

# Action Request Transmittal Aging and People with Disabilities



Mike McCormick

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**Number: APD-AR-21-004**

**Issue date: 1/27/2021**

**Topic:** Provider Information

**Due date:**

**Subject:** Change in Ownership Residential Care Facility, Change in Ownership In Home Care Agencies, New In Home Care Agencies

**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 ( <i>please specify</i> ):                     |
| <input type="checkbox"/> Child Welfare Programs                        |   |

**Change in Ownership Residential Care Facility**

<b>Provider Name</b>	<b>Location</b>
Forest Glen Senior Living	Canyonville
<b>Previous Provider Number</b>	<b>Expiration Date</b>
528193	12/31/2020
<b>New Provider Number:</b>	<b>Effective Date</b>
528756	1/1/2021 retroactive effective date

**Change in Ownership In Home Care Agency**

<b>Provider Name</b>	<b>Location</b>
At Home Care Group	Bend
<b>Previous Provider Number</b>	<b>Expiration Date</b>
524563	1/09/2021
<b>New Provider Number:</b>	<b>Effective Date</b>
528751 MMIS# 500788073	1/10/2021

<b>Change in Ownership In Home Care Agency</b>	
<b>Provider Name</b>	<b>Location</b>
At Home Care Group	Eugene
<b>Previous Provider Number</b>	<b>Expiration Date</b>
524289	1/09/2021
<b>New Provider Number:</b>	<b>Effective Date</b>
528754 MMIS# 500788077	1/10/2021

<b>Change in Ownership In Home Care Agency</b>	
<b>Provider Name</b>	<b>Location</b>
At Home Care Group	Beaverton
<b>Previous Provider Number</b>	<b>Expiration Date</b>
526774	1/09/2021
<b>New Provider Number:</b>	<b>Effective Date</b>
528755 MMIS# 500788085	1/10/2021

**Action Required for the Above Changes in Ownership:**

Staff must update the Service Plan and open a new 512 for all consumers served by the previous owner. To update the consumer records staff will need the provider name and provider number and the effective date. All the information is above in the New Owners Information table.

Steps to update each consumer's record:

- Update the Service Plan in Oregon ACCESS
- Close the current 512 with the old provider number
- Open a new 512 with the new provider number

To access a list of all consumers served by the previous owner complete the following steps:

- Go to the Mainframe System
- Enter PESM, P, (provider #)

You will then be able to review a list of recent payment authorizations for the previous owner, which includes the consumers served.

<b>New In Home Care Agency</b>	
<b>Provider Name</b>	<b>Location</b>
A Golden Hand Home Care Service LLC	Salem
<b>Provider Number</b>	<b>Effective Date</b>
528743 MMIS # 500787834	1/11/2021

<b>New In Home Care Agency</b>	
<b>Provider Name</b>	<b>Location</b>
At Home Senior Solutions	Cottage Grove
<b>Provider Number</b>	<b>Effective Date</b>
528748 MMIS # 500787902	12/11/2020

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:**

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

<b>Contact(s):</b> Dana Vafiades, Policy Analyst III, Provider Relations Enrollment questions Jackie Gibbins, Medicaid Eligibility and Training Questions	
<b>Phone:</b> Dana Vafiades: 503-945-5836 Jackie Gibbons 541-693-2838	<b>Fax:</b> 503-947-5357
<b>Email:</b> APD.ProviderEnrollment@dhsosha.state.or.us	