

# Oregon

**Medicaid Program:** Oregon Medicaid

**Medicaid Program Administrator:** Oregon Health Authority

**Regional Telehealth Resource Center:**

Northwest Regional Telehealth Resource Center  
2900 12<sup>th</sup> Ave. N., Ste. 30W  
Billings, MT 59101  
(888) 662-5601  
[www.nrtrc.org](http://www.nrtrc.org)

STATE LAW/REGULATIONS	MEDICAID PROGRAM
<b>Definition of telemedicine/telehealth</b>	
<p>“Telemedical means delivered through a two-way video communication that allows a health professional to interact with a patient who is at an originating site.”</p> <p><i>Source: OR Revised Statutes Sec. 743A.058.</i></p> <p>“Telemedicine means the provision of health services to patients by physicians and health care practitioners from a distance using electronic communications.”</p> <p><i>Source: OR Revised Statutes 442.015.</i></p>	<p>“Telemedicine is the use of medical information, exchanged from one site to another, via telephonic or electronic communications, to improve a patient’s health status.”</p> <p><i>Source: OR Div. of Medical Assistance Program, Medical-Surgical Svcs. Rulebook, Div. 130, 410-130-0610, p. 65-6 (Jan. 1, 2015).</i></p>
<b>Live Video Reimbursement</b>	
<p>Oregon statute requires coverage of telemedicine services (which includes live video), subject to contract terms and conditions.</p> <p><i>Source: OR Revised Statutes Sec. 743A.058.</i></p> <p>(See “Private Payers” section)</p>	<p>Oregon Medicaid will reimburse for live video when billed services comply with their billing requirements.</p> <p>The referring provider is not required to be present with the client for the consult.</p> <p>The referring provider may bill for the patient visit only if a separately identifiable visit is performed.</p> <p><i>Source: OR Div. of Medical Assistance Program, Medical-Surgical Svcs. Rulebook, Div. 130, 410-130-0610, p. 65-6 (Jan. 1, 2015).</i></p>
<b>Store and Forward Reimbursement</b>	
No reference found.	No reference found.
<b>Remote Patient Monitoring Reimbursement</b>	
<p>Oregon requires out of state physicians to acquire active tele-monitoring status through the Oregon Medical Board before they can perform intraoperative tele-monitoring on patients during surgery.</p> <p>The Administrative Code defines “tele-monitoring” as the “intraoperative monitoring of data collected during surgery and electronically transmitted to a physician who practices in a location outside of Oregon. The monitoring physician is in communication with the operation team</p>	No reference found.

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<p>through a technician in the operating room.”</p> <p>Requirements:</p> <ul style="list-style-type: none"> <li>The facility where the surgery is performed must be a licensed hospital or ambulatory surgical center;</li> <li>The facility must grant medical staff membership and/or clinical privileges to the monitoring physician;</li> <li>The monitoring physician must have OR active-tele-monitoring status.</li> </ul> <p><i>Source: OR Admin. Rules. 847-008-0023.</i></p>	
<b>Email/Phone/FAX</b>	
<p>Yes for email. Yes for telephone. No reference found for FAX.</p> <p>Email and telephone consults must comply with Health Service Commission guidelines.</p> <p><i>Source: OR Admin. Rules 410-130-0610.</i></p>	<p>Yes for email and telephone when used for patient consulting and “when billed services comply with the practice guidelines set forth by the Health Service Commission (HSC), applicable HSC approved CPT code requirements and delivered consistent with the HSC practice guideline.”</p> <p>Email, telephone and fax may be used when videoconferencing availability is limited.</p> <p><i>Source: OR Div. of Medical Assistance Programs, Medical-Surgical Svcs. Rulebook, Div. 130, 410-130-0610, p. 65-6 (Jan. 1, 2015).</i></p>
<b>Online Prescribing</b>	
<p><b><u>Practicing Across State Lines</u></b> A physician must first:</p> <ul style="list-style-type: none"> <li>Establish a physician-patient relationship;</li> <li>Make a judgment based on some type of objective criteria upon which to diagnose, treat, correct or prescribe;</li> <li>Act in the best interest of the patient.</li> </ul> <p>Writing prescriptions based only on an Internet sale or consults prohibited.</p> <p><i>Source: OR Admin. Rules, 847-025-0000.</i></p>	No reference found.
<b>Consent</b>	
No reference found.	No reference found.
<b>Location</b>	
<p>Originating sites include but are not limited to:</p> <ul style="list-style-type: none"> <li>Hospitals;</li> <li>Rural Health Clinics;</li> <li>Federally Qualified Health Centers;</li> <li>Physician offices;</li> </ul>	No reference found.

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<ul style="list-style-type: none"> <li>• Community mental health centers;</li> <li>• Skilled nursing facilities;</li> <li>• Renal dialysis centers;</li> <li>• Sites where public health services are provided.</li> </ul> <p><i>Source: OR Revised Statutes Sec. 743A.058.</i></p>	
<b>Cross-State Licensing</b>	
<p>Out-of-state physicians may receive a license to practice across state lines in Oregon, as long as they are fully licensed in another state and meet certain requirements.</p> <p><i>Source: OR Revised Statutes Annotated Sec. 677.139.</i></p> <p><i>(also see Medicaid column)</i></p>	<p>The referring and evaluating practitioner must be licensed to practice medicine within the state of Oregon or within the contiguous area of Oregon and must be enrolled as a Division of Medical Assistance Programs (Division) provider.</p> <p><i>Source: OR Administrative Regulation 410-130-0610(2)(a).</i></p>
<b>Private Payers</b>	
<p>Oregon requires coverage of telemedicine services, subject to contract terms and conditions.</p> <p>Plans may not distinguish between originating sites that are rural and urban in providing coverage.</p> <p><i>Source: OR Revised Statutes Sec. 743A.058.</i></p> <p>A health benefit plan must provide coverage in connection with the treatment of diabetes if:</p> <ul style="list-style-type: none"> <li>• If coverage is provided for in-person services</li> <li>• The service is medically necessary;</li> <li>• The service relates to a specific patient; and</li> <li>• One of the participants in the telemedical health service is a representative of an academic health center.</li> </ul> <p><i>Source: OR Revised Statutes Sec. 743A.185.</i></p>	No reference found.
<b>Site/Transmission Fee</b>	
<i>(see Medicaid column)</i>	<p>Oregon Medicaid will provide transmission fees for originating sites.</p> <p><i>Source: OR Admin. Regulation 410-130-0610(5) &amp; OR Div. of Medical Assistance Programs, Medical-Surgical Svcs. Rulebook, Div. 130, 410-130-0610, p. 65-6 (Jan. 1, 2015).</i></p>
<b>Miscellaneous</b>	

Comments:OR New Regulations Passed

- Occupational Therapy (*Source: OR Admin. Code 339-010-0006*)