

# Action Request Transmittal Aging and People with Disabilities



Mike McCormick

**Authorized signature**

**Number:** APD-AR-22-023

**Issue date:** 4/18/2022

**Topic:** Provider Information

**Due date:**

**Subject:** Changes in Ownership Assisted Living and Residential Care Facilities

**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"/> Support Service Brokerage Directors           | <input type="checkbox"/> Other ( <i>please specify</i> ):                     |
| <input type="checkbox"/> ODDS Children's Residential Services          |   |
| <input type="checkbox"/> Child Welfare Programs                        |   |

**Change In Ownership Assisted Living Facility**

<b>Previous Provider Name</b>	<b>Location</b>
Pelican Point Assisted Living Community	Klamath Falls
<b>Previous Provider Number</b>	<b>Expiration</b>
527509	3/31/2022
<b>New Provider Number</b>	<b>Effective</b>
529272	4/1/2022

**Change In Ownership Residential Care Facility**

<b>Previous Provider Name</b>	<b>Location</b>
Pelican Pointe	Klamath Falls
<b>Previous Provider Number</b>	<b>Expiration</b>
529108	3/31/2022
<b>New Provider Number</b>	<b>Effective</b>
529270	4/1/2022

**For the changes in provider numbers listed above:**

Staff must update the service plan and open a new 512 for all consumers under the new numbers above. To update the consumer records, staff will need the provider's name, provider number and the effective date. All needed information is in the new owner's information table above.

Steps to update each consumer's record:

- Update the service plan in Oregon ACCESS.
- 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 PESH, P, (provider #)

A list of recent payment authorizations and consumers served by the previous owner will be displayed.

**Field/stakeholder review:**     Yes     No

**If yes, reviewed by:**

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

Contact(s): For provider number questions: Dana Vafiades, Operations and Policy Analyst, APD Provider Relations Unit	
For APD Medicaid policy questions please email: <a href="mailto:APD.MedicaidPolicy@dhsoha.state.or.us">APD.MedicaidPolicy@dhsoha.state.or.us</a>	
For training questions please email: <a href="mailto:APD.Training@dhsoha.state.or.us">APD.Training@dhsoha.state.or.us</a>	
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