Frequently Asked Questions

Statute Implemented: ORS 443.860
Oregon Administrative Rules (OAR) Chapter 333 Division 035
Health Care Regulation & Quality Improvement (HCRQI), Public Health Division, Oregon Health Authority (OHA)
Effective date: September 1, 2010

1) Which hospices must be licensed?

All hospices that provide hospice care in Oregon must be licensed by the Oregon Public Health Division within the Oregon Health Authority (the Division). Hospices licensed in other states that provide care in Oregon must also be licensed in Oregon (OAR 333-035-0055 (6)).

2) How and when do I obtain a hospice license and what are the fees?

To obtain a license, hospices should complete the Hospice License application available at our website: http://www.oregon.gov/DHS/ph/hclc/index.shtml

Hospices currently providing hospice care in Oregon must submit a completed license application by November 1, 2010.

Licenses will be issued and effective as of January 1, 2011 and valid for one calendar year. The annual license fee is $750. (OAR 333-035-0055(2)).

3) Can I pay for the hospice license with a credit card or over the phone?

No, the division is not currently able to take any credit or debit card payments, in person or over the phone. We accept checks or money orders made out to Oregon Health Authority.
4) **How will fees be assessed for hospices with multiple locations?**

The Division may permit a hospice with multiple locations to operate under a single license and pay a single fee if

- The locations operate under the same Medicare Certification Number,
- All locations provide the same full range of care and services, and
- If the locations are located within a 60 mile radius of the parent.

The mileage guideline may be waived by the Division if the hospice can demonstrate the ability to manage and control services and if the care is provided in an underserved area. (OAR 333-035-0055(11)) Waiver requests should be submitted to HCRQI directly by email and we will guide you through the process.

5) **How and when will my hospice be surveyed?**

The Division conducts all survey types and may combine them for efficiency, i.e. HCRQI may perform a survey for re-licensing, re-certification and a complaint investigation all during one visit.

Definitions:

- **Licensing survey**: survey to ensure state licensure requirements are met according to OAR Chapter 333 Division 035.
- **Federal CMS Certification survey**: survey to ensure Federal Conditions for Participation requirements are met according to 42 CFR Part 418.
- **Initial survey**: Any survey, state or Federal, for a new hospice
- **Re-licensure survey**: A survey to ensure state licensure requirements are met according to OAR Chapter 333 Division 035 for an existing hospice.
- **Re-certification survey**: A survey to ensure Federal Conditions for Participation requirements are met according to for an existing hospice, 42 CFR Part 418.
- **Complaint survey**: A survey as a result of allegations of violation of state and/or Federal requirements.
- **Follow-up survey**: A survey that ensures compliance after citations found in any previous survey. The focus is on the plan of correction.
The Division will conduct a licensing survey for each hospice program no less frequently than every three years. Therefore, the date a hospice may be surveyed depends on when they were last surveyed. Those hospices that have the longest period without a survey will be surveyed first. A hospice may also be surveyed if the Division receives a complaint and at other times as the Division deems necessary (OAR 333-035-0075(1), OAR 333-035-0070).

5a) What are the options for state licensure surveys?

Hospices have a few options for licensure. If a hospice chooses, the Division will provide a licensure survey, which is included in the annual hospice licensure fee.

The Division will also accept surveys from approved accreditation organizations to satisfy requirements for state licensure. Hospices may choose to have the initial licensure or re-licensure survey performed by entities approved by the Division. Currently, the Oregon Hospice Association is the only approved entity. Approval of additional accreditation organizations is pending and will be posted in the FAQs. Accreditation survey fees are set by the entity providing the service (OAR 333-035-0100).

5b) What are the options for Federal CMS Certification surveys:

The Division will continue to provide Federal CMS re-certification surveys. At the present time, the Division does not arrange for initial CMS certification surveys for new hospices due to staffing and resource limitations. New Oregon hospices may arrange for initial survey with the accreditation organizations listed below.

Hospices may also choose to have their certification survey performed by an organization with CMS deemed authority. These deemed accrediting organizations perform surveys that include CMS conditions for participation in addition to their accreditation activities. Such entities include: Joint Commission, Accreditation Commission for Health Care, and Community Health Accreditation Program. Certification survey fees are set by the entity providing the service (OAR 333-035-0075(2)).
6) Do I need to advise the Division if my hospice chooses to have surveys done by an entity other than the Division?

Yes, hospices are required to provide written notification of accreditation choices to the Division (email is acceptable). Hospices are required to invite the Division to attend the exit interview conducted by the accreditation organization (email is acceptable). The Division may or may not attend. Additionally, hospices are required to provide the Division with copies of all documentation requested by the Division concerning the survey(s) (ORS 443.860(2) (B) and (C)).

7) How will the licensure survey process be rolled out?

The Division plans to initiate the every three year survey process by surveying hospices that have the longest period without a survey. For instance, a hospice that has not had a CMS re-certification survey for six years would likely be surveyed before a hospice that was surveyed three years ago. As mentioned in Question #5 above, the Division may also perform a survey as a result of a complaint or at other times that the Division deems necessary.

8a) Will Oregon recognize a CMS certification survey done in Washington?

The Division may accept a CMS certification survey of a hospice’s Washington, Idaho or California location if that survey was done within the previous three years according to Interstate Reciprocal Agreements.

8b) If my hospice is licensed in Washington and we are surveyed by Washington State for licensure, will Oregon recognize our Washington licensure survey?

No, the Division requires all hospices that provide care in Oregon to have an Oregon license and receive an Oregon licensure survey (OAR 333-035-0055(6)).
9) **What are the criminal background check requirements under the hospice licensure rules?**

Hospices will be required to ensure completion of background checks for all employees, volunteers and contractors that have direct contact with patients or access to patient records. These individuals will require rechecks every three years. There is a phase-in period of two years for this requirement. There are also some exceptions for health professionals, please see rule text for additional clarification (OAR 333-035-0060).

10) **What are my responsibilities if there are any changes with my hospice?**

Hospices are required to notify the Division within 30 days of the effective date for the following changes:

- Business name
- Address
- Administrator
- Ownership

A new application must be fully completed, signed and mailed to HCRQI.

11) **What resources are available if I have additional questions?**

Hospices may submit questions about the new Oregon Administrative Rules and hospice licensure:

- Email to mailbox.hclc@state.or.us
- Phone: (971) 673-0540
- Mailing Address:

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  Health Care Regulation and Quality Improvement  
  P. O. Box 14450  
  Portland, OR 97293-0260