of service. Specific allowances to be granted will be determined after the application of all third party resources.

(5) A number of factors may be considered in determining eligibility for charity allowances including, but not limited to, household size and member ages, income, living expenses, liquid and fixed assets, health care obligations, and expected future resources.

(6) Charity allowances will normally be granted only to residents of the State of Oregon. Charity allowances for non-residents must be authorized prior to admission or provision of service.

(7) Granting of charity allowances is dependent upon receipt of a request for consideration of an allowance from the patient or responsible party prior to the provision of service and the timely receipt of documentation of the patient's financial condition.

Stat. Auth.: ORS Ch. 351

Hist.: HSC 7-1980(Temp), f. 9-5-80, ef. 9-8-80; HSC 1-1981, f. 2-19-81, ef. 2-20-81; HSU 1-1994, f. & cert. ef. 3-11-94

#### **572-050-0035**

##### **Payments**

(1) Patient payment arrangements should be determined at the time of admission.

(2) Inpatients are expected to pay for services at the time of billing. When third party billing is involved under the provisions of OAR 572-050-0020(2), anticipated payments from the third party will be accepted in lieu of payment from the patient. Amounts in excess of the expected third party payment are to be paid at the time of billing.

(3) Outpatients are expected to pay for services upon receipt of the bill. When third party billing is involved upon the provision of OAR 572-050-0020(2), anticipated payments from the third party will be accepted in lieu of payment from the patient. Amounts in excess of the expected third party payment are to be paid upon receipt of the bill.

(4) Pre-admission or pre-treatment deposits are expected for specified services including, but not limited to, cosmetic surgery, obstetrics, return of fertility, therapeutic abortions, sterilizations, routine dental services, glasses and medical appliances, non-acute psychiatric care, alcoholism rehabilitation, and ambulatory care.

(5) Monthly payment plans may be established when sufficient resources are not available to cover services as outlined



in section (2) or (3) of this rule. Monthly payment plans should be sufficient to liquidate the obligation in a reasonable period of time.

(6) Payment arrangements may be extended at any time, but in such cases a promissory note normally will be required. Extensions may be continued beyond the note's maturity upon review of the particulars involved and execution of a new note.

Stat. Auth.: ORS Ch. 351

Hist.: HSC 7-1980(Temp), f. 9-5-80, ef. 9-8-80; HSC 1-1981, f. 2-19-81, ef. 2-20-81

#### **572-050-0040**

##### **Collections**

(1) The hospital will pursue collection action as necessary to secure payment for services rendered, including, but not limited to, periodic statements, telephone contacts, collection notice, notice of demand, and referral for collection or legal action.

(2) The Department of Revenue of the State of Oregon is the hospital's primary collection agency; private collection agencies may be employed as appropriate.

(3) The Department of Justice (Attorney General) of the State of Oregon is the hospital's legal counsel.

(4) Delinquent accounts will be referred to the Department of Revenue, Department of Justice, or an appropriate agency for collection action based on consideration of each account.

(5) Hospital liens and estate claims will be filed under provisions of ORS 87.555 and ORS Chapter 115 in order to assure collection of claims due University Hospital.

Stat. Auth.: ORS Ch. 351

Hist.: HSC 7-1980(Temp), f. 9-5-80, ef. 9-8-80; HSC 1-1981, f. 2-19-81, ef. 2-20-81

### **DIVISION 60**

#### **CHILD DEVELOPMENT AND REHABILITATION CENTER**

##### **Fee Schedules**

#### **572-060-0015**

##### **Fee Schedules**

The **Fee Schedules for the Oregon Health Sciences University, Crippled Children's Division** are hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University.]

Stat. Auth.: ORS 351.070 & 444.010 - 444.050

Stats. Implemented: ORS

Hist.: HSC 5-1978, f. 8-29-78, ef. 10-1-78; HSC 5-1979, f. 6-29-79, ef. 7-1-79; HSC 1-1980, f. & ef. 4-1-80; HSC 4-1980, f. 6-30-80, ef. 7-1-80; HSC 3-1981, f. 6-25-81, ef. 7-1-81; HSC 9-1981, f. & ef. 11-2-81; HSC 3-1982, f. 6-25-82, ef. 7-1-82; HSU 3-1983, f. 6-30-83, ef. 7-1-83; HSU 2-1985, f. 6-26-85, ef. 7-1-85; HSU 9-1985, f. & ef. 7-2-85; HSU 2-1986, f. & ef. 7-1-86; HSU 4-1986, f. 10-30-86, ef. 11-1-86; HSU 1-1987, f. 1-22-87, ef. 2-1-87; HSU 6-1987, f. 6-29-87, ef. 7-1-87; HSU 8-1987, f. & ef. 12-2-87; HSU 4-1988, f. & cert. ef. 7-5-88; HSU 3-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 10-1990, f. 6-29-90, cert. ef. 7-1-90; HSU 16-1990, f. & cert. ef. 12-31-90; HSU 6-1991, f. & cert. ef. 7-17-91; HSU 9-1993(Temp), f. & cert. ef. 7-13-93; HSU 10-1993, f. & cert. ef. 9-10-93; HSU 4-1994, f. & cert. ef. 11-16-94

#### **572-060-0100**

##### **Function and Responsibility**

(1) The function of the Child Development and Rehabilitation Center (CDRC) of the Oregon Health Sciences University (OHSU) is to administer teaching and research activities, multidiscipline consultative and tertiary care clinics, and a statewide public health program, Oregon Services for Children with Special Health Needs (OSCSHN). The purpose of OSCSHN is to enable the state to extend and improve diagnostic, treatment, prevention and follow up services to children who are disabled or who are suffering from conditions which lead to disability. The CDRC maintains offices in Portland, Eugene and

Medford and coordinates community based clinical and other services through the state. Responsibility for the operation of CDRC is delegated by the President of OHSU to a Director. The functions of OSCSHN are as follows:

(a) To provide for early evaluation of disabled children with conditions eligible for the services of OSCSHN;

(b) To develop and implement a mechanism for evaluation and diagnosis required to carry out the purposes of this program;

(c) To offer or arrange for the necessary specialized medical care and related habilitative services for eligible disabled children;

(d) To develop, promote or improve the standards of care required by disabled children;

(e) To make efforts, within the resources of OSCSHN, to coordinate benefits for children who are eligible for other state programs providing benefits to children with special health needs.

(2) All services are provided subject to budgetary limitations and annual appropriations to the state and federal programs through which OSCSHN is funded.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

#### **572-060-0105**

##### **Definitions**

(1) "Adjusted Family Income": The amount equal to the family's Annual Gross Income as defined in these rules, OAR 572-060-0120(4)(b), less allowable expenses as determined pursuant to OAR 572-060-0120(4)(d).

(2) "Advisory Panel": Voluntary group of individuals representing parents, insurance companies, private providers, hospitals, and health agencies who meet at the invitation of the Director to review and comment on plans, policies, program proposals, and other items as determined by the Director.

(3) "Allowable Expenses": Deductions from the gross family income as specified in these rules, OAR 572-060-0120(4)(d).

(4) "Amenable to Treatment": Reasonable certainty of longer term functional developmental improvement as determined by the treating health care professional.

(5) "Annual Gross Income": The amount of a family's income determined pursuant to these rules, OAR 572-060-0120(4)(b) and (c).

(6) "Applicant": The child applying for OSCSHN eligibility.

(7) "Assistive Technology": Equipment intended to support, replace or augment a dysfunctioning or non-functioning part of the body. Such appliances, which may be mechanical, structural or electrical, are intended to support specific habilitative objectives determined by the child's health care providers.

(8) "Authorized Services": Direct health care and related care for a Recipient Child, as more completely set forth in these rules, OAR 572-060-0135(5), which OSCSHN staff has approved for payment.

(9) "Care Coordination": A process undertaken by professional staff of CDRC on behalf of children with eligible OSCSHN Disabling Conditions, which may include procedures for evaluation of the child's condition, development of a special health care plan, recommendations of health care providers and facilities, assistance in arrangement of such care, and subsequent monitoring of the status of the child and family. The level of programmatic assistance required will be based on the special health needs of the child and the needs of the family in the management of the care of their child.

(10) "Chronic Condition": Condition which is expected to be long lasting (greater than one year) or to be lifelong.

(11) "Consent": An agreement by a Legally Responsible Adult to a certain course of action involving himself/herself or his/her Recipient Child. Such consent will only be valid when the consenting person:

(a) Has been informed by the Health Professional(s) treating a Recipient Child of such foreseeable risks, results, and alternatives to a proposed procedure as a reasonable practitioner of the same discipline, in the same or similar circumstances, would make known to his/her patients;

(b) Agrees in writing to the performance of the procedure for which consent was sought;

(c) Has been informed that the granting of consent is voluntary and may be revoked at any time.

(12) "Cosmetic Surgery": Surgery performed for the sake of appearance rather than functional repair.

(13) "Diagnostic Services": Those services which provide information necessary to determine a child's special health needs eligibility for participation in the OSCSHN treatment program, i.e., whether an Applicant has a Disabling Condition. See these rules, OAR 572-060-0115. Diagnostic Services shall also include any initial interviews provided as a part of the application process.

(14) "Disabled Child": An individual below the age of 21 who has a physical impairment or an organic disease, defect, or condition which may hinder the achievement of normal growth and development.

(15) "Disabling Condition": That special health condition which renders the child eligible for OSCSHN services. OSCSHN eligible conditions are enumerated in OAR 572-060-0115(2).

(16) "Emancipated Minor": A child who is 18 years of age or older and is married or is a parent or is otherwise financially independent. All persons shall be deemed to have arrived at the age of majority upon their being married.

(17) "Emergency": A medical situation requiring immediate medical care and services to avoid loss of life, permanent loss of good health, or permanent degradation of state of health.

(18) "Financial Assistance": OSCSHN payment for all of a Recipient Child's OSCSHN authorized services not covered by the family's insurance (to the extent covered in these rules). To determine eligibility see these rules, OAR 572-060-0120.

(19) "Health Care Facility": Any Diagnostic and Treatment Facility within the contemplation of OAR 572-060-0150 and any Outpatient Therapy Center within the contemplation of OAR 572-060-0150.

(20) "Health Care Professional": Any individual or corporation licensed or certified to provide health care services to a patient and practicing in a commonly recognized field of knowledge. The term shall include, but shall not be limited to, Physicians and Other Health Care Professionals as defined in these rules, OAR 572-060-0145.

(21) "Health Care Provider": Any Health Care Professional, Health Care Facility, or any Medical Equipment Supplier within the meaning of OAR 572-60-145 and 572-060-0150.

(22) "Income": Money received by an Applicant, Recipient Child, or his family which can be applied directly to meet basic needs for food, shelter, and medical expenses. Gross income is defined in OAR 572-060-0120(4)(b). Adjusted income, i.e., net income, is figured by reference to OAR 572-060-0120(4)(b), (c) and (d).

(23) "Income Scale": The schedule, adjusted for family size, used to determine financial eligibility.

(24) "Legally Responsible Adult (LRA)": A person who is legally required to provide for and entitled to make decisions about the OSCSHN service Applicant or Recipient Child. This person may be a parent (biological or adoptive), emancipated minor or legally appointed guardian.

(25) "Outreach Clinic": A community-based clinic which meets on a periodic basis for the purpose of diagnosis and treatment. Such clinics are organized and operated by OSCSHN and utilize OSCSHN approved providers.

(26) "Parent": The biological or adoptive parent of the Applicant or Recipient Child receiving or seeking OSCSHN services.

(27) "Recipient Child or Youth": A child or youth who is currently receiving OSCSHN services or whose Health Care Providers are being paid, in whole or part, by OSCSHN.

(28) "Referral": A procedure by which any person can introduce a child to the OSCSHN program. See OAR 572-60-110(2)(c)(A)(ii).

(29) "Reimbursement Agreement": Written agreement signed by the LRA(s) and/or attorney(s) for the LRA or eligible child specifying that any money recovered as judgement or settlement of a lawsuit or from an insurance or personal settlement arising

from a claim relating to the child's condition for which OSCSHN is providing care or reimbursing Health Care Providers will be used to reimburse OSCSHN for its payment of the child's medical and related care costs.

(30) "Resident(s) of Oregon":

(a) Any person living in the State of Oregon with the intent to remain in the state indefinitely. The term "living in the State of Oregon" shall be limited to all persons whose primary domicile is located within the state. Intent to remain indefinitely is established through a showing that a person has significant contacts with the State of Oregon as evidenced by indicia thereof, such as maintaining a bank account in the state, registering to vote in the state, paying Oregon income taxes, obtaining permanent employment within the state, owning real estate within the state, and possessing an Oregon driver's license or similar permits; or

(b) Any person who is present in the State of Oregon for the purpose of performing migrant agricultural labor and who has evidenced a pattern of regularly returning to the state to perform such work. Migrant agricultural labor is defined as agricultural work of a seasonal or temporary nature which requires that the worker be away from his/her permanent place of residence to perform said work more than overnight. A pattern of regularly returning to the state to perform such work shall be considered to have been established if a person is present in the State of Oregon to perform migrant agricultural work for two successive growing seasons.

(31) "Retroactive Authorization": Authorizations which occur, under specified circumstances, after special health service has been provided to a Recipient Child. See OAR 572-60-135(3)(e) for enumeration of the circumstances in which this will be considered.

(32) "Retroactive Financial Eligibility": Financial eligibility which reaches back no more than 30 days prior to the date of application in certain specified circumstances. See OAR 572-060-0120(3)(h)(C) for enumeration of these circumstances.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

## **572-060-0110**

### **Eligibility: General**

(1) Program Purpose:

(a) The purpose of the Oregon Services for Children with Special Health Needs is to provide diagnostic and treatment services for children who are disabled as a result of congenital and/or acquired disabling or disease states or have a condition which may lead to disabling impairment. The objective is to provide a program of comprehensive evaluation, medical care and related habilitative services appropriate to their various needs and to financially support such care to the extent that their Legally Responsible Adults (LRAs) require such financial assistance as determined by the Financial Eligibility Criteria; see OAR 572-60-120(3). Children who are eligible for Care Coordination only will be served without regard to a financial means test. Due to financial limitations, OSCSHN will only provide assistance to children with certain categories of disabling conditions as defined in OAR 572-060-0115(2);

(b) Adult hemophiliacs may qualify for certain services, as may women who are at risk of giving birth to a child with special health needs as defined in OAR 572-060-0115(2).

(2) Eligibility Criteria for OSCSHN Services:

(a) Be under 21 years of age except that OSCSHN shall provide services beyond the child's 21st birthday when necessary to complete a treatment plan developed before that time if cessation of treatment would cause an immediate threat to or damage to the child's life or good health or would negate gains resulting from previous rehabilitative efforts. In no event may said extension continue beyond six months after the child's 21st birthday;

(b) Be a Resident of Oregon;

(c) Have a Disabling Condition.

(A) Diagnostic Services:

(i) Initial diagnostic services are provided when the LRA meets the financial eligibility criteria set forth in OAR 572-060-0120(3) to the extent necessary to determine whether the child has one of the conditions enumerated in OAR 572-060-0115(2), Disabling Conditions. Whenever eligibility or ineligibility is established based upon an interview with the child or the LRA, which occurs when a diagnosis has already been established, OSCSHN shall not be required to provide further initial diagnostic services;

(ii) Children may be, but need not be, referred for said services by an individual or agency or may be self-referred.

(B) Treatment Services and Financial Support:

(i) It is recognized that it is the duty and responsibility of the LRA to pay for necessary health care services for their children. OSCSHN will assist the LRA with this responsibility for each child meeting the criteria of section (2) of this rule by providing treatment services and financial assistance, provided the LRAs are Residents of Oregon, and provided;

(ii) The LRAs are lawfully admitted to the United States on a visa or permit which contemplates that the LRA will be entitled to legally remain in the United States for as long as is necessary to complete the Special Health Care Plan established for the child; or

(iii) The child aforescribed is a United States citizen.

(C) In addition, whenever payment for treatment services or financial support is desired, each LRA must:

(i) Meet the financial eligibility criteria set forth in OAR 572-060-0120(3);

(ii) Utilize insurance benefits, if any, as well as any other form of payment, (such as trust funds, gifts, or fund raising drives) available for the child and/or make the payments toward the support of the child's treatment as are determined by his or her FPA as set forth in OAR 572-060-0130(1);

(iii) Sign a Reimbursement Agreement if the injuries for which treatment is sought were caused by any alleged negligent act (including products liability) and litigation is pending or contemplated.

Further, any attorney retained to represent the child on any claim relating to the child's condition for which OSCSHN will provide care must separately sign the Reimbursement Agreement. Failure to comply with this requirement will not, however, delay or hinder the application process. Families will be notified of a failure to comply with this requirement.

(3) Application Process: Initial and Continuing Eligibility:

(a) No person participating in or wishing to participate in CDRC's programs shall be denied benefits of the program or shall be discriminated against on the basis of sex, religion, race, color, national origin or handicap not related to program eligibility;

(b) General responsibilities of Applicants, Recipient Children, and LRAs:

(A) Each Applicant and LRA shall furnish requested factual information regarding eligibility and shall keep OSCSHN informed of any changes in financial status (defined as any change in financial circumstances as set forth in OAR 572-060-0120(3)(h)(D)(iii) which would affect financial eligibility for OSCSHN benefits;

(B) The application process requires consent by the LRAs to release or to verify health data and financial information provided as a part of the application process.

(c) An LRA shall complete and when requested sign an application on behalf of the Applicant on forms specified by OSCSHN. Such application process shall include informing the applicant of all relevant time deadlines with respect to filing of an application and appealing any adverse decision. An LRA may choose a person to assist in completing the application. A representative of a public agency may complete and sign the application for a child in that agency's custody. A representative of a private agency may complete and sign the application for a child if it is the authorized guardian for the child;

(d) A completed application must be submitted to OSCSHN within the following time periods:

(A) In the case of self referral or referral by a health care provider or other agency, an application for initial eligibility must be received by OSCSHN within 21 days from the date which it is

originally sent to the LRA by OSCSHN. Applications not received within said 21-day period shall not be considered for reimbursement for treatment services rendered at the time of referral to OSCSHN but shall be processed for reimbursement of treatment services provided no more than 30 days prior to the actual date of receipt. This time period shall be adjusted by OSCSHN for good cause if OSCSHN is notified of the circumstances within the 21-day time period (for purposes of this clause, "good cause" shall include, but shall not be limited to, a family emergency, demonstrated delays caused by the U.S. Postal Service, and demonstrated delays caused by the Internal Revenue Service in providing a copy of an income tax return, if required);

(B) Applications for continuing financial eligibility shall be submitted to OSCSHN within 21 days of the date which they are originally sent to the LRA by OSCSHN. If an application is submitted after said time period, continuing eligibility shall recommence no more than 30 days prior to the date the application is actually received by OSCSHN.

(e) If financial support is desired, the LRAs shall complete and sign a financial application on behalf of the Applicant on forms specified by OSCSHN, which shall be submitted within the time periods specified in subsection (3)(d) of this rule:

(A) Such statement may be required to include a copy of the LRAs' most recent federal income tax returns. If an LRA is not required to file with the Internal Revenue Service, verification of income must be submitted;

(B) OSCSHN shall accept other supporting documents from the LRA to verify level of income if OSCSHN determines that the documents provided prove the information sought and if the LRA has demonstrated diligence in attempting to obtain federal tax returns or pay stubs but has been unsuccessful in doing so.

(f) If financial support is not desired, no financial application is required. Applicants with a Disabling Condition who either do not desire or do not qualify for OSCSHN financial support shall be eligible for Care Coordination services. The applicant may be seen in a OSCSHN sponsored clinic. The LRA will be responsible for the cost of services;

(g) Determination of eligibility is performed at the regional offices:

(A) The OSCSHN staff shall verify the information provided on behalf of the Applicant. This will include discussion, including an interview with the LRAs, if the application is not complete. The interview shall be conducted at a place and time convenient to all parties;

(B) If supplemental information required by OSCSHN to determine eligibility is not provided within 14 days after the LRA receives notice of a requirement that said information is needed to complete this application, OSCSHN shall then advise the LRAs that the application will be invalidated and not given further consideration unless the LRA was precluded, due to causes beyond his/her control, from providing the information required;

(C) A written decision regarding eligibility shall be sent to the LRAs within 30 days of receipt of the completed application unless the emergent nature of the child's condition requires a decision in a more timely fashion.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 5-1991(Temp), f. & cert. ef. 7-3-91; HSU 2-1994, f. & cert. ef. 3-11-94

## 572-060-0115

### Eligibility: Disabling Conditions

(1) OSCSHN Eligible Conditions Criteria:

(a) Currently OSCSHN serves children whose disabling impairments are enumerated in the list in the section which follows. These conditions were determined as covered by the Director, in consultation with and upon advice of the Advisory Panel. A list of included diagnoses is on file in the Director's office;

(b) Within the resources available and following established standards, the OSCSHN has determined that it can best serve children who: Have disabling impairments that are expected to be



chronic; involve multiple physical defects/ disabilities/handicaps; are amenable to treatment as determined by the treating physician; and have a need for long-term highly specialized medical care including, as necessary, related habilitative services.

(2) Disabling Conditions:

(a) Orthopedic Impairments which are defined as those affecting bone, joint or muscle are eligible. Such impairments may be of congenital origin, or may be manifestations of an active chronic disease, or may represent a persisting result of previous infection, trauma, toxicity, disease or malignancy, which are determined to be chronic orthopedic impairments amenable to treatment requiring long-term management involving specialist care and required related habilitative or rehabilitative services;

(b) Nervous System Impairments which are defined as those affecting the brain, spinal cord or peripheral nerves, and present as physical disabilities are eligible. Such impairments may be of congenital origin, or may be manifestations of an active chronic disease, or may represent a persisting result of previous infection, trauma, toxicity, disease which are determined to be chronic neurologic impairments responsive to medical treatment requiring long-term management involving specialist care and required related habilitative services. Children in a chronic vegetative state would be eligible upon medically determined emergence of recovery and sufficient health stability for a program of active habilitation to be instituted (for purposes of this clause, a chronic vegetative state is defined as a condition in which a child displays only brain stem or reflexive activity and no evidence of progressive positive developmental or neurological improvement, as determined by usual and customary medical standards);

(c) Cardiovascular Impairments which are defined as primarily affecting the heart and the larger blood vessels are eligible. Such impairments may be of congenital or acquired origin, the latter representing a persisting result of previous infection, trauma, toxicity or disease and which are determined to be a chronic cardiovascular impairment responsive to treatment requiring multispecialist intervention and a program of extended supervision and/or long-term active management, specialized medical care and such related habilitation services as may be necessary. Children with a disease or past infection known to primarily affect the heart which predispose to chronic heart impairment and which requires specialist management to minimize or preclude such impairment would be eligible;

(d) External Body Impairments, including the oral-facial-cranial and nasal structures, their extension into the pharynx, larynx, major bronchi and esophageal structures, defined as significant (not minor) defects affecting the skin or its underlying structures and defects of the mucosa or its underlying structures which may effect breathing, speech or eating. Such impairments must be determined to be beyond the range of acceptable function as determined by the OSCSHN program and its appropriate health care specialists and must be of organic (non-functional) origin. The impairment must be assumed to be responsive to specialist(s) intervention or to related habilitative/ rehabilitative services. Defects of dentition and dental occlusion associated with craniofacial deformities are included. Impairments acquired as a result of burns requiring specialized care and/or long-term habilitation would be eligible;

(e) Hearing Impaired children are eligible for services when such impairment is considered to be related to an OSCSHN eligible condition or children under the age of six with severe prolonged hearing loss may be eligible;

(f) Communication Impairments. This category includes any congenital or acquired impairment of speech articulation, voice or language. Eligible etiologies include impairment of the structural, motor, sensory, or cognitive systems. Excluded are impairments of non-organic origin, such as stuttering and those related to maturational delay;

(g) Cystic Fibrosis. Children with cystic fibrosis are eligible if they manifest symptoms amenable to specialized medical care and long-term management by a team of specialists organized for this purpose;

(h) Hemophilia and similar genetic disorders of coagulation are eligible;

(i) Inborn Errors of Metabolism. Children with inborn errors of metabolism are eligible if they manifest symptoms amenable to specialized medical care and long-term management by a team of specialists organized for this purpose;

(j) Juvenile Rheumatoid Arthritis (JRA). Children with JRA are eligible if they manifest symptoms amenable to specialized care and long-term management by a team of specialists organized for this purpose;

(k) Child Development. Children between birth and three years of age who are developmentally delayed or who are biologically or socially at risk of becoming disabled are eligible;

(l) Genetics. Services are offered to families with or suspected of having genetic disorders who could benefit from counseling and diagnostic services;

(m) A special fund is administered by CDRC for Prenatal Diagnosis and counseling services for those women who are residents of Oregon and meet financial eligibility tests, and:

(A) Are of advanced maternal age;

(B) Have a family history of, previous child with, or who are themselves at risk for a prenatally diagnosable condition;

(C) Have an abnormal maternal serum alphafetoprotein screen; or

(D) Have an abnormal ultrasound examination which reveals certain structural aberrations.

(n) Hemophilia Assistance Program (HAP) is a financial assistance program for adult hemophiliacs administered by CDRC. The use of these funds is almost solely for the purpose of subvention of antihemophilic factor products.

(3) Health care services which are *not* eligible (not provided by OSCSHN) are those defined as "well child care", routine medical and dental and visual care, medical care of acute childhood illnesses (defined as diseases which are not normally chronically disabling and which are not unusual in the course of a child's maturation) or trauma or short-term complications related thereto, are not provided by OSCSHN.

(4) Care Beyond Medical Eligible Conditions. Children with the chronic disabling impairments, which are defined in these rules as Disabling Conditions, may have associated health impairments which, as isolated health impairments, would not be considered as medically eligible for OSCSHN services. However, in order to achieve a realistic habilitation goal, if medically recommended, the services required to treat such associated health impairments will be provided to Recipient Children, except those related to a chronic vegetative state. Treatment of such associated health impairments must relate to the Disabling Condition and will continue to be provided only so long as the Recipient Child has a Disabling Condition which is under continuing and active treatment. Further, if at any time, one of these other than Disabling Conditions becomes the Recipient Child's primary health problem, as defined by the Recipient Child's attending health care provider, these additional services will be discontinued.

(5) Health care services for children whose disabling impairment is considered to be "acute" as an immediate associated consequence of infection, trauma, disease, toxicity would be considered eligible after completion of medical treatment of such acute condition and determination of a resulting disabling impairment.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

## 572-060-0120

### Eligibility: Financial

(1) The LRAs have an obligation to meet the cost of care for their Recipient Child to the extent they are able. Financial assistance, in the form described in OAR 572-060-0140, is provided to LRAs who are unable to meet such expenses from their own resources as established through a Financial Need Determination performed pursuant to criteria established in sections (3) and (4) of this rule.

(2) Exceptions to Financial Need Determination: Financial

information is not required from LRAs when:

- (a) No expenditure of OSCSHN funds is anticipated;
- (b) The child is a ward of a state agency;
- (c) The child has been determined eligible for services being provided by or reimbursed by a state agency using criteria the same as, or more stringent than, OSCSHN.

(3) Criteria for Financial Assistance:

(a) Financial eligibility is based upon the financial status of the LRAs. If the Applicant or Recipient Child has more than one LRA and those LRAs are not living together in the same household, each LRA must submit the required financial data. Separate determinations shall be made based upon the financial data from each LRA. Eligibility will be based upon the greater income determination;

(b) In cases in which OSCSHN is unable to obtain any financial information from the noncustodial LRA and that LRA is not providing any financial support to the custodial LRA or child, OSCSHN will base its determination of financial eligibility on the Adjusted Family Income of the available LRA;

(c) The Income Scale represents 300 percent of the poverty income guidelines adjusted for family size as developed by the U.S. Department of Health and Human Services. Although this scale is derived from gross income figures, for purposes of financial eligibility, a family is placed on the scale according to its Adjusted Family Income and family size;

(d) Financial assistance is provided when the Adjusted Family Income considering family size is equal to or less than that which is allowable in accordance with the Income Scale. The LRA and attorney must submit a Reimbursement Agreement, if applicable, as provided in OAR 572-060-0110(2)(c)(C)(iii);

(e) The LRA shall be determined ineligible for financial assistance from OSCSHN when:

(A) It is determined that the Adjusted Family Income is in excess of that which is allowable in accordance with the Income Scale;

(B) An LRA has failed within the time periods established in OAR 572-060-0110(4)(d) to provide sufficient information to determine eligibility. In such instances, eligibility shall commence 30 days prior to the date of receipt of such information necessary to establish eligibility;

(C) An LRA has failed within the time period established in OAR 572-060-0110(4)(d) to complete and sign the application (including the financial application), if requested, and the Reimbursement Agreement, if applicable OAR 572-060-0110(2)(c)(C)(iii). In such instances, eligibility shall commence 30 days prior to the date of receipt of the signed application, and/or Reimbursement Agreement;

(D) The family is enrolled in a Health Maintenance Organization (HMO) which has responsibility for provision of health care for the Applicant or Recipient Child and the HMO is equipped and qualified to provide the necessary care;

(E) The family appears to be eligible for Medicaid, Medicare or other third party coverage and has not made application;

(F) In addition, the LRAs shall lose their financial assistance if: Health insurance payments or other forms of payment available or paid directly to the LRA to meet the cost of care for the Recipient Child have not been applied to the cost of care arranged, authorized, and paid by OSCSHN for that child. In such instances, eligibility shall be reinstated upon reaching an agreement for repayment to a health care provider or to OSCSHN of an amount equal to the health insurance payments made available but not applied toward the child's cost of care;

(g) LRAs determined to be ineligible shall be advised of the right to appeal the determination in accordance with the procedures as set forth in OAR 572-060-0125;

(h) Period of Financial Eligibility:

(A) Financial eligibility shall be established for a maximum 12-month period;

(B) Financial eligibility can be redetermined on or following the expiration date established in OAR 572-060-0120 (3)(h)(A) and (D);

(C) Financial eligibility ordinarily begins at the date of application for OSCSHN assistance unless circumstances beyond

the control of the child and the LRA precluded timely application. If OSCSHN, after its own investigation, determines that such circumstances exist, eligibility shall commence 30 days prior to the date of application to OSCSHN. Only such care or services which would have been approved as meeting OSCSHN standards of care, as set forth in these rules, shall be considered for this period of retroactive eligibility;

(D) The period of financial eligibility may be less than 12 months under the following circumstances:

(i) If OSCSHN eligibility was based upon eligibility with the Oregon Human Resources Adult and Family Services Department and such eligibility has been cancelled. Eligibility for OSCSHN benefits shall be cancelled at the same time that AFS eligibility is cancelled. The LRAs must reapply by submitting the same financial information as is required of all applicants;

(ii) If the Recipient Child, at the time of financial evaluation, was a ward of an agency or court because adoption had not been finalized and the adoption is finalized. OSCSHN eligibility shall be redetermined on the effective date of the finalization of the adoption;

(iii) If changes occur including but not limited to family size, income, insurance and medical expenses. The LRA shall notify OSCSHN within 14 days of such changes;

(iv) If verification of income is from sources which are more than 12 months old at time of submission. In such event, OSCSHN shall establish a period of eligibility of sufficient duration to permit the applicant to submit information with respect to income from sources which are less than 12 months old.

(4) Financial Determination Calculations:

(a) Family Size: Family size shall be determined by the sum of the number of persons in each of the following categories when they share the same household. However, if a person falls into more than one category, that person shall be counted only once:

(A) The Applicant or Recipient Child;

(B) The Applicant or Recipient Child's spouse;

(C) An LRA and his/her spouse;

(D) Other persons who, for federal income tax purposes, are deemed dependents of an LRA.

(b) The family's Annual Gross Income shall be the sum of the Annual Gross Income of persons comprising the family unit, as determined above but excluding income of dependent children. Annual Gross Income includes:

(A) Wages, salaries, bonuses, other earnings, and tips;

(B) All interest and dividends from financial institutions and investments and from stocks and bonds;

(C) Alimony, child support payments received;

(D) Income from pensions, annuities, and other retirement fund sources;

(E) Income from Social Security;

(F) Unemployment compensation;

(G) Workers' compensation;

(H) Disability/sick leave payments;

(I) Income from rents, royalties, partnerships, estates, trusts, corporations, farms, and businesses, after expenses to produce such income are deducted;

(J) Capital gains. All capital gains shall be treated as ordinary income for purposes of determining a family's Annual Gross Income except capital gains realized from the sale of a family residence which shall be excluded in its entirety;

(K) All supplemental gains income;

(L) All other earned and unearned income not limited to, but including lottery winnings, which may be applied toward the cost of care for the Applicant or Recipient Child.

(c) Income from the following sources shall be excluded for purposes of determining financial eligibility:

(A) The income of dependents (other than the Applicant or Recipient Child and his/her spouse) under 21 years of age;

(B) Irregular income of not more than \$150 quarterly;

(C) Scholarships, grants, or loans to a student for educational purposes;

(D) The value of coupons or other subsidies provided low income families by a governmental organization or program;

(E) Lump sum payments from insurance received due to the

death of an LRA;

(F) Money borrowed;

(G) Funds held in a trust which are legally unavailable for payment of the Applicant's or Recipient Child's special health care expenses.

(d) The following are allowable expenses which the family may deduct from their Annual Gross Income in determining financial eligibility:

(A) Payment of support for non-dependent children;

(B) Child care costs that enable an LRA to maintain employment;

(C) Business expenses that enable an LRA to maintain employment;

(D) Health insurance premiums for policies covering the Applicant or Recipient Child;

(E) Outstanding expenses of the Applicant or Recipient Child for services related to the OSCSHN eligible condition that are not recoverable through any insurance plan or other third-party payors including donated funds.

Stat. Auth.: ORS 351.070 & 444.010 - 444.050

Stats. Implemented: ORS 351.070 & 444.010 - 444.050

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94; HSU 6-1995, f. & cert. ef. 10-9-95

## **572-060-0125**

### **Appeal Process**

(1) Notice of Determination:

(a) Except as otherwise provided in these rules, OSCSHN shall notify the Applicant's LRAs in writing within 30 days of the receipt of the completed application that OSCSHN has determined that the Applicant is eligible or ineligible. If the Applicant or LRA is determined to be ineligible, the Notice of Determination shall state the reason for said determination;

(b) In the event that OSCSHN has requested additional information in order to determine eligibility, including continuing eligibility, or has requested the LRA to sign a Reimbursement Agreement and the request has not been complied with within the time period set forth in OAR 572-060-0110(3)(g)(B), OSCSHN shall notify the LRAs that the application shall be considered inactive and provide the reasons therefore;

(c) OSCSHN shall notify a Recipient Child's LRA in writing of any action which OSCSHN intends to take which adversely affects the LRA's financial eligibility. This written notification shall provide specific reasons for the action being taken. This written notification shall be sent to the Recipient Child's LRA at least 30 days prior to the effective date of the proposed action.

(2) Right to Reapply: If the Applicant or Recipient Child's LRAs have been determined to be ineligible, they may reapply at any time they believe they have become eligible;

(3) Right to Meeting and Appeal Conference:

(a) The Applicant or Recipient Child's LRA, or designated representative, has a right to a meeting with the OSCSHN staff person responsible for a decision reflected in any Notice of Determination issued pursuant to subsections (1)(a), (b), and (c) of this rule:

(A) The request for such a meeting must be made in writing;

(B) The request must be made within 14 days of receipt of said Notice of Determination;

(C) OSCSHN shall contact the requester within five days of receipt of the request in order to schedule a meeting date, time and place;

(D) Within seven days after the meeting, OSCSHN shall notify the Applicant or Recipient Child's LRA of the result of the meeting and shall state the reasons for the decision made.

(b) The Applicant or Recipient Child's LRA, or designated representative, have a right to appeal the results of meeting decision to the Director in a conference with the Director or his/her designee held for that purpose. The Director shall not take part in any original decision or any initial meeting held under subsection (3)(a) of this rule:

(A) The request for such an appeal conference must be made in writing;

(B) The request must be made within 14 days of receipt of

notification of result of the meeting referenced in subsection (3)(a) of this rule;

(C) OSCSHN shall contact the requester within five days of receipt of the request in order to schedule a meeting date, time and place;

(D) The Director or his/her designee shall consider the decision issued pursuant to paragraph (3)(a)(D) of this rule any written material presented at the meeting provided for in section (3) of this rule, any evidence presented at the conference, and all other information which the Director or his/her designee obtains through an independent investigation of the issues raised by the appeal;

(E) Within seven days after the appeal conference, OSCSHN shall notify the Applicant or Recipient Child's LRAs of the result of the appeal conference. Such notification shall be in the manner set forth in section (3) of this rule and shall state the reasons for the decision made;

(F) The decision rendered by the Director or his designee is final.

(4) Meeting and Conference Procedure. The Applicant or Recipient Child's LRAs, or designated representative, shall be allowed:

(a) The right at any time to inspect and copy the contents of the Applicant or Recipient Child's case file and any other documents used by OSCSHN in making its determination or proposing its action; and

(b) The right to appear on their own behalf and/or to be represented, advised and/or accompanied by a relative, friend, lawyer or advocate; and

(c) The right to present relevant information, witnesses and evidence in any form; and

(d) The right to ask questions of OSCSHN staff present.

(5) OSCSHN may deny or dismiss a meeting or appeal conference if:

(a) The Applicant or Recipient Child's LRAs, or designated representative, withdraw the request for the meeting or appeal conference in writing; or

(b) The Applicant or Recipient Child's LRA, or designated representative, fails to appear at the scheduled meeting or appeal conference.

(6) Benefits While Awaiting Decision: LRAs of Applicants who are denied financial assistance benefits may appeal the denial but shall not receive any financial benefits in behalf of the Applicant while awaiting the meeting or appeal conference;

(7) Effective Dates of OSCSHN Decisions:

(a) If the decision of a meeting or appeal conference is in favor of an Applicant's LRA, the financial assistance benefits determined appropriate as a result of the appeal shall be effective from the date of the application;

(b) If a Recipient Child's LRA does not appeal, a Notice of Determination of termination of OSCSHN benefits, the effective date thereof shall be as provided for in subsection (1)(c) of this rule;

(c) If a Recipient Child's LRA appeals a Notice of Determination of termination of OSCSHN benefits, no such termination or reduction shall be effective until ten days after all appeal rights have been waived or exhausted;

(d) Notwithstanding anything to the contrary contained herein, if Notice is sent to an LRA pursuant to subsection (1)(c) of this rule, based upon a failure of the LRA to comply with the requirements of OAR 572-060-0110(4)(b)(A) (relating to reporting of changes in financial condition or family size), and if OSCSHN determines to act in terminating LRA financial benefits to the extent such is permitted to it hereunder, after all LRA rights to appeal have been exhausted or waived, then said action shall be deemed to be effective on the 45th day after the unreported change in family circumstances occurred, regardless of when the notice provided for in subsection (1)(c) of this rule is actually sent to the LRA. Nothing contained in these rules shall be construed as reducing any rights of the LRA to object to any proposed OSCSHN action or as may be otherwise provided in these rules and no OSCSHN action shall be final unless and until all such rights have been exhausted or waived.



Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

### 572-060-0130

#### Payment for Services

(1) With respect to Medicaid, Medicare, any health insurance plan or policy or other third party, unless prohibited by law, OSCSHN shall be deemed the payer of last resort. Nothing contained in these regulations shall authorize or require OSCSHN to provide payment for medical services, hospital services, supplies or appliances which would otherwise be paid by Medicaid, Medicare, any health insurance plan or policy or other third party, including donated funds and such other funds available for health care derived from settlement of injury claims.

(2) Payments for services are subject to the availability of funds as determined by the OHSU in its sole discretion:

(a) If OSCSHN determines, based upon its own internal auditing and record keeping systems, at any time, that it does not have or will not have sufficient funds to provide payments for authorized services for additional Applicants, OSCSHN shall:

(A) Cease approving applications;

(B) OSCSHN employees shall inform clinic patients and other persons that OSCSHN is no longer approving applications because of insufficient funds, and shall inform such persons of the probable date on which OSCSHN shall again approve applications;

(C) Cease authorizing additional health care services for Recipient Children whose LRAs are eligible for OSCSHN financial assistance.

(b) If OSCSHN determines, based upon its own internal auditing and record keeping systems, at any time that it does not have or will not have sufficient funds to provide payments for authorized services for Applicants who have applied, but for whom no determination of eligibility has been made, OSCSHN shall nevertheless finish processing those applications and determine the eligibility or ineligibility of each such Applicant and their LRAs for use in the event that additional funds become available. In such event, the LRAs of eligible applications shall be provided funding in the order received unless a child's life or good health is threatened, in which event said child's application will be given priority;

(c) OSCSHN shall make payments for authorized services in the order in which OSCSHN receives bills for such services;

(d) If OSCSHN determines due to nonavailability of funds that it is unable to pay for an authorized service, it shall cancel the authorization and any related purchase order any time up to the point at which services have been provided. In the event any authorization is cancelled pursuant to this limitation, any charges incurred for services rendered after the date of cancellation shall not be the obligation of OSCSHN;

(e) Except as otherwise specifically provided herein, in the event that OSCSHN determines that it does not or will not have sufficient funds to provide payments for all Applicants, present and future, as well as to make payments in behalf of all Recipient Children, it shall first cease accepting applications in accordance with subsection (a) of this section and finish processing received applications in accordance with subsection (b) of this section. If after taking such action, it is still determined that sufficient funds are not available, it shall take the actions set forth in subsections (c) and (d) of this section. In the event that the life or good health of a child is threatened if a procedure is not performed, OSCSHN shall give funding such procedure priority over other procedures not posing such threat.

(3) The Director shall establish a system for authorized non-physician hospital inpatient services based upon usual lengths of stay or maximum dollar amounts per admission.

(4) By accepting an OSCSHN authorization, the Health Care Provider agrees not to seek further payment from the patient or the patient's family for such authorized services beyond the amounts available from insurance, OSCSHN, Medicare, Medicaid, or other third party. In those cases where OSCSHN has notified the

Provider that money is no longer available from OSCSHN, the Provider shall not be so restricted.

(5) Insurance:

(a) All insurance benefits must be used;

(b) Payment for authorized services for children with insurance benefits shall not be made until insurance has paid or rejected the claim. Subject to all the limits on benefits as contained in these rules, OSCSHN will pay the cost of all required services above that reimbursed by insurance. The Director shall approve payment for authorized services prior to settlement of the insurance claims if such is necessary to avoid undue suffering or to preserve life and good health, and if immediate payment will cause OSCSHN funds to be utilized in the most efficient and effective fashion, all as determined, based on usual and customary health standards;

(c) The family shall notify OSCSHN within 30 days of any change in the child's health insurance coverage which results in coverage of costs which are currently paid for by OSCSHN.

(6) The Provider shall reimburse OSCSHN first out of any funds received from Medicaid, Medicare, any medical insurance plan or policy or other third party, including donated funds and such other funds available for health care derived from settlement of injury claims.

(7) OSCSHN will not provide reimbursement for minor occasional costs of a Recipient Child's treatment. For purposes of this clause, "minor costs" shall be defined as charges for supplies, equipment, replacement parts, repair and replacement of equipment, and drugs less than \$25 each. "Occasional costs" shall be defined as costs occurring less frequently than once per month. In the event that minor costs are not occasional, they may be aggregated by the LRA and will be authorized by OSCSHN.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

### 572-060-0135

#### Availability of Services

(1) Limitations. OSCSHN will not provide the following:

(a) Organ transplants and related anti-rejection drugs;

(b) Surgery which is primarily for cosmetic purposes;

(c) Research or experimental medical or professional services, hospital services, drugs, devices or equipment:

(A) Research or experimental medical or professional services, hospital services, drugs, devices or equipment is defined to include services, drugs, devices or equipment which have not been recognized as having a proven rehabilitative value as determined by the professional standards of the applicable medical or health care specialty groups, including but not limited to:

(i) Equipment or appliances that do not have the approval of the Department of Health and Human Services Food and Drug Administration or other appropriate federal agency (Investigational New Drugs and Devices and Investigational Services and Treatments shall not be deemed to have received such approval.);

(ii) Medical and/or other health related services, including drugs, food supplements, equipment or appliances not reported on, described, or discussed in published and recognized professional journals which have an advisory board passing on its publications;

(iii) Services, drugs, devices, equipment or appliances that have not been recognized by appropriate national professional organizations.

(B) If a Health Care Provider wishes to utilize medical and/or other services, equipment or appliances which are identified as possibly research or experimental, the Provider must provide a written justification for doing so. Other pertinent information from knowledgeable professional sources may be obtained by the Health Care Provider. Based on the information supplied and the criteria at subparagraphs (A)(i) - (iii) of this subsection, the OSCSHN Director shall determine whether services or equipment are research or experimental;

(C) If OSCSHN authorizes a Health Care Provider to perform services or to purchase equipment or supplies later

determined by OSCSHN as research or experimental, and if said Provider has failed to notify OSCSHN in advance of the possible experimental or research nature thereof, the Provider shall be obligated to refund any monies paid to it by OSCSHN or the LRA to perform such procedure or purchase such item;

(D) Appeals for waivers to the above limitations are to be made in writing to the Director who may approve services on an exception basis.

(d) Services outside of the State of Oregon if the Director determines that identical quality of service can be provided at facilities within the State of Oregon.

(2) Authorization: General:

(a) Except as otherwise specifically provided in subsection (3)(e) of this rule, all health care services, equipment or drugs to be purchased for individuals by OSCSHN, including diagnostic evaluation services (section (4) of this rule), must be preauthorized, i.e., authorized by OSCSHN before their delivery. Such authorizations shall be to specific Health Care Providers and shall specify the services to be provided;

(b) Prior to any services, equipment or drugs being authorized by OSCSHN, a completed application must have been submitted to OSCSHN and eligibility established for the OSCSHN program;

(c) All authorizations are recorded as part of the individual patient's case record.

(3) Authorization Procedure:

(a) An authorization for health care services, equipment or drugs must be requested from OSCSHN:

(A) Any person may request that OSCSHN issue an authorization, but authorizations will not be effective until OSCSHN receives notice from a Health Care Provider which documents the need for and extent of the services, equipment or drugs to be provided to the Recipient Child. This notice may be either written or oral;

(B) Services, drugs or equipment which are duplicative of those authorized or exceed authorized limits or are arranged without prior notification to and concurrence by OSCSHN shall not be authorized.

(b) Authorizations will be issued for health care services, drugs or equipment only to a specific Health Care Provider and then only if Provider meets the criteria established in this Part, has evidenced a willingness to participate in the OSCSHN program, agrees to accept OSCSHN rates of payment, and agrees to abide by OSCSHN administrative procedures, as set forth in these rules:

(A) OSCSHN maintains lists of qualifying, currently participating Health Care Providers;

(B) If the LRA or Recipient Child wishes to use a particular Health Care Provider, not currently participating in the OSCSHN program, that Provider will be added to the OSCSHN program if said Provider meets all the standards enumerated in OAR 572-060-0145 however, OHSU salaried clinicians will not be paid by OSCSHN for services performed outside of their OHSU employment contract.

(c) All hospitalizations and all equipment purchases are subject to separate authorizations for each occasion of such service;

(d) Children receiving OSCSHN services shall be preauthorized a certain set number of professional outpatient service visits if such is determined medically necessary and said services will be furnished by a specific Health Care Professional or Facility. Upon recommendation for additional services by a Health Care Professional, separate issuance of authorization(s) will be required;

(e) Exceptions to the pre-authorization requirement:

(A) The initial referral of a child to OSCSHN may be concurrent with the first visit to an approved Health Care Professional or Health Care Facility. Upon submission of a referral from the Health Care Professional or Provider and/or an application by an LRA (within 30 days of the time services were rendered), an authorization for the aforescribed initial medical services will be issued if the Applicant and LRA are determined eligible for the OSCSHN program and if the services provided are determined by OSCSHN to be medically necessary to meet

special health needs through the application of usual and customary medical criteria.

**NOTE:** Payment for such services is subject to the time limits on retroactive benefits.

(B) Retroactive authorizations for services provided will be made unless:

(i) The service was not provided during a period of eligibility except as provided in paragraph (A) of this subsection;

(ii) OSCSHN was not notified within 30 days after the service was provided;

(iii) Funds are not available to make the reimbursement, as determined by OSCSHN in accordance with OAR 572-060-0130(2);

(iv) The service was provided by a Health Care Facility or by a Health Care Professional not pre-approved by OSCSHN as meeting the Standards for Health Care Professionals (OAR 572-060-0145) or Standards for Facilities (OAR 572-060-0150); unless the service provided was an emergency, in which case the service will be retroactively authorized if the Facility or Professional providing the service is deemed by OSCSHN to meet the standards in these rules after the request for reimbursement is received;

(v) The LRA has privately arranged for services with a Health Care Provider expecting private sources of reimbursement at the level of their usual and customary charges; unless said Provider subsequently agrees to accept the OSCSHN level of reimbursement.

(4) The Diagnostic Evaluation Program (Diagnostic Services):

(a) OSCSHN provides for early identification and diagnostic evaluation of children eligible for the OSCSHN treatment program through the qualified professional and support staff within OSCSHN, through a clinic system which is organized and operated in cooperation with Health Care Providers from various regions and through relationships with Health Care Providers in the private-voluntary sector throughout the state. All appointments are coordinated through OSCSHN Program Support offices;

(b) Necessary Diagnostic Services are provided without charge above available insurance or other forms of reimbursement if the family is OSCSHN eligible;

(c) In specified areas outside of Portland, Eugene and Medford, OSCSHN arranges for regional clinics with special or general scope to meet on a periodic basis. These clinics are staffed by Health Care Professionals participating in the OSCSHN program and are available for Diagnostic Services as well as certain treatment services;

(d) In the cities of Portland, Eugene and Medford, OSCSHN utilizes established CDRC tertiary clinics associated with OSCSHN approved Health Care Facilities to perform Diagnostic Services;

(e) If OSCSHN is able to determine, from an interview or from other existing information, that an Applicant is ineligible, Diagnostic Services shall not be paid by OSCSHN;

(f) All Diagnostic Services must be provided on an outpatient basis unless inpatient services for this purpose are specifically approved by the Director who shall approve such services when they are required to complete the diagnostic evaluation.

(5) The Treatment Program:

(a) OSCSHN provides for treatment and follow-up services through established CDRC tertiary clinics, through qualified professional and support staff within OSCSHN, through a regional clinic system utilizing OSCSHN approved Health Care Professionals and Facilities, and through Health Care Providers throughout the state. The OSCSHN program is oriented in large part around a tertiary clinic or "specialized centers" model to encourage coordinated multi-specialist involvement with OSCSHN Recipient Children;

(b) The services provided through the OSCSHN Treatment Program, when determined medically necessary by a Recipient Child's treating health care professional(s), include the following:

(A) Consultative services through a Health Care Professional or Facility;

(B) Continuing outpatient supervision furnished by Health

Care Professionals including office visits or by a Health Care Facility in a clinic, if such would more adequately meet the health care needs of the Recipient Child based on all applicable health criteria than would a OSCSHN regional clinic;

(C) Hospitalization and inpatient health care and/or surgical treatment including special rehabilitation services. Procedures, tests, or services customarily performed in outpatient facilities may be rendered on an inpatient basis if determined to be indicated by the Director, based on the recommendation of the Recipient Child's treating Health Care Professional(s);

(D) Assistive appliances approved by OSCSHN, such as braces, prosthetic limbs, hearing aids, speech prostheses and related adaptive devices and special supplies determined necessary to accomplish rehabilitation goals. Excluded are fixed architectural modifications of the LRA's dwelling in which the child resides, and property related thereto;

(E) Speech-language pathology, audiology;

(F) Physical and occupational therapy;

(G) Nutrition evaluation, guidance and provision of special dietary substances available through programs of public or private agencies established for such purposes;

(H) Specialized dental care, such as orthodontics, prosthodontics, or oral surgery as required to further the treatment plan of children with severe orofacial deformities (e.g., cleft lip-palate). Routine preventive or restorative dentistry is not provided except for children for whom this services is a specific recommendation to be integrated into an authorized orthodontic or prosthodontic plan or who, as a special requirement imposed by a physical impairment or as a result of the severity of an impairment, requires specialized dental restorative intervention;

(I) Arrangements for home follow-up services by public health and/or related rehabilitative services personnel;

(J) Specialized prescriptive drugs integral to the treatment program of a chronic disability, subject to the limitations of OAR 572-060-0130(6);

(K) Genetic evaluation and family counseling;

(L) Psychological/psychiatric evaluation as recommended for diagnosis and treatment planning;

(M) Referral to other public or private agencies as required to further support the special needs of the family and/or child.

(c) In order to make recommended services accessible to financially eligible families, OSCSHN will support necessary transportation, lodging, meals, parking costs and interpreter for the family and child at lowest available rates. OSCSHN shall be obligated to provide said support only if no other sources are available for this purpose. The LRA must provide documentation such as receipts to verify such costs:

(A) Support will be available for the following individuals: LRAs; the Recipient Child; any additional caretaker whose presence is medically required to provide care for the Recipient Child during transportation. Transportation assistance will be limited to a maximum of one round trip for each authorized person requiring an overnight stay. Mileage reimbursement will be at the prevailing rate for non-employees of the Oregon State System of Higher Education;

(B) When circumstance so dictates to meet the health care needs of the child, the Director shall authorize payments in excess of the amount stated above.

Stat. Auth.: ORS 351.070 & 444.010 - 444.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 4-1990, f. 11-15-90, cert. ef. 11-14-90; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94; HSU 5-1994, f. & cert. ef. 11-16-94

#### 572-060-0140

##### Rates of Payment

(1) All services subject to payment by OSCSHN shall be authorized by OSCSHN in accordance with OAR 572-060-0135(3). All payments shall be approved and made in accordance with all applicable state laws relating to making disbursements of public funds.

(2) Methods of Payment:

(a) The rate of payment for the services of Health Care

Professionals shall be established by the Director at a level not in excess of the usual and customary fee for the service to be performed as determined by all data, information and value scales bearing on the appropriateness of the fee. Dental services shall have the same reimbursement arrangement. OSCSHN will negotiate other reimbursement formulae or fee schedules if it determines that such will be required to meet the needs of children with complex impairments;

(b) Payments for other treatment or services appropriate for the condition being treated whether at the patient's home, a private office, hospital, extended care facility or outpatient therapy center, shall be determined by the Director utilizing the criteria described in section (1) of this rule;

(c) Payments for hospital services, including hospital outpatient clinics, shall be the lower of the hospitals reimbursable costs as determined by cost reports filed by the hospital with the Oregon Department of Human Resources or similar agency or its charges, unless a negotiated per-diem rate is in place between the hospital and OSCSHN. Hospitals shall be entitled to interim payments in amounts not to exceed their billed charges. In the event that these interim payments to the hospital exceed the hospital's verified allowable costs, the hospital shall reimburse any overpayment to OSCSHN. All payments made to hospitals shall be deemed subject to this provision unless alternative reimbursement methodologies have been agreed upon;

(d) Payments for outpatient services such as x-rays and laboratory procedures shall be made in accordance with fee schedules established by OSCSHN utilizing criteria described in subsection (a) of this section;

(e) Payments for drugs shall be made at the usual and customary charges or in accordance with established reimbursement schedules;

(f) Payments for braces, prostheses, hearing aids, and related assistive appliances and medical supplies shall be made in accordance with the laws of the State of Oregon relating to purchasing and finance;

(g) Payment amounts for services in out-of-state facilities not otherwise included in subsection (c) of this section shall be said facility's charge unless OSCSHN determines that the charge exceeds the usual and customary level of reimbursement.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

#### 572-060-0145

##### Standards for Health Care Professionals

(1) Personnel Receiving OSCSHN Authorizations:

(a) Physicians: General Qualifications. In view of the specialized care required by children with chronic and often uncommon physical impairments served by OSCSHN, a participating physician Health Care Professional shall be certified by the appropriate board and sub-board, if applicable, of the American Board of Medical Specialties; be licensed by the State of Oregon or the state in which the medical services are being provided; and be a member in good standing of the professional staff of the Health Care Facility approved by OSCSHN for the services to be provided. Physicians shall be those who have been approved by OSCSHN as meeting the above standards as evidenced by a submission thereof on forms provided by OSCSHN for that purpose. The Director will authorize the use of non-certified physicians when such is required to meet the needs of a specific child (for purposes of this clause, a non-certified physician is defined as a physician who is qualified by training in his specialty as determined by the American Board of Medical Specialties but who has not yet met the minimum experience qualifications required to complete the credentialing process through oral and written examinations). In such cases, the Director will establish limits on the services to be performed by such Professionals which reflect the extent of the training and experience of the physician;

(b) Physicians: Special Qualifications: In meeting the unique needs of individual children, the Director may find it necessary to



require physicians involved in providing care to said children to demonstrate that they have completed advanced training germane to the condition being treated. Such training may include subspecialty certification by the American Boards of Medical Specialties or completion of a period of fellowship training in an approved program. The Director may also require, in such circumstance, that the physician evidence completion of continuing medical education in the specialized area needed and demonstrate significant recent experience in treating low incidence health impairments. Among the services provided by OSCSHN which require such qualifications are those involving medical and surgical management of children with cardiac defects; surgical management of curvature of the spine; habilitation of the upper extremity amputee; diagnosis and management of inborn errors of metabolism; hemophilia; cystic fibrosis; cleft lip/palate; spina bifida; juvenile rheumatoid arthritis; and genetic evaluation and counseling;

(c) Other Health Care Professionals: Other Health Care Professionals include, but are not limited to, nurses, physician assistants in rural areas, social workers, specialized dentists, physical therapists, occupational therapists, speech-language pathologists, audiologists, ophthalmologists, psychologists, nutritionists, genetic counselors, orthotists, prosthetists, and related consultants. Other Health Care Professionals shall meet licensure, certification and credentialing requirements of the state and professional associations in the specialty areas in which they practice or provide services. Additionally, they shall present evidence of their training and experience in providing services to physically impaired children. Evidence of such training and experience shall be relevant to the prescriptive intervention ordered. The Director shall require additional qualifications when further expertise is required in accordance with the standards enumerated in subsection (b) of this section. Services by other Health Professionals shall be provided when medically necessary as determined by the OSCSHN Director considering the recommendations of the primary physician;

(d) Insurance. All physicians and all other Health Care Professionals must carry professional liability insurance in such amounts as are determined by the Director from time to time and must give OSCSHN assurance of this coverage;

(e) Health Care Professionals providing OSCSHN services prior to the effective date of these rules. The above qualifications notwithstanding, physicians and other Health Care Providers who provided OSCSHN services prior to the effective date of these rules shall be entitled to continue in such status provided the Director determines in accordance with findings that they have demonstrated the skill, knowledge, training and experience necessary to continue to provide services to Recipient Children. They shall be deemed to have demonstrated such skill, knowledge, training and experience if past medical outcomes were satisfactory, past medical diagnoses proved correct, and all past medical interventions were in accordance with usual and customary medical standards;

(f) Exclusion from Participation:

(A) Health Care Professionals formally involuntarily excluded from participation in programs of federal and state agencies shall automatically be excluded from participation in the OSCSHN program;

(B) Health Care Professionals shall also be excluded for cause. Cause for exclusion by OSCSHN shall include, but shall not be limited to, failure to successfully complete the accreditation process by the appropriate certifying Board or organization within the maximum time frame for such certification; documented evidence of any kind of professional performance not consonant with the recognized standard of care; adverse action of a hospital medical board, a professional society or other organization; and lack of cooperation regarding billing practice or submission of reports;

(C) Any exclusion for cause shall be communicated to the Health Care Professional in writing. The Professional shall be entitled to appeal any such decision in accordance with the procedures set forth in section (2) of this rule.

(2) Upon receiving notice of OSCSHN intention to terminate

participation in OSCSHN programs for cause, a Health Care Professional shall be entitled to a hearing thereon before the OSCSHN Director, if such is requested in writing within 30 days after said notice is received by the Professional;

(a) The hearing shall be informal in nature and the Professional shall have the right to present all relevant information, witnesses, and evidence in any form, whether or not represented;

(b) The sole question which shall be determined is whether the Professional is qualified to provide services to OSCSHN Recipients under the standards established by OAR 572-060-0100;

(c) Within 30 days after the hearing, the Director shall issue a decision determining whether the Professional is so qualified and stating the reasons for the decision. The decision shall be based upon the facts presented at the hearing and, after sharing with the professional any supplemental information gathered by the Director, any supplemental investigation performed by the Director;

(d) The decision of the Director shall be final.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

## 572-060-0150

### Standards for Health Care Facilities

(1) Diagnostic and Treatment Facilities — General:

(a) All such facilities utilized by OSCSHN must carry adequate professional liability insurance in such amounts as are determined by the Director from time to time and must give OSCSHN assurance of this coverage;

(b) All hospital and extended care facilities utilized by OSCSHN for the provision of patient care services shall conform to written findings of the Director where such exist or to standards set by an appropriate body, which shall be one or more of the following:

(A) Licensure by the appropriate state licensing body;

(B) Accreditation by the Joint Commission on Accreditation of Health Organizations (JCAHO);

(C) Approval of the Commission on Accreditation of Rehabilitative Facilities.

(c) All hospital and extended care facilities serving Recipient Children will have a physically definable pediatric unit to which only children are admitted;

(d) All pediatric cardiology diagnostic and treatment centers shall meet current guidelines promulgated by the American Academy of Pediatrics in addition to having met standards set by the Joint Commission on the Accreditation of Health Organizations;

(e) In making the selection and designation of such approved patient care facilities, OSCSHN shall give priority to those Oregon facilities which demonstrate emphasis on quality children's health care services pursuant to standards enumerated above. In a particular service area in which only a single hospital is utilized to admit all Recipient Children or it is determined that travel to an appropriate facility in Oregon would constitute a danger or severe hardship to the child or family, these standards shall be waived when determined by the OSCSHN Director to be medically indicated to meet the needs of the Recipient Child;

(f) The above standards shall be waived by the OSCSHN Director when necessary to meet the medical needs of the child.

(2) Outpatient Therapy Centers, defined as facilities, directly or not directly associated with approved hospital facilities, which are organized to provide habilitative services such as physical and occupational therapy, speech and hearing intervention services (including applicable diagnoses), at the community level, will be available to patients under OSCSHN authorization provided that:

(a) Such facilities carry adequate professional liability insurance in such amounts as are determined by the Director from time to time and OSCSHN is given assurances of this coverage;

(b) Such facilities and staff meet appropriate state certification whenever such standards exist;

(c) Such facilities and staff meet accreditation standards of the Commission for Accreditation of Rehabilitation Facilities; where they exist and Accreditation by the Professional Services Board (PSB) of the American Speech-Language-Hearing Association (ASHA);

(d) Utilization of Outpatient Therapy Centers or individual therapist Health Care Professionals must be prescribed by the Recipient Child's OSCSHN authorized physician responsible for the overall management of the physical impairment requiring the habilitative service.

(3) Health Care Equipment Suppliers:

(a) All medical equipment suppliers must carry professional liability insurance in such amounts as are determined by the Director from time to time and must give OSCSHN assurance of this coverage;

(b) A facility providing braces, appliances and/or prostheses must be currently approved under the Facility Certification Program administered by the American Board of Certification in Orthotics and Prosthetics, Incorporated, and have in their employ an orthotist and/or prosthetist who has successfully completed a training program recognized by the American Board of Orthotists and Prosthetists, Incorporated, and who is certified by said Board. Providers of specialized medical equipment shall be authorized or approved dealers for such equipment as defined by the manufacturer and shall meet the manufacturer's standards for servicing and repairing such equipment;

(c) The above services must be requested by the Recipient Child's OSCSHN authorized physician;

(d) All providers of medical equipment must have all required state and local certification or licenses for dispensing medical equipment.

(4) Hospitals and other treatment facilities are responsible for informing OSCSHN of changes in professional staff providing services to any Recipient Child.

(5) Health Care Facilities not meeting the standards established by this rule and therefore not eligible for OSCSHN payment as either a general or specialized provider shall be entitled to a hearing thereon before the OSCSHN Director, if such is requested in writing within 30 days after notification is received by the facility:

(a) The hearing shall be informal in nature and the Facility shall have the right to present all relevant information, witnesses, and evidence in any form, whether or not represented;

(b) The sole question which shall be determined is whether the Facility is qualified to provide services to OSCSHN Recipients under the standards established by this rule;

(c) Within 30 days after the hearing, the Director shall issue a decision determining whether the Facility is so qualified and stating the reasons for the decision. The decision shall be based upon the facts presented at the hearing and any supplemental information received by the Director.

Stat. Auth.: ORS 351.070 & 440.010 - 440.050

Stats. Implemented: ORS

Hist.: HSU 4-1989, f. 6-30-89, cert. ef. 7-1-89; HSU 1-1991, f. & cert. ef. 2-15-91; HSU 2-1994, f. & cert. ef. 3-11-94

## DIVISION 70

### LIBRARY

#### Fee Schedules

#### 572-070-0005

##### Library Fees and Services for Outside Users

The **Fee Schedule of the Oregon Health Sciences University** for the Library is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Director of Libraries, Oregon Health Sciences University.]

Stat. Auth.: ORS Ch. 351

Hist.: HSC 3-1979, f. 6-21-79, ef. 7-1-79; HSC 5-1982, f. 6-30-82, ef. 7-1-82;

HSU 10-1985, f. & ef. 7-2-85

## DIVISION 80

### SCHOOL OF NURSING

#### Fee Schedules

#### 572-080-0005

##### Continuing Nursing Education

The **Fee Schedule of the Oregon Health Sciences University for Continuing Nursing Education** is hereby adopted by reference.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Oregon Health Sciences University School of Nursing.]

Stat. Auth.: ORS Ch. 351

Hist.: HSU 11-1985, f. & ef. 7-2-85

## DIVISION 90

### OFFICE OF RURAL HEALTH

#### 572-090-0005

##### Procedures for Financial Assistance to Rural Communities

The Oregon Health Sciences University hereby amends by reference the Office of Rural Health, **Procedure Manual for Financial Assistance, Revision 1 dated November 1, 1991**, when awarding funds to rural communities with the state. The manual is available at the Office of Rural Health, Oregon Health Sciences University, Mail Code: ORH 4, 3181 SW Sam Jackson Park Road, Portland, OR 97201 during regular business hours.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from the Office of Rural Health — Oregon Health Sciences University.]

Stat. Auth.: ORS 351.422 & Ch. 442

Stats. Implemented: ORS

Hist.: HSU 6-1990, f. & cert. ef. 4-3-90; HSU 3-1992, f. & cert. ef. 1-14-92

#### 572-090-0010

##### Definitions

For purposes clarifying definitions used in ORS 442.470 through 442.515, the following will apply:

(1) "Acute inpatient care facility" means a licensed hospital with an organized medical staff, with permanent facilities that include inpatient beds, and with comprehensive medical services, including physician services and continuous nursing services under the supervision of registered nurses, to provide diagnosis and medical or surgical treatment primarily for but not limited to acutely ill patients and accident victims.

(2) "Beds" refers to number of licensed beds in a facility.

(3) "Frontier area" is a county with a population density of less than six persons per square mile.

(4) "Miles", for the purpose of defining rural areas only, means mileage from city to city as calculated and published by the Oregon Department of Transportation, Highway Division.

(5) "Population" of a town or city refers to population figures published in the most recent edition of the **Oregon Blue Book**.

(6) "Rural" means a geographic area ten or more miles from a population center of 30,000 or more. Rural areas are of three general types reflecting relative distances between principal health care delivery sites, including:

(a) "Frontier areas", which are counties in rural areas that have a population density of six people per square mile or less;

(b) "Remote rural areas", which are rural areas that are more than thirty minutes average travel time from a population center of 10,000 or more and are not within a frontier area; and

(c) "Less remote rural areas", which are rural areas that are thirty minutes or less average travel time from a population center of 10,000 or more and are not within a frontier area;

(d) Although the definitions of rural areas contained in these

rules are effective on the date of the adoption of these rules, areas which have been considered "rural" by virtue of having a Type A, Type B or Type C rural hospital will continue to be considered "rural".

(7) "Rural hospital" means an acute inpatient care facility characterized by one of the following:

(a) Type A hospitals are small and remote, have fewer than 50 beds and are greater than 30 miles from another acute inpatient care facility;

(b) Type B hospitals are small and rural, have 50 or fewer beds and are 30 miles or less from another acute inpatient care facility;

(c) Type C hospitals are considered rural and have more than 50 beds, but are not federally-designated rural referral centers;

(d) "Rural hospital" of any class does not include a hospital designated by the Federal Government as a rural referral hospital;

(e) For purposes of determining a rural hospital(s) classification, the definitions of "rural hospital" in this section shall be considered effective as of January 1, 1989.

(8) "Thirty minutes travel time" means:

(a) In mountainous terrain, on coastal highways, or in areas with only secondary roads available, 15 miles; or

(b) Under normal conditions with primary roads available, 20 miles; or

(c) In flat terrain or in areas connected by interstate highways, 25 miles.

[Publications: The publication(s) referred to or incorporated by reference in this rule are available from Oregon Health Sciences University.]

Stat. Auth.: ORS Ch. 352 & 442

Stats. Implemented: ORS

Hist.: HSU 5-1990(Temp), f. & cert. ef. 3-1-90; HSU 7-1990, f. & cert. ef. 6-5-90

#### **572-090-0020**

##### **Procedures for Classifying Rural Hospitals**

For the purposes of establishing classifications for rural hospitals as defined in ORS 442.470 through 442.515, the office of Rural Health shall utilize the following procedure(s):

(1) The Office of Rural health shall maintain and make available, upon request, a list of hospitals identified as "rural" according to OAR 572-090-0010(7) and classified as follows:

(a) Type A hospitals are small and remote, have fewer than 50 beds and are greater than 30 miles from another acute inpatient care facility;

(b) Type B hospitals are small and rural, have 50 or fewer beds and are 30 miles or less from another acute inpatient care facility;

(c) Type C hospitals are considered rural and have more than 50 beds, but are not federally-designated rural referral centers;

(d) "Rural hospital" of any class does not include a hospital designated by the Federal Government as a rural referral hospital.

(2) In order to determine a facility's correct classification, the Office of Rural Health may request, from the facility:

(a) A copy of a current health facilities license issued by the State of Oregon, indicating number of licensed beds; and

(b) A legible map, showing the most direct and most commonly traveled route on paved roads between the facility and the nearest licensed acute inpatient care facility available to the general public; and

(c) A certification of actual and verifiable mileage between the two facilities. Acceptable certification shall include one of the following:

(A) Records of a licensed ambulance company indicating billed mileage between the two facilities;

(B) A written statement by a local or state law enforcement authority;

(C) A written statement by an official of the local fire district; or

(D) A written statement from the Oregon Department of Transportation.

(3) Any rural hospital may petition the Office of Rural Health for a change in classification by making the request in writing and including a statement as to why a change in

classification should occur, as well as the information contained in section (2) of this rule.

(4) Any rural hospital must notify the Office of Rural Health within 30 days of any changes in licensure, site location or bed size that may affect the hospital's classification as a rural hospital.

Stat. Auth.: ORS Ch. 352 & 442

Stats. Implemented: ORS

Hist.: HSU 7-1990, f. & cert. ef. 6-5-90

#### **572-090-0030**

##### **Certification Process for State Income Tax Credit Program**

The Office of Rural Health shall utilize the following process to certify a practitioner's eligibility for annual credits against state income taxes otherwise due.

(1) The following practitioners may be eligible: physicians licensed under ORS Chapter 677 as medical doctors (MDs), doctors of osteopathy (DOs) or podiatrists (DPMs) by the Oregon Board of Medical Examiners, nurse practitioners licensed by the Oregon Board of Nursing, certified registered nurse anesthetists (CRNAs) licensed under ORS Chapter 678, physician assistants registered with the Oregon Board of Medical Examiners and dentists licensed by the Oregon Board of Dentistry.

(2) Practitioners seeking certification must submit a form prescribed by the Office of Rural Health to the Office of Rural Health. Applications shall be submitted by each individual practitioner, not by a clinic or incorporated practice, and will be reviewed individually.

(3) The Office of Rural Health shall process each application in a timely fashion using the following criteria:

(a) The practitioner must be engaged in a rural medical, dental, podiatric or nursing practice which amounts to 60 percent or more of the practitioner's total practice. Percentage of practice deemed "rural" shall be determined on the basis of actual time spent in practice each week in hours or days, whichever is considered by the Office of Rural Health to be more appropriate;

(b) In addition to being engaged in a rural practice and subject to the exceptions in subsections (5)(a) through (c) of this rule, the eligible MD or DO shall be one or more of the following:

(A) Active member of the medical staff of a Type A rural hospital; or

(B) Active member of the medical staff of a Type B rural hospital that is not located within the boundaries of a Metropolitan Statistical Area; or

(C) Active member of the medical staff of a Type B rural hospital that is located within the boundaries of a Metropolitan Statistical Area, and is located 30 or more highway miles from the closest acute inpatient care facility within the major population center in the metropolitan statistical area; or

(D) Active member of the medical staff of a Type C rural hospital that is subject to the conditions listed in paragraphs (5)(b)(A) - (D) of this rule.

(E) Active member of the medical staff of a Type B rural hospital located in a Metropolitan Statistical Area that does not meet the conditions in paragraph (3)(b)(C) of this rule, or active member of the medical staff of a Type C rural hospital that does not meet the conditions in paragraph (5)(b)(A) - (D) of this rule, but whose practice is located outside the immediate service area of the community where the hospital is situated, whose practice is determined to be rural by the Office of Rural Health, and whose options for medical staff membership are limited by geographic or other circumstances to an otherwise ineligible hospital;

(F) "Active member of the medical staff" is subject to verification by the Office of Rural Health;

(G) Applications from rural MDs or DOs who are not members of any hospital medical staff will be reviewed and may be approved if their medical practice is located in a rural area where distance from the nearest eligible hospital reasonably precludes medical staff membership.

(c) In addition to being engaged in a rural practice, the eligible CRNA must present evidence of employment by or a contractual relationship with one or more of the rural hospitals described in ORS 316.143(1)(a) to (c);

(d) In addition to being engaged in a rural practice, the



eligible podiatrist must present evidence of medical staff membership at one of the following rural hospitals:

(A) A Type A rural hospital;

(B) A Type B rural hospital that is not located in a metropolitan statistical area, or if located in a Metropolitan Statistical Area, is located 30 or more highway miles from the closest acute inpatient care facility within the major population center in the Metropolitan Statistical Area; or

(C) A Type C rural hospital that meets the conditions described in paragraph (5)(b)(A)-(D) of this rule.

(e) In addition to being engaged in a rural practice the eligible dentist must meet the following conditions in order to be eligible:

(A) Maintain a dental practice in a county designated by the Office of Rural Health as a "frontier" county; or

(B) Maintain a dental practice in a rural community with 5,000 or less population and located more than 25 miles from another source of full time general dental care; and

(C) Attest a willingness to reasonably accommodate the oral health needs of patients in his/her rural community regardless of source of payment; and

(D) Present evidence of an agreement with the local rural hospital to treat emergency dental patients either on the hospital premises or in the dentist's operatory regardless of the source of payment, unless there is no eligible rural hospital in the service area.

(4) For the purpose of these rules, "Type A hospital", "Type B hospital" and "Type C hospital" have the meaning for those terms provided in OAR 572-090-0010. The classification of rural hospitals for purposes of determining eligibility for the tax credit program shall be the classification of the hospital in effect on January 1, 1991.

(5) The following practitioners are not eligible:

(a) MDs or DOs who are on the active medical staff of a Type B rural hospital which is located within the boundaries of a federally-defined Metropolitan Statistical Area unless the conditions in subsection (3)(a) or paragraph (3)(b)(F) of this rule are met;

(b) MDs or DOs who are on the active medical staff of a Type C rural hospital, unless the physician is able to demonstrate to the Office of Rural Health that all of the following conditions are present:

(A) The hospital is isolated from other acute inpatient care providers due to distance and geographic conditions, including but not limited to mountains, bodies of water, inadequate roadways or persistent natural occurrences such as floods, inclement weather or landslides; and

(B) The hospital provides basic emergency care to its community through a hospital-operated emergency room; and

(C) The hospital has been designated by the Office of Rural Health as having particular problems in recruiting and retaining medical staff. In order to obtain such designation, the hospital must submit, to the Office of Rural Health, a detailed narrative summary of its retention record and recruitment efforts for the past two years; and

(D) The hospital is located in an area with unmet health care needs, designated as such by the Office of Rural Health for the purposes of these rules using a weighted combination of the following factors: ratio of population to practicing primary care physicians percentage of population over 65 years of age and percentage of resident women who receive inadequate prenatal care. In evaluating the presence or absence of these factors, the most current and accurate data available to the Office of Rural Health shall be utilized.

(c) MDs or DOs who are active members of the medical staff of a federally designated rural referral hospital designated as such prior to January 1, 1989.

(6) The Office of Rural Health shall maintain a list of type C hospitals which meet the criteria listed in paragraphs (5)(b)(A) - (D) of this rule. The list may be updated periodically as new information becomes available.

(7) A practitioner who practices in a rural area of Oregon for

only a portion of the calendar year and who has practiced a portion of the same calendar year in another Oregon practice setting that would not be deemed eligible may be eligible for a partial or prorata tax credit, to be determined by the director of the Office of Rural Health.

(8) The Office of Rural Health shall send a notarized Certificate of Eligibility to each practitioner determined to be eligible for the state income tax credit. The Certificate of Eligibility will be valid on a year-to-year basis and must be renewed annually.

(9) Any practitioner who has been granted a Certificate of Eligibility shall inform the Office of Rural Health of any change in his or her practice which may affect eligibility, including but not limited to: change in hospital medical staff affiliation, change in practice site(s) or time spent in practice each week. It shall be the responsibility of each practitioner to apply to the Office of Rural Health for recertification on an annual basis.

Stat. Auth.: ORS 442.561 & 442.562

Stat. Implemented: ORS 442.561 & 442.562

Hist.: HSU 11-1990, f. & cert. ef. 7-10-90; HSU 1-1992, f. & cert. ef. 1-7-92;

HSU 7-1995, f. 12-29-95, cert. ef. 1-1-96

## **DIVISION 100**

### **OREGON POISON CENTER**

#### **Household Toxic Product Rules**

#### **572-100-0000**

##### **Aversive Agent Required**

(1) The Poison Prevention Task Force (Task Force) may approve for compliance with ORS 431.870 to 431.915 antifreeze (containing ten percent or more ethylene glycol by weight) or windshield washer fluid (containing four percent or more methyl alcohol (methanol) by weight) manufactured on or after July 1, 1993, and sold in Oregon which contains an aversive agent at a concentration level so as to render the products unpalatable. Unpalatable means a household toxic product with an aversive agent at a concentration level likely to cause many children to reject the product upon, or shortly after, tasting it.

(2) As one means, but not the exclusive means, for satisfying ORS 431.880, a manufacturer of a product specified in section (1) of this rule may include 30 to 50 milligrams of denatonium benzoate per kilogram of product.

(3) There is no appeal to any person or official within OHSU from a Task Force decision approving or disapproving addition of an aversive agent to a product.

Stat. Auth.: ORS Ch. 351 & 431.870 - 431.915

Stats. Implemented: ORS

Hist.: HSU 8-1993(Temp), f. & cert. ef. 6-30-93; HSU 12-1993, f. & cert. ef. 12-22-93

#### **572-100-0010**

##### **Applications for Time Extensions**

(1) A timely request for an extension of time to comply with the requirements of ORS 431.870 to 431.915, must be in writing addressed to the Chair of the Poison Prevention Task Force with information demonstrating the manufacturer's need for the extension.

(2) The Task Force may grant an extension for 120 days and may grant an extension for a longer period of time if the manufacturer demonstrates to the satisfaction of the Task Force the need for a longer extension of time.

(3) The Task Force will make its decision on an application for extension of time within 90 days of receipt of the manufacturer request for the extension.

(4) There is no appeal to any other person or official within OHSU from a Task Force decision approving or disapproving an extension request.

Stat. Auth.: ORS Ch. 351 & 431.870 - 431.915

Stats. Implemented: ORS

Hist.: HSU 8-1993(Temp), f. & cert. ef. 6-30-93; HSU 12-1993, f. & cert. ef.

12-22-93

#### 572-100-0020

##### Applications for Exemptions

(1) A timely request for an exemption from the requirements of ORS 431.870 to 431.915 must be in writing addressed to the Chair of the Poison Prevention Tax Force.

(2) The application must contain information which demonstrates that because of the chemicals contained within the manufacturer's product, any aversive agent would be nonsoluble, nondispersible, unstable or would interfere with the safety or function of the product.

(3) The Task Force will make its decision on the application for exemption within 90 days of receipt of the manufacturer's request for exemption.

(4) There is no appeal to any other person or official within OHSU from a Task Force decision approving or disapproving the exemption request.

Stat. Auth.: ORS Ch. 351 & 431.870 - 431.915

Stats. Implemented: ORS

Hist.: HSU 8-1993(Temp), f. & cert. ef. 6-30-93; HSU 12-1993, f. & cert. ef. 12-22-93

#### 572-100-0030

##### Contested Case Procedures

(1) If a manufacturer's request for approval of an aversive agent for its toxic product, or its request for an extension of time, or its application for exemption from ORS 431.870 to 431.915 is denied by the Task Force, the manufacturer may, within 21 days of the denial, request a contested case hearing before the Task Force to contest the denial.

(2) OAR 137-003-0001 through 137-003-0092 (Contested Case Rules of the Attorney General's Model Rules of Practice and Procedure under the Administrative Procedures Act, the 1991 version promulgated under ORS 183.341) are by this reference adopted and incorporated herein to govern contested case proceedings before the Task Force.

Stat. Auth.: ORS 183.340, Ch. 351 & 431.870 - 431.915

Stats. Implemented: ORS

Hist.: HSU 8-1993(Temp), f. & cert. ef. 6-30-93; HSU 12-1993, f. & cert. ef. 12-22-93

#### 572-100-0040

##### Statutory Obligations of Manufacturers

The obligations of a manufacturer under ORS 431.870 to 431.915 remain in full force and effect notwithstanding a pending request for approval of an aversive agent, an extension of time to comply or an exemption from having to comply with ORS 431.870 to 431.915, a request for a contested case proceeding or an appeal of a Task Force decision to a court of competent jurisdiction on a request for approval extension or exemption.

Stat. Auth.: ORS Ch. 351 & 431.870 - 431.915

Stats. Implemented: ORS

Hist.: HSU 8-1993(Temp), f. & cert. ef. 6-30-93; HSU 12-1993, f. & cert. ef. 12-22-93

#### 572-100-0050

##### Procedure for Rule Adoption

Prior to the adoption, amendment, or repeal of any rule except a temporary rule, the Task Force shall give notice of the proposed adoption, amendment, or repeal:

(1) In the Secretary of State's Bulletin referred to in ORS 183.360 at least 15 days prior to the effective date;

(2) By posting on appropriate OHSU institutional bulletin boards;

(3) By mailing a copy to the Oregonian, the Skanner and the Statesman-Journal;

(4) By mailing a copy of the notice to persons on the Poison Prevention Task Force mailing list established pursuant to ORS 183.335(7). This mailing list may, at the discretion of the Chair of the Task Force, be purged at yearly intervals if the affected party has not affirmatively indicated a request that mailing be continued.

Stat. Auth.: ORS Ch. 351 & 431.870 - 431.915

Stats. Implemented: ORS

Hist.: HSU 8-1993(Temp), f. & cert. ef. 6-30-93; HSU 12-1993, f. & cert. ef. 12-22-93

#### 572-100-0060

##### Quorum and Vote Requirement

The Task Force is subject to ORS 174.130 which provides that in order to make a decision, a majority of all members of the Task Force must concur, i.e., a majority of those present and voting in favor of a particular action is sufficient to authorize that action if the majority is more than 1/2 of the five member Task Force. In other words, at least three members of the Task Force must meet and at least three must concur in an action to make a decision.

Stat. Auth.: ORS 174.130 & Ch. 351

Stats. Implemented: ORS

Hist.: HSU 8-1993(Temp), f. & cert. ef. 6-30-93; HSU 12-1993, f. & cert. ef. 12-22-93

#### 572-100-0100

##### Application of Law and Rules Concerning Products Used in Professional Automotive Repair Facilities

The following products are not subject to the Oregon Toxic Household Products Law, ORS 431-870 - 431.915:

(1) Any product that is:

(a) Marketed to and intended for use solely by professional automotive repair facilities; and

(b) For handling, use and installation in vehicles or machinery:

(A) Only by professional technicians; and

(B) Only on the grounds of professional automotive repair facilities; and

(c) Not intended for sale or distribution by such repair service facilities or any other person, business, corporation, company or institution to a consumer for the purpose of permitting the consumer to handle, use and install the product in the consumer's vehicle or machinery.

(2) Any resulting product of a treatment performed at a professional automotive repair facility, provided that the resulting product is:

(a) Immediately reinstalled into the vehicle at the professional automotive repair facility; or

(b) Stored in the professional automotive repair facility for a later reinstallation into a vehicle at the professional automotive repair facility.

Stat. Auth. ORS Ch. 351, 431.870 to 431.915

Stats. Implemented: ORS

Hist.: HSU 1-1995(Temp), f. & cert. ef. 5-2-95; HSU 4-1995, f. & cert. ef. 6-30-95

#### 572-100-0110

##### Application of Law and Rules Generally to Antifreeze

(1) The requirements of ORS 431.870 to 431.915 as implemented by OAR 572-100-0000 apply to antifreeze products manufactured and shipped for distribution for sale in the State of Oregon after April 30, 1995.

(2) Similarly, the requirements of the law and rule apply to antifreeze products in the inventory of subsidiaries, agents and retail and wholesale distributors (hereinafter referred to as distributors) as of the same date; provided, however, antifreeze products manufactured and shipped to distributors before April 30, 1995, are not subject to the law. For any antifreeze products for sale after April 30, 1995, which does not comply with OAR 572-100-0000, the distributor must provide proof of the date the product was shipped by the manufacturer to a distributor for sale in Oregon within 15 days of a request by the Oregon Health Division.

Stat. Auth. ORS Ch. 351, 431.870 to 431.915

Stats. Implemented: ORS

Hist.: HSU 1-1995(Temp), f. & cert. ef. 5-2-95; HSU 4-1995, f. & cert. ef. 6-30-95

