

Action Request Transmittal Aging and People with Disabilities



Mike McCormick

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Number: APD-AR-20-106

Issue date: 12/9/2020

CORRECTED

Topic: Provider Information

Due date:

Subject: New Memory Care Facility, New Residential Care Facility, Change in Ownership Memory Care and Residential Care Facility, New In Home Care Agency

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> ODDS Children's Residential Services | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Child Welfare Programs | |

New Memory Care Facility

Provider Name	Location
HOLI Senior Living	Hillsboro
Provider Number	Effective Date
528704	11/2/2020

New Residential Care Facility

Provider Name	Location
HOLI Senior Living	Hillsboro
Provider Number	Effective Date
528707	11/2/2020

New Residential Care Facility

New Provider Name	Location
Elite Care Jefferson- Ashland	Milwaukie
Provider Number	Effective Date
528699	11/19/2020

New Residential Care Facility	
New Provider Name	Location
Elite Care Rainier-Helens	Milwaukie
Provider Number	Effective Date
528709	11/30/2020

New Residential Care Facility	
New Provider Name	Location
Elite Care Adams-Hood	Milwaukie
Provider Number	Effective Date
528710	11/30/2020

New Residential Care Facility	
New Provider Name	Location
Elite Care Larch-Tabor	Milwaukie
Provider Number	Effective Date
528712	11/30/2020

New In Home Care Agency	
New Provider Name	Location
Homewell Care Services	Clackamas
Provider Number	Effective Date
528705 MMIS# 500786176	11/23/2020

Action Required: None. Information Only.

Field/stakeholder review: Yes No

If yes, reviewed by:

If you have any questions about this action request, contact:

Contact(s): Dana Vafiades, Policy Analyst III, Provider Relations Enrollment questions Jackie Gibbins, Medicaid Eligibility and Training Questions Ben Sherman, Long Term Care Community Support	
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