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RULES:

333-006-0010, 333-006-0020, 333-006-0050, 333-006-0060, 333-006-0070, 333-006-0100, 333-006-0110, 333-006-0120, 333-006-0130, 333-006-0140, 333-006-0150, 333-006-0180, 333-006-0190

AMEND: 333-006-0010

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0010: Update definitions by expanding newborn nurse home visiting provider and community lead organization type to meet the needs of communities where the program operates.

CHANGES TO RULE:

333-006-0010

Definitions

- (1) "Authority" means the Oregon Health Authority.¶
- (2) "Carrier" has the meaning given to that term under ORS 743B.005.¶
- (3) "Community" means a geographic region, county, ~~tribe~~ or other group of individuals living in proximity.¶
- (4) "Community lead" means a ~~local public health authority, early learning hub, or tribe that is~~ organization designated by the Authority to provide community coordination and quality assurance services in accordance with OAR 333-006-0050 for the newborn nurse home visiting program in a specified community.¶
- (5) "Comprehensive newborn nurse home visit" means a home visit where a comprehensive, defined set of assessments and activities must be completed as described in OAR 333-006-0120.¶
- (6) "Early learning hub" means any entity designated by regional partners to coordinate early learning services, as determined by rules adopted by the Early Learning Council under ORS 417.827.¶
- (7) "Families with newborns" or "families" means all families caring for newborns up to the age of six months, including foster and adoptive newborns.¶
- (8) "Health benefit plan" has the meaning given to that term under ORS 743B.005.¶
- (9) ~~"Newborn nurse home visiting provider" or "certified provider" means a person or LPHA certified by the Authority to provide newborn nurse home visits in accordance with OAR 333-006-0070 and OAR 333-006-0120.~~¶
- ~~(10)~~ "Home visitor" means an individual who provides newborn nurse home visits on behalf of a newborn nurse home visiting provider.¶
- (11) "Identified community" means the community that the community lead is designated to coordinate the

newborn nurse home visiting services for.

(121) "Local public health authority" or "LPHA" has the meaning given that term in ORS 431.003.

(132) "Newborn nurse home visiting services" means the services required by the program" or "program" means the statewide program that families with newborns may voluntarily participate in to receive newborn nurse home visiting services. Newborn Nurse Home Visiting Program. These services include but are not limited to requirements of the community lead and newborn nurse home visiting providers as described in these rules.

(13) "Newborn nurse home visiting provider" or "certified provider" means an organization certified by these rules.

(14) "Other Authority to provide newborn nurse home visits in accordance with OAR 333-006-0070 and OAR 333-006-0120.

(14) "Newborn nurse home visiting providers services" means a provider of any home visiting services serving pregnant women and families with young children and may include newborn nurse home visiting providers.

(15) "Newborn Nurse Home Visiting Program" or "program" means the statewide program that families with newborns may voluntarily participate in to receive newborn nurse home visiting services. Newborn nurse home visiting providers provide the services required by the newborn nurse home visiting program. These services include but are not limited to requirements of the community lead and newborn nurse home visiting providers as described in these rules.

(15) "Organization" includes but is not limited to, a local public health authority, early learning hub, Tribe, hospital, or non-profit.

(16) "Other home visiting provider" means a provider of any home visiting services through the program and community leads provide community coordination and quality assurance services in the identified community. serving pregnant people and families with young children and may include newborn nurse home visiting providers.

(167) "Support newborn home visit" means a home visit to complete defined set of assessments and activities or address a specific nurse or family-identified need.

(178) "These rules" means OAR 333-006-0000 to 333-006-01690.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0020

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0020: Amend requirements for community lead application to be in alignment with updated definitions.

CHANGES TO RULE:

333-006-0020

Community Lead Designation

(1) The ~~Authority~~ Oregon Health Authority (Authority) shall designate one community lead per community.¶

(a) Communities based on geographic areas, including counties, shall have one community lead;¶

(b) Communities may be based on ~~tribal membership~~ and coexist with a community lead designated for the geographic area where the ~~tribal member~~ lives.¶

(2) The designation of a community lead is effective for up to three years unless withdrawn earlier.¶

(3) To apply for community lead designation, a ~~LPHA, early learning hub, or tribe~~ organization must submit to the Authority:¶

(a) A complete application in the format provided by the Authority; and¶

(b) Documentation demonstrating that the applicant shall comply with the requirements in OAR 333-006-0050, including but not limited to:¶

(A) Identification of staff available to implement community lead activities; and¶

(B) Evidence of established partnerships with other home visiting providers in the community, including but not limited to memorandums of agreement; and ¶

~~(c) If the applicant is an early learning hub, a letter of support from any LPHA in the applicant's proposed identified community.¶~~

~~(d) If the applicant is an LPHA, a letter of support from any early learning hub in the applicant's proposed identified community, as outlined in the application; and¶~~

~~(e) Evidence demonstrating that the applicant has initiated planning and implementation activities for a universally offered newborn nurse home visiting services model that has been reviewed by the Administration for Children and Families to meet the U.S. Health and Human Services (HHS) criteria for an evidence-based early childhood home visiting service delivery model. ¶~~

(4) The application shall describe the identified community that the applicant proposes to serve.¶

(5) The Authority may designate as the community lead a ~~LPHA, early learning hub, or tribe that has been approved by the Authority as an early adopter~~ organization for Oregon's Universally Offered Home Visiting Initiative without an application being submitted.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

RULE SUMMARY: Amend OAR 333-006-0050: Amend community lead service requirements to include the promotion of health equity and collaboration with additional providers, and to adjust the unenforceable requirement that families must be contacted within two weeks after birth of the newborn.

CHANGES TO RULE:

333-006-0050

Community Lead Services Requirements

(1) Community leads must:

(a) Implement a universally offered newborn nurse home visiting services model that has been reviewed by the Administration for Children and Families to meet the HHS U.S. Health and Human Services (HHS) criteria for an evidence-based early childhood home visiting service delivery model.

(b) Coordinate with all certified providers in its identified community to implement strategies for promoting health equity, focusing on eliminating barriers that prevent families from accessing or fully benefiting from services.

(c) Coordinate with all certified providers in its identified community so that all families with newborns are contacted no later than two weeks after birth of the newborn and offered services, to the greatest extent possible.

(d) Develop and implement strategies in collaboration with the Oregon Health Authority (Authority) to obtain funding to facilitate the provision of newborn nurse home visiting services.

(e) Collaborate with other home visiting providers and medical providers (for example, hospitals, clinics) to integrate newborn nurse home visiting services into the existing services for families in the identified community so that a coordinated system of support is in place.

(f) Maintain a written plan describing how the community lead will comply with subsections (a) through (e) of this section.

(2) Community leads shall maintain, and consider input from, an advisory board that:

(a) Includes stakehold partners from the identified community with representation from the following where applicable: parents, medical providers, hospitals, social service providers serving families, WIC Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), child protective services, early learning hub, tribal leadership, local public health authority (LPHA), Coordinated Care Organizations, insurers that offer health benefit plans, community partners including culturally-specific organizations, newborn nurse home visiting services providers and other home visiting providers.

(b) Meets at least quarterly and distributes meeting minutes to board members and certified providers in the identified community.

(3) Community leads shall assure local community resources are compiled in a web-based format or printed directory and updated at least quarterly for use by certified providers.

(4) Community leads shall engage in quality assurance activities that include:

(a) A monthly review of data including key performance indicators such as scheduling rate, comprehensive newborn nurse home visit completion rate, follow-up rate, demographic profile of families receiving services, community connections and referrals in the identified community.

(b) A monthly review of feedback from the families served by the Newborn Nurse Home Visiting Program in the identified community using standardized methodology.

(c) Monitoring program reach in the identified community measured by the ratio of number of completed comprehensive newborn nurse home visits to total births in the identified community taking into consideration the number of births served by other home visiting providers.

(5) Community leads shall provide the Authority access to data for program monitoring and evaluation in a manner and format designated by the Authority.

(6) Community leads shall work with the Authority to address quality improvement needs.

(7) Community leads shall submit the following de-identified data electronically to the Authority in a manner and format designated by the Authority upon a quarterly basis request. This data may include:

(a) The number of infants born during the previous quarter who reside in the identified community;

(b) For each certified provider in the identified community:

(A) The scheduling rate;

(B) Comprehensive newborn nurse home visit completion rate;

(C) Follow-up rate;

(D) Demographic profile of families receiving newborn nurse home visits;

- (E) Community connections and referrals;¶
  - (F) Feedback from families and referral partner feedback; and¶
  - (c) Any other data identified by the Authority.¶
  - (8) Community leads shall collaborate and coordinate with tribes designated as community leads operating in the same geographic area.
- Statutory/Other Authority: ORS 413.042, ORS 433.301  
Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0060

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0060: Amend community lead training requirements to include the promotion of health equity.

CHANGES TO RULE:

333-006-0060

Community Lead Training Requirements

(1) Community leads must ensure staff members working with the ~~N~~ewborn ~~N~~urse ~~H~~ome ~~V~~isiting ~~P~~rogram receive an orientation within six weeks of beginning work in the program that includes, but is not limited to:¶

(a) Overview of the home visiting model implemented by the community lead described in OAR 333-006-0050(1)(a); ~~and~~¶

(b) Training in early childhood systems coordination that includes ~~stakeholder~~partner engagement, working with community advisory boards, identification of community resources and using data;¶

~~(c) Training in adverse childhood experiences and resilience.¶~~

(2) Community leads must ensure staff working with the program receive within six weeks of beginning work in the program and annually, training in the following:¶

(a) ~~Culturally and linguistic responsiveness;~~¶

~~(b) Implicit bias~~Health equity; and ¶

~~(e)~~ Other training specified by the Oregon Health Authority.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0070

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0070: Remove requirements for staffing plans and lengthen the provider certification period to reduce administrative burden.

CHANGES TO RULE:

333-006-0070

Newborn Nurse Home Visiting Provider Certification

(1) To apply for certification as a newborn nurse home visiting provider, an applicant must:¶

(a) Submit a complete application, in a format prescribed by the Authority ~~Authority~~ Oregon Health Authority (Authority);¶

(b) Submit documentation demonstrating that the applicant meets the requirements of these rules, including but not limited to providing the following:¶

(A) Letter of support from the currently designated community lead ~~designated~~ for the applicant's identified community; and¶

(B) Copies of the policies and procedures required in OAR 333-006-0110.¶

(2) The application shall:¶

(a) Describe the identified community that the applicant proposes to serve;¶

(b) Describe how the applicant shall coordinate with certified providers and other home visiting providers serving the same identified community so that all families with newborns are offered newborn nurse home visiting.¶

(c) Describe how the applicant shall coordinate with primary care providers of care to the families receiving services.¶

(d) Include a staffing plan that describes staff positions ~~(home visitors and supervisors)~~ including required qualifications, ~~required training, or training to be provided upon hiring.~~¶

(e) Describe how the applicant will collect and maintain newborn nurse home visiting services data.¶

(f) Include any other information or forms required by the Authority.¶

(3) A certified provider must ensure it meets and continues to meet during its certification, the requirements in these rules.¶

(4) A certificate for a newborn nurse home visiting provider is ~~effective for one year. A certificate shall be effective no earlier than January 1, 2021.~~ awarded for up to three years.¶

(5) A certified provider is only certified to provide home visiting services in the identified community or communities listed on its certificate.¶

(6) The Authority shall maintain a current list of all certified providers and make the list publicly available.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0100

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0100: Specify when a certified provider can discontinue services.

CHANGES TO RULE:

333-006-0100

Newborn Nurse Home Visiting Provider Coordination

(1) Certified providers must coordinate with the community lead(s) designated in the communities that the certified provider serves, or the ~~Authority~~ Oregon Health Authority (Authority) if no community lead has been designated. Coordination includes, but is not limited to:¶

(a) Actively communicating and working with community leads to ensure that the services are offered to all families with newborns residing in the community lead's identified community.¶

(b) Participating in community lead's community advisory board.¶

(c) Actively communicating and collaborating with other home visiting providers in the identified communities to promote continuity of care.¶

(2) Certified providers must coordinate with the certified providers in the same identified communities to coordinate the offering of services to families.-¶

(3) Certified providers must actively communicate with primary care providers of care to the families receiving services.-¶

(4) A certified provider discontinuing services voluntarily must notify the community lead(s) and the Authority at least 90 days prior to ~~the date of voluntary closure~~ ceasing program enrollment and provide a written plan to ensure continuity of care for families and appropriately maintain records.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301



AMEND: 333-006-0110

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0110: Remove the weekly team meeting requirement to allow for scheduling variability across certified providers.

CHANGES TO RULE:

333-006-0110

Newborn Nurse Home Visiting Provider Requirements

(1) Certified providers must:

(a) Provide home visiting services that meet the requirements for the universally offered newborn nurse home visiting model implemented by the community lead in the provider's identified community.

(b) Provide visits and services that meet the requirements for newborn nurse home visiting in OAR 333-006-0120.

(2) Certified providers must ensure that families of newborns understand that participating in home visiting services is voluntary and carry no negative consequences for a family that declines to participate.

(3) Certified providers may only provide home visiting services after obtaining written informed consent from an individual with authority to consent to the services.

(4) Certified providers shall develop and implement policies and procedures regarding provider operations, including but not limited to:

(a) Home visitor safety;

(b) Obtaining written consent for services prior to provision of services;

(c) Newborn nurse home visiting services documentation;

(d) Mandatory abuse reporting;

(e) Security and confidentiality of provider records and communications;

(f) Services for persons with disabilities;

(g) Services for persons with limited English proficiency;

(h) Billing services to public and private payors;

(i) Communication with primary care providers of care to the families; and

(j) Providing services by telemedicine.

(5) Reimbursement of cost of services:

(a) Certified providers shall seek reimbursement for the cost of newborn nurse home visiting services for Medicaid eligible newborns by enrolling as a Medicaid provider and following Medicaid rules in OAR chapter 410.

(b) Certified providers shall seek reimbursement for the cost of newborn nurse home visiting services from health benefit plans according to rules under OAR chapter 333, division 6.

(c) Prior to providing services, certified providers shall explain to the family with a newborn the family's insurance coverage for the services.

(6) Certified providers must:

(a) Facilitate or conduct weekly team meetings, weekly or on a schedule authorized by the Oregon Health Authority (Authority), for peer review of families who received a home visit during the preceding week that Meetings shall include all staff who interact with families.

(b) Submit newborn nurse home visiting services data in a manner and format designated by the Authority.

(c) Ensure that each nurse home visitor is supervised by a registered nurse trained to provide quality assurance on the home visit protocol.

(d) Ensure that ~~each quarter~~ every home visitor has at least:

~~(A) One home visit observed for quality assurance review; and~~

~~(B) One client medical record reviewed and medical records reviewed for quality assurance, on a schedule designated by the Authority.~~

(e) Communicate with primary care providers providing care to the family.

(f) Ensure all staff working in the ~~N~~ewborn ~~N~~urse ~~H~~ome ~~V~~isiting ~~P~~rogram complete the training required in OAR 333-006-0130.

(g) Confirm that staff have and maintain required licenses or certifications at the beginning of employment and at least annually.

(h) Maintain personnel records documenting any required licenses, certifications, training, and supervision.

(7) Certified providers must ensure that:

(a) Comprehensive newborn nurse home visits are provided by registered nurses licensed in Oregon;

(b) All services are delivered in a culturally responsive manner;

- (c) All services are delivered according to standards of practice for trauma informed care; and¶
- (d) All services are documented in the client's medical record by the home visitor. The documentation shall include:¶
  - (A) The client's name;¶
  - (B) The date of the services;¶
  - (C) The name of the person providing the services;¶
  - (D) The content of the services; and¶
  - (E) Whether the client has declined any specific services.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0120

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0120: Specify that newborn nurse home visits are not always required to be provided in the family's home and removed website link in the event the link becomes dysfunctional.

CHANGES TO RULE:

333-006-0120

Newborn Nurse Home Visiting Service Requirements

- (1) Certified providers must timely offer the home visiting services described in this rule to families with newborns.¶
- (2) Certified providers must timely provide the home visiting services as described in this rule unless:¶
  - (a) The family requests that the services be provided at another time and the provider documents the request in the client's medical record; or¶
  - (b) The family refuses or elects not to participate in a specific service and the provider documents the refusal in the client's medical record.¶
- (3) Certified providers must:¶
  - (a) Provide a comprehensive newborn nurse home visit within two to twelve weeks of the newborn's birth.¶
  - (b) Conduct a post services phone call approximately four weeks after the last services are provided to assess the family's satisfaction with services and effectiveness of community connections.¶
- (4) Certified providers may:¶
  - (a) Provide a support newborn home visit prior to the comprehensive newborn nurse home visit if the nurse home visitor determines the family has immediate postpartum needs within two weeks of birth.¶
  - (b) Provide one to two support newborn nurse home visits after the comprehensive newborn nurse home visit based on the clinical assessment of the nurse home visitor at the comprehensive newborn nurse home visit for additional assessment or to ensure community connections.¶
  - (c) Provide support telephone calls after the comprehensive newborn nurse home visit to ensure community connections are established.¶
- (5) Comprehensive newborn nurse home visits must:¶
  - (a) Be provided by a registered nurse.¶
  - (b) Be provided in the family's home, at an alternative location, or via telemedicine services per ORS 333-006-0120(8).¶
  - (6) Services offered on a comprehensive newborn nurse home visit must include:¶
    - (a) ~~Maternal Caregiver~~ physical assessment (if applicable) according to clinical guidelines approved by the ~~Authority~~ Oregon Health Authority (Authority).¶
    - (b) Newborn physical assessment according to clinical guidelines approved by the Authority.¶
    - (c) Systematic assessment of family strengths, risks, and needs according to clinical guidelines approved by the Authority.¶
    - (d) Screening for intimate partner violence, perinatal mood disorders and substance use using a validated screening tool: approved by the Authority.¶
    - (e) Standardized anticipatory and supportive guidance according to clinical guidelines approved by the Authority.¶
    - (f) Referrals for identified interventions or community resources as a result of needs identified by the home visitor during the home visit.¶
- (7) Support newborn nurse home visits shall be provided by a certified traditional health worker as defined in ORS 414.665 or a registered nurse.¶
- (8) If a family declines home visiting services in their home, an alternate location may be offered, and telemedicine services must be offered and delivered in accordance with ORS 743A.058. Declination of home visiting services in the home must be documented in the client's medical record.¶

NOTE: Clinical guidelines approved by the Authority are available on the Authority's website:

~~<https://www.oregon.gov/oha/PH/HEALTHYPEOPLEFAMILIES/BABIES/HOMEVISITING/Pages/Family-Connects-Oregon.aspx>~~

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0130

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0130: Amend newborn nurse home visiting provider training requirements to include the promotion of health equity.

CHANGES TO RULE:

333-006-0130

Newborn Nurse Home Visitor Provider Training Requirements

- (1) Certified providers shall ensure that staff working in the program timely receive the training in this rule.¶
- (2) All staff working in the program must receive training that includes an overview of the universally offered newborn nurse home visiting model implemented by the community lead in the certified provider's identified community prior to providing services.¶
- (3) All staff working in the program must receive the following training prior to providing services and annually thereafter:¶
  - (a) ~~Culturally and linguistic responsiveness and implicit bias~~ Health equity;¶
  - (b) Child abuse and vulnerable adult mandatory reporting; and¶
  - (c) Other training as required by the Oregon Health Authority.¶
- (4) All home visitors and supervisors providing services must, prior to providing services, receive an orientation that includes:¶
  - (a) Overview of the newborn nurse home visiting services home visit protocol;¶
  - (b) Documentation of services;¶
  - (c) Observational training that includes services delivery, documentation and fidelity assessment;¶
  - (d) Foundations of infant mental health;¶
  - (e) Motivational interviewing;¶
  - (f) ~~Maternal Caregiver~~ and newborn physical assessments;¶
  - (g) Lactation;¶
  - (h) Adverse childhood experiences and resilience; and¶
  - (i) Home visitor safety.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0140

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0140: Correct minor typo.

CHANGES TO RULE:

333-006-0140

Newborn Nurse Home Visiting Provider Review

(1) The ~~Authority~~ Oregon Health Authority (Authority), or its designee, may conduct a review of each certified newborn nurse home visiting provider within one year of initial certification to determine compliance with these rules. The Authority may conduct additional reviews ~~in~~ at its discretion.¶

(2) The certified provider must permit the Authority, or its designee, access to the certified provider's place of business during a review. The provider must permit the Authority, or its designee, access to provider records and cooperate with the Authority during a review. A review may include, but is not limited to:¶

(a) Review of documents, policies and procedures, and records;¶

(b) Review of electronic health records systems, and review of practice management systems;¶

(c) Review of data reports from electronic systems or other tracking systems; and¶

(d) Interviews with management, clinical and administrative staff.¶

(3) The Authority, or its designee, shall provide the certified provider with a written report of the findings from the on-site review.¶

(4) If the Authority finds violations by the certified provider, the Authority may:¶

(a) Require corrective actions to be completed within a specified timeline; or¶

(b) Revoke or suspend the certification in accordance with ORS chapter 183.¶

(5) The Authority may conduct a review of a certified provider without prior notice at any time.¶

(6) A certified provider must provide the Authority with provider records upon request.

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0150

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0150: Remove duplicate information.

CHANGES TO RULE:

333-006-0150

Newborn Nurse Home Visiting Provider Compliance

(1) A certified provider must notify the community lead(s) and the ~~Authority~~ Oregon Health Authority (Authority) within 20 calendar days of any change that brings the provider out of compliance with these rules.¶

(2) The Authority may revoke, deny renewal, or suspend a certificate for a certified provider if:¶

(a) The certified provider submits false, misleading, or incorrect information;¶

(b) The certified provider violates ORS 433.301 or these rules;¶

(c) The certified provider fails to cooperate with a review or request for documentation;¶

(d) The certified provider fails to timely complete corrective actions;¶

(e) The community lead withdraws its letter of support for the certified provider; or¶

(f) The certified provider poses a danger to public health or safety.¶

~~(d) The certified provider fails to timely complete corrective actions;¶~~

~~(e) The community lead withdraws its letter of support for the certified provider; or¶~~

~~(f) The certified provider poses a danger to public health or safety.~~

Statutory/Other Authority: ORS 413.042, ORS 433.301

Statutes/Other Implemented: ORS 433.301

AMEND: 333-006-0180

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0180: Remove rule section specific to 2023.

CHANGES TO RULE:

### 333-006-0180

#### Health Benefit Plan Reimbursement Requirements

(1) As used in OAR 333-006-0180 through 333-006-0190 the following definitions apply:¶

(a) "Billing guidance" means a document describing the claim submission process.¶

(b) "Budget standards" means a document describing standardized and allowable expenses included in the determination of the case rate for newborn nurse home visiting services, including Community Lead Service Requirements outlined in OAR 333-006-0050 and Newborn Nurse Home Visiting Provider and Service Requirements outlined in OAR 333-006-0100 through 333-006-0130.¶

(c) "Case rate" means a flat fee paid for newborn nurse home visiting services. The case rate includes all newborn nurse home visiting services, including Community Lead Service Requirements outlined in OAR 333-006-0050 and Newborn Nurse Home Visiting Provider and Service Requirements outlined in OAR 333-006-0100 through 333-006-0130. The case rate is also known as a bundled claim.¶

(d) "Single support visit rate" means a one-time flat fee paid when a support visit, as defined in OAR 333-006-0010(167), is completed prior to a comprehensive newborn nurse home visit and the comprehensive newborn nurse home visit is subsequently not completed.¶

(e) "Template" means the document the ~~Authority~~ Oregon Health Authority (Authority) shall provide to each newborn nurse home visiting provider and community lead in order to document costs related to providing newborn nurse home visiting services. The template will reflect the budget standards.¶

(2) Health benefit plans must reimburse the newborn nurse home visiting provider at the case rate for these services as defined in ORS 743A.078.¶

~~(3) The case rate and the single support visit rate for January 1, 2023 to June 30, 2023, will be determined using the average cost per newborn served as reported by current service providers and reviewed by the Authority and a third-party consultant.¶~~

~~(4) The case rate and the single support visit rate on July 1, 2023, and thereafter shall be determined by a cost study coordinated by the Authority in consultation with an advisory committee on a biennial schedule. The case rate will be effective on July 1 of odd numbered calendar years.¶~~

~~(a) The advisory committee will advise the Authority on development of the case rate. Documents used to determine the case rate will include but are not limited to the budget standards, the template and the billing guidance. The advisory committee will include representatives of health benefit plans, newborn nurse home visiting providers and community members. The advisory committee shall not exceed 10 members. Members shall be selected via an application process developed by the Authority.¶~~

~~(b) Each newborn nurse home visiting provider and community lead must participate in the biennial cost study. The Authority will provide templates to newborn nurse home visiting providers and community leads.¶~~

~~(c) The Authority will review newborn nurse home visiting provider and community lead services budgets to determine compliance with budget standards as determined by the Authority and notify providers of any non-compliance with standards.¶~~

~~(d) Newborn nurse home visiting providers and community leads shall request a deviation from budget standards based on a compelling modification needed in the designated community. Such a request must be made in writing.¶~~

~~(e) The Authority shall determine which budgets meet standards and are included in the cost study.¶~~

~~(f) At the conclusion of the cost study, the Authority shall determine the case rate and publish it on Oregon's Universally Offered Newborn Nurse Home Visiting Program website: [www.healthoregon.org/familyconnects](http://www.healthoregon.org/familyconnects).~~

Statutory/Other Authority: ORS 413.042, ORS 433.301, ORS 743A.078

Statutes/Other Implemented: ORS 433.301, ORS 743A.078

AMEND: 333-006-0190

NOTICE FILED DATE: 10/28/2024

RULE SUMMARY: Amend OAR 333-006-0190: Remove an unenforceable reimbursement methodology rule.

CHANGES TO RULE:

333-006-0190

Reimbursement Methodology

The health benefit plan reimbursement methodology for newborn nurse home visiting services is a claim invoicing process.¶

(1) If a health benefit plan requires credentialing as a prerequisite to claim submission, health benefit plans must credential ~~Authority~~ Oregon Health Authority (Authority)-certified newborn nurse home visiting providers. Newborn nurse home visiting providers must be credentialed as an organization. The organization also serves as the rendering provider.¶

(2) A bundled claim submitted for the newborn nurse home visiting services case rate must include, at a minimum, a comprehensive newborn nurse home visit, meeting the requirements of OAR 333-006-0120(5) and (6). The bundled claim may include one to two support visits that occur after the comprehensive visit and may include one support visit that occurs prior to a comprehensive visit.¶

(a) If a support visit is completed prior to a comprehensive newborn nurse home visit and the comprehensive newborn nurse home visit is subsequently not completed, the newborn nurse home visiting provider must submit a claim for the single support visit rate.¶

(b) Claims must follow the Authority's billing guidance for newborn nurse home visiting services and generally accepted medical services billing standards.¶

(3) All services provided as part of the ~~Universally Offered Newborn Nurse Home Visiting Program~~ shall be documented in the client's medical record by the home visitor who provides newborn nurse home visiting services on behalf of a certified newborn nurse home visiting services provider.¶

(4) Claims for newborn nurse home visiting services to health benefit plans with no contract in place with newborn nurse home visiting providers must be submitted as an out of network claim by the provider.¶

(5) Single case out of network claims must be reimbursed by health benefit plans in the amount of the case rate and per the billing procedures described in OAR 333-006-0180 through 333-006-0190.¶

~~(6) OAR 333-006-0180 through 333-006-0190 apply to health benefit plans not subject to ORS 433.301 who voluntarily provide reimbursement for newborn nurse home visiting services.¶~~

~~(7) Health benefit plans must reimburse at the case rate for newborn nurse home visiting services conducted via telemedicine pursuant to OAR 333-006-0120 and ORS 743A.058.~~

Statutory/Other Authority: ORS 413.042, ORS 433.301, ORS 743A.078

Statutes/Other Implemented: ORS 433.301, ORS 743A.078