Below are answers to frequently asked questions (FAQ) about Oregon Administrative Rule (OAR) 333-019-1010, COVID-19 Vaccination Requirement for Healthcare Providers and Healthcare Staff in Healthcare Settings. These FAQ may be intermittently updated.

Q: Does the rule apply to dentists and dental care? That is not listed in the definition of healthcare setting.

A: Yes. Dentists in dental offices are subject to this rule. Dentists are healthcare providers and healthcare staff. Dental care is considered physical health care and a dentist clinic is considered a healthcare setting. Dental staff who are working, learning, studying, assisting, observing, or volunteering in the dental clinic providing direct patient care or have the potential for direct or indirect exposure to patients or infectious materials are also subject to the rule.

Q: What does it mean to be fully vaccinated?

A: Being fully vaccinated means having received both doses of a two-dose COVID-19 vaccine or one dose of a single-dose COVID-19 vaccine and at least 14 days have passed since the individual’s final dose of COVID-19 vaccine. The two-dose vaccines are Pfizer and Moderna and the one-dose vaccine is Johnson & Johnson.

Q: Does the rule apply to employees of retail stores with pharmacies like Walgreens or Bi-Mart pharmacy employees?

A: Yes, for pharmacy employees only (including administrative staff that work at the pharmacy) if they are engaged in direct patient care or have the potential for direct or indirect exposure to patients.

Q: Which disciplines count as healthcare workers?

A: The definition of healthcare provider is intentionally very broad and includes individuals, paid and unpaid, working, learning, studying, assisting, observing or volunteering in a healthcare setting providing direct patient or resident care or who have the potential for direct or indirect exposure to patients, residents, or infectious materials, and includes but is not limited to any individual licensed by a health regulatory board as that is defined in ORS 676.160, unlicensed caregivers, and any clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, student and volunteer personnel.
Q: Are both school based health center staff and school nurses hired by the school required to comply with the rule?
A: Yes.

Q: Are healthcare staff working in prison or jail included in this rule?
A: State owned department of corrections facilities are not subject to this rule; however, they are subject to the Executive Order 21-29 that requires vaccination for executive branch employees. The rule does apply to non-state correctional facilities that have individuals working or assisting in a healthcare setting who have the potential for direct or indirect exposure to a patient or resident, or infectious materials. County and city jails are not exempt from this rule. If the city or county jail has control or responsibility for the activities of healthcare providers or healthcare staff at the jail facility, they are required to comply with the rule.

Q: Does the rule apply to healthcare providers that only provide care in private residences (i.e., Doulas, home health aides, therapists, home health care workers, in-home care workers, hospice workers, etc.)?
A: No, the rule does not apply to healthcare providers that only provide care in private residences if the health care provider only provides care in private residences, and none of those residences are licensed, registered or certified as a home or facility described in the definition of healthcare setting that is in the rule. For example, an in-home care worker providing care at an apartment complex is not subject to this rule. However, an in-home care worker who provides care at a licensed adult foster home, is required to comply with the rule.

Q: If I am a licensed professional, like a licensed cosmetologist, who provides services to clients in healthcare settings like hospitals or long-term care facilities, does the healthcare provider and healthcare staff vaccination requirement apply to me?
A: Yes. Any individual working or assisting in a healthcare setting who has the potential for direct or indirect exposure to a patient or resident, or infectious materials, is subject to the healthcare provider and healthcare staff vaccination requirement.

Q: Does the rule apply to staff working 100% remotely?
A: No, though the Oregon Health Authority encourages all healthcare providers and all eligible Oregonians to get vaccinated in order to protect themselves and others. A healthcare provider who does not provide direct in-person patient care and does not have the potential for direct or indirect exposure to patients, residents, or infectious materials, is not subject to the vaccine requirement in OAR 333-019-1010. However, if a healthcare provider at any time does in-person patient care or, for work purposes, is at a healthcare setting where they do have the potential for direct or indirect exposure to patients, residents, or infectious materials, that provider is required to comply with the rule.
Q: Are licensed EMS providers covered under the rule?

A: EMS providers who are licensed by the Oregon Health Authority and who work, learn, study, assist, observe or volunteer in a healthcare setting providing direct patient or resident care or who have the potential for direct or indirect exposure to patients, residents, or infectious materials, are subject to the healthcare provider vaccination rule requirements. A healthcare setting includes any place where healthcare is delivered, and would include where an EMS provider provides care, like an ambulance.

Q: Are fire fighters covered under the rule?

A: If a firefighter is licensed by the Oregon Health Authority as an emergency medical services provider (EMSP), at any level, and a fundamental part of their job is responding to medical emergencies and providing medical care at the scene of a medical emergency, then yes that firefighter is subject to the healthcare provider vaccination rule. Firefighters routinely respond to 911 medical emergency calls and are the first on the scene, before an ambulance, and provide medical care. Temporary sites where health care is provided is included in the definition of a healthcare setting. Therefore, licensed EMSPs are healthcare providers working in a healthcare setting and they must comply with the rule.

Q: Are police, who have some medical training, or are licensed healthcare providers covered under the rule?

A: Probably not. While a police officer may have some medical training, or may even be a licensed health care provider, it is likely not a fundamental part of their job to provide direct or indirect medical care in a healthcare setting. If a police officer has a job that by definition requires them to provide medical care to individuals, then the rule likely does apply.

Q: Does the rule apply to Developmental Disability settings?

A: Many DHS-licensed or regulated facilities are likely covered by this rule. If there are individuals providing direct patient or resident care or have the potential for direct/indirect exposure to patients or residents, and the DHS-licensed facility is a place where healthcare is delivered, then it is subject to the rule unless specifically exempted from the meaning of healthcare setting.

Q: Does the rule apply to care coordinators or case managers?

A: If the care coordinator or case manager does not provide any patient care or have the potential for direct or indirect exposure to patients or residents, then no. For example, a case manager who speaks only to patients or residents over the phone and works out of an office and does not provide direct patient care is not subject to this rule requirement. However, if a care coordinator or case manager at any time does in-person patient care or, for work purposes, is at a healthcare setting where they do have the potential for direct or indirect exposure to patients, residents, or infectious materials, that individual is required to comply with the rule. The Oregon Health Authority encourages all healthcare providers and all eligible Oregonians to get vaccinated in order to protect themselves and others.
Q: Does the rule apply to language pathologists, occupational therapists and audiologists?
A: Yes, if they work, learn, study, assist, observe, or volunteer in a healthcare setting providing direct patient care or have the potential for direct or indirect exposure to patients, unless they work in a setting that is excluded from the definition of a healthcare setting, like a state-operated facility, or is providing care in a person’s private home and the home is not otherwise licensed, registered, or certified as a facility or home as described in the rule.

Q: Are staff that provide WIC services considered healthcare providers or healthcare staff working in a healthcare setting?
A: Yes. WIC staff providing client services do health assessments, health screening, weigh clients, provide breastfeeding education and counseling and provide other healthcare related services and have direct contact with clients. Any space where WIC services are being provided would be considered a healthcare setting – because a healthcare setting is any place where health care is provided. OHA’s healthcare provider vaccination rule applies to healthcare providers and staff working in healthcare settings, so it applies to WIC staff.

Q: Are AAA (Area Agencies on Aging) staff who regularly and routinely see clients in healthcare settings like hospitals, long-term care facilities, and assisted living facilities subject to the Oregon Health Authority’s healthcare provider vaccination rule?
A: Yes. AAA staff would fall within the definition of “healthcare providers and healthcare staff” because they work and assist residents who are their clients, in a healthcare setting and have direct contact with those residents.

Q: Are AAA (Area Agencies on Aging) staff who only see clients in a AAA office subject to the Oregon Health Authority’s healthcare provider vaccination rule?
A: The Oregon Health Authority (OHA) encourages everyone to get vaccinated. It is the best way to protect themselves, their clients, and the public. However, unless an AAA office is located inside a healthcare setting like a healthcare facility, AAA staff who only work at the office would not be subject to OHA’s healthcare provider vaccination rule.

Q: Does this rule apply to healthcare providers and healthcare staff working or providing care in healthcare facilities on tribal lands?
A: No. This rule does not apply to healthcare settings operated on tribal lands or healthcare providers or healthcare staff operating in those healthcare settings. As sovereign nations, federally-recognized Tribes may adopt their own rules and requirements.
Q: Are security personnel that work in a healthcare facility covered by this rule?
A: Yes, if those personnel fit within the definition of healthcare provider/staff and are working in a healthcare site where care is provided, then the rule applies to those personnel. Healthcare providers and healthcare staff means individuals, paid and unpaid working, learning, studying, assisting, observing or volunteering in a healthcare setting providing direct patient or resident care or who have the potential for direct or indirect exposure to patients, residents, or infectious materials.

Q: If my job requires me to enter a healthcare setting on a periodic basis, like delivering mail or stocking vending machines, or I have a temporary construction job at a doctor’s office or hospital, or I sometimes repair air conditioners at healthcare facilities, and because I have to walk through an area where there are patients, clients or residents, am I a healthcare provider or healthcare staff person subject to the Oregon Health Authority’s vaccination rule?
A: Likely no but the Oregon Health Authority (OHA) encourages everyone to get vaccinated against COVID-19. Individuals who have a job that is not related to the provision of healthcare, but which at times takes them to healthcare settings are not intended to be included in OHA’s rule. The rule is intended to apply to individuals who routinely and regularly work, learn, study, assist, observe or volunteer in a healthcare setting, who actually provide direct patient or resident care, or because of their proximity to patients or residents or infectious materials, are at risk of contracting COVID-19. If you are not sure whether the vaccination rule applies to you, you should err on the side of getting vaccinated. An individual responsible for a healthcare setting should ensure that everyone, whether they are subject to the vaccination requirement or not, takes other precautions against COVID-19 such as wearing high-quality masks, physical distancing and regular handwashing.

Q: Does the healthcare worker vaccination rule apply to temporary staff?
A: Yes. The rule applies to any individual paid and unpaid, working, learning, studying, assisting, observing or volunteering in a healthcare setting providing direct patient or resident care or who have the potential for direct or indirect exposure to patients, residents, or infectious materials, and includes but is not limited to any individual licensed by a health regulatory board as that is defined in ORS 676.160, unlicensed caregivers, and any clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, student and volunteer personnel.

Q: Are workers at Behavioral Rehabilitation Service (BRS) facilities for youth that are funded by DHS subject to this rule?
A: Yes.

Q: Are Traditional Healthcare Workers subject to the healthcare worker vaccination rule and required to get vaccinated?
A: Yes, if traditional healthcare workers fall within the definition of healthcare providers and staff and are working in a healthcare setting.
Q: What is a health regulatory board as defined by ORS 676.160?
A: The rule says that a health care provider includes, but is not limited to, individuals licensed by a health regulatory board as that is defined under ORS 676.160. What are those boards?

A “health professional regulatory board” means the following, so any individual licensed by one of these boards is a healthcare provider under the rule:

1. State Board of Examiners for Speech-Language Pathology and Audiology;
2. State Board of Chiropractic Examiners;
3. State Board of Licensed Social Workers;
4. Oregon Board of Licensed Professional Counselors and Therapists;
5. Oregon Board of Dentistry;
6. State Board of Massage Therapists;
7. State Mortuary and Cemetery Board;
8. Oregon Board of Naturopathic Medicine;
9. Oregon State Board of Nursing;
10. Oregon Board of Optometry;
11. State Board of Pharmacy;
12. Oregon Medical Board;
13. Occupational Therapy Licensing Board;
14. Oregon Board of Physical Therapy;
15. Oregon Board of Psychology;
16. Board of Medical Imaging;
17. Oregon State Veterinary Medical Examining Board; and
18. Oregon Health Authority, to the extent that the authority licenses emergency medical services providers.

Q: Are state employees working at state-operated facilities required to get vaccinated?
A: Yes, under the Governor's Executive Order 21-29.

Q: What if an individual can provide written proof of history of COVID-19 disease, is that sufficient to meet the vaccination requirement?
A: No. Proof of history of COVID-19 disease as a substitute for vaccination is not allowed under the rule.

Q: If a licensed provider refuses to comply, would it affect their license?
A: Possibly. The provider should check with their licensing board, as that is regulated by individual licensing boards.
Q: What reporting will be required to ensure compliance?
A: No active reporting to OHA is required. Documentation must be maintained for at least two years and must be provided to the Oregon Health Authority upon request.

Q: What types of vaccination proof are acceptable?
A: Documentation provided by a tribal, federal, state or local government, or a health care provider, that includes an individual’s name, date of birth, type of COVID-19 vaccination given, date or dates given, depending on whether it is a one-dose or two-dose vaccine, and the name/location of the health care provider or site where the vaccine was administered. Documentation may include but is not limited to a COVID-19 vaccination record card or a copy or digital picture of the vaccination record card, or a print-out from the Oregon Health Authority’s immunization registry.

Q: How will OHA enforce this rule?
A: OHA may issue civil penalties to employers of healthcare providers or healthcare staff, contractors or responsible parties who violate any provision of the rule, of $500 per day per violation.

Q: Does OHA expect employers to take action if employees do not get vaccinated?
A: Yes, because after October 18, 2021, it is unlawful for an employer to employ, contract with, or accept the volunteer services of healthcare providers or healthcare staff persons who are working, learning, studying, assisting, observing or volunteering at a healthcare setting unless the healthcare providers or healthcare staff persons are fully vaccinated against COVID-19 or have a documented medical or religious exception.

Q: By when do healthcare providers and staff have to come into compliance with the rule?
A: Healthcare providers and healthcare staff have up through October 18, 2021 to come into compliance with the rule. After that date, a health care provider or healthcare staff person may not work, learn, study, assist, observe, or volunteer in a healthcare setting unless they are fully vaccinated or have provided documentation of a medical or religious exception.

Q: If my employees don’t comply and I let them go, does my unemployment coverage go up?
A: This is not a question that the Oregon Health Authority can answer. You should reach out to the Oregon Employment Department for information about unemployment.

Q: If an employee is let go for not vaccinating, are they eligible for unemployment?
A: This is not a question that the Oregon Health Authority can answer. You should reach out to the Oregon Employment Department for information about unemployment.
Q: How long will this temporary rule be in effect?
A: Temporary administrative rules usually are in effect for six months from the date they are issued. They can be ended sooner. An agency can also adopt a temporary rule as a permanent rule.

Q: At a county jail, who is responsible for keeping records, the jail or the county?
A: Employers, contractors, and responsible parties must maintain proof of vaccination or a request for an exception from every vaccinated provider.

Q: Are employers liable if they don’t enforce the vaccine requirement and an employee gets sick with COVID-19?
A: Employers should consult with their legal counsel on issues of legal liability. Employers are subject to civil penalties for not complying with the rule.

Q: Can an employer terminate an employee for refusing to comply with the rule?
A: Employers must follow their existing personnel processes in determining employee discipline issues, including termination decisions.

Further, while employers may generally discipline or terminate an employee who refuses to follow workplace requirements, employers must ensure that any disciplinary action or termination does not run afoul of anti-discrimination laws. Employers may be required to reasonably accommodate individuals who are unable to comply with the law for medical reasons or for sincerely held religious belief, unless the accommodation would create an undue hardship to the employer or a direct threat to the employee or others.

Similarly, an employer may not discipline or terminate an employee who complains about actions that the employee believes violate local, state, or federal laws. While an employer may be able to discipline or terminate an employee who refuses to comply with this rule, an employer may not discipline or terminate an employee for questioning the legality of the rule.

Q: Are employees required to get vaccinated during their regular work hours? If they have to get vaccinated outside of their work hours, are employers required to pay for the employee’s time?
A: No, the rule does not require covered employees to obtain vaccination during regular work hours, though an employer could offer or require employees to obtain vaccination during the workday. Regarding whether the time for vaccination is compensable, the Oregon Bureau of Labor and Industries has an FAQ that covers this topic, available at https://www.oregon.gov/boli/workers/Pages/covid-vaccine.aspx. Finally, additional requirements may apply to employers who are subject to collective bargaining agreements or employment contracts.

Q: Can employers or staff with access to the Oregon Health Authority’s (OHA’s) immunization registry (ALERT IIS) verify employee or volunteer vaccination status directly in ALERT IIS?
A: No. Oregon law does not permit an employer who is an authorized user of ALERT IIS to use the system to look up COVID-19 vaccination information on employees or staff. Accessing ALERT IIS for this purpose violates the user agreement.

Q: Are workers at Behavioral Rehabilitation Service (BRS) facilities for youth that are NOT funded by DHS subject to this rule?
A: Yes.

Q: Does the healthcare provider vaccination rule apply to employees that work in stores with pharmacies but are not pharmacy employees?
A: No. The rule doesn’t apply to employees (those that stock the store, work the cash register, etc.) of retail stores with pharmacies that aren’t considered pharmacy employees.

Q: Does the healthcare provider vaccination rule apply to outdoor first responder volunteers, such as ski patrollers and, search and rescue volunteers?
A: Yes, if the first responders are licensed emergency medical services providers.

Q: Is the employer responsible for ensuring vaccination and exception documentation is authentic?
A: The employer is not required to take additional steps to verify that the documentation of vaccination status is authentic. An employer should consult with their legal counsel if they want to take steps to ensure documentation is authentic.

Q: What documents/proof are required for a religious or medical exception?
A: For a religious exception, an individual must fill out and sign the COVID-19 Religious Exception Request Form. The exception request must be on the basis of a sincerely held religious belief and must include a statement describing the way in which the vaccination requirement conflicts with the religious observance, practice, or belief of the individual.

For a medical exception, an individual and their healthcare provider must fill out and sign the COVID-19 Medical Exception Request Form. The healthcare provider must certify that the individual has a physical or mental impairment that limits the individual's ability to receive a COVID-19 vaccination based on a specified medical diagnosis, and specify whether the impairment is temporary in nature or permanent.

Similar forms may be used, instead of the OHA forms, but the forms must contain all of the same information that is required in the OHA forms. Individuals should check with their employers to determine if there is a similar form that can be used.

Q: Where can I access the form that I need to fill out to request a medical or religious exemption from the vaccine requirement?
A: Individuals can access forms at the following links:

- COVID-19 Vaccine Medical Exception Request Form
- COVID-19 Vaccine Religious Exception Request Form
Q: **What medical conditions would exclude someone from vaccination?**
   
   A: Medical exemptions are at the discretion of the medical provider. See the [CDC list of contraindications to vaccination](https://www.cdc.gov/vaccines/contraindication/index.htm).

Q: **If an employee refuses to complete an OHA exception form and instead just emails the employer, is the rule violated? May the employer complete the exception form with the emailed information?**
   
   A: Individuals seeking an exception from the COVID-19 vaccination requirement are required to fill out and submit to their employer a request for an exception using a prescribed Oregon health Authority (OHA) exception request form, or a similar form that contains the same information required in the OHA form. It is possible an employer will have additional steps for requesting an exception or additional measures required in connection with exceptions.

Q: **Must employees use the OHA exception forms, or can they accept other types of documentation? (i.e. doctor’s note, email stating a religious exemption)**
   
   A: Under [OAR 333-019-1010](https://www.oregonlegislature.gov/billsregs/fedDocs Ri/2021/00bec.pdf), an individual must seek an exception using a form prescribed by the Oregon health Authority, or a similar form that contains the same information required in the OHA form.

Q: **What documentation is required for an exception for a sincerely held religious belief?**
   
   A: There is no specific verification documentation required to request an exception for a sincerely held religious belief. However, individuals are required to provide all of the information asked for in the form, including identifying the sincerely held religious belief that prevents them from receiving a COVID-19 vaccination and how that belief affects their ability to receive the vaccination. For a more detailed discussion about employer inquiries into the religious nature or sincerity of belief held by an employee, see 12-I-A at: [https://www.eeoc.gov/laws/guidance/section-12-religious-discrimination#h_25500674536391610749867844](https://www.eeoc.gov/laws/guidance/section-12-religious-discrimination#h_25500674536391610749867844).

Q: **Is an interactive process by an employer or other responsible person required for individuals who request a religious exception based on a sincerely held religious belief?**

   A: Yes, an employer is generally obligated to engage in an interactive process to explore reasonable accommodation(s). This process is important because an accommodation is not limited to what may be requested by the employee and additional information may be needed to determine if an accommodation is an undue hardship for the employer or if the employee would pose a direct threat in the workplace (even after other safety measures have been implemented).

Q: **What are some examples of accommodations or safety measures employers may require for employees who are unable to be vaccinated due to medical conditions or religious beliefs.**
A: Among possible safety measures, as part of granting an exception to the vaccine requirement, an unvaccinated employee, contractor or volunteer entering the workplace might be required to wear an N95 face mask, be physically distanced from others while at the workplace, work a modified shift when there are fewer individuals at the workplace, get periodic tests for COVID-19, be given the opportunity to telework, or finally, accept a reassignment. Safety measures that an employer imposes will depend on the employee’s position duties and work environment among factors. If feasible, employers may consider granting certain accommodations on a temporary basis and reviewing again after a specified period. For more information about accommodations see Questions K.2 and K.6 at: https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws#D.

Q: Does an employer have to grant the exception and provide an accommodation or can an employer terminate the employment of someone who requests an exception?

A: Relevant workplace laws including Title VII, the ADA, and state law equivalents generally require an employer provide reasonable accommodations for employees who, because of a disability or a sincerely held religious belief, request an exception from the vaccine mandate. After engaging in an interactive process, an employer may determine an accommodation is an undue hardship or the employee poses a direct threat in the workplace that cannot be reduced to an acceptable level or eliminated by reasonable accommodation. If an accommodation cannot be provided, whether termination is appropriate is an employer decision and may be subject to provisions in collective bargaining agreements, where applicable, or employer policies.

Q: What is the process for submitting and maintaining exception forms?

A: Individuals should refer to the Instructions for filling out the COVID-19 Medical Exception Request Form and the COVID-19 Religious Exception Request Form to understand where to submit exception forms. Exception forms must be filled out and submitted to the individual’s employer or other responsible person. DO NOT send these forms to the Oregon Health Authority. The individual’s employer or other responsible person is required to maintain the documentation for at least two years and provide it to the Oregon Health Authority upon request.

Q: Can an employer create policies that are more restrictive than the rule, for example, require weekly testing for unvaccinated, require vaccination of remote employees, enact increased health-plan cost sharing for unvaccinated employees?

A: Yes. In connection with your exception request, you may be required by your employer or other responsible party to take additional steps to protect you and others from contracting and spreading COVID-19, which may include additional policies. Workplaces are not required to provide an exception accommodation if doing so would pose a direct threat to the excepted individual or others in the workplace or would create an undue hardship.
Q: Can any medical provider sign a form for a medical exception from the vaccine requirement in the Oregon Health Authority’s rules?

A: Any appropriate health care or rehabilitation professional can sign a medical exception form, though the information included on the form should fall within the scope of the medical provider’s license, registration or certification.

Document accessibility: For individuals with disabilities or individuals who speak a language other than English, OHA can provide information in alternate formats such as translations, large print, or braille. Contact the Health Information Center at 1-971-673-2411, 711 TTY or COVID19.LanguageAccess@dhsoha.state.or.us.