

## Long Term Care Referral Agent Disclosure and Advisory Form

### Agent Business Information

Agent's Business Name: Name of Referral Agent  
Address: 123 Anystreet; Anytown, State, Zip  
Telephone: (503) 555-1212  
Email: email address

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### General Information for Oregon Consumers

Oregon law requires all Long-Term Care Referral Agents conducting business in Oregon to be registered with the Oregon Department of Human Services (DHS). Oregon law also mandates certain disclosures be made by the Referral Agents. This form provides the required disclosures.

### Mandated Disclosures

As a Long-Term Care Referral Agent, it is required by Oregon law that I/we disclose the following to you:

- 1) **Description of the referral.** The referral(s) being provided to you includes the following:  
Name of community: \_\_\_\_\_  
Address of community: \_\_\_\_\_  
Care levels provided by community: \_\_\_\_\_  
Minimum monthly cost of community: \_\_\_\_\_
- 2) **Length of contract.** The length of the contract this Senior Referral Agent/Agency has regarding your placement information is:  
\_\_\_\_\_
- 3) **Referral fees.** The fees to be paid to the Referral Agent/Agency for the referral will be paid by the care facility/home:  Yes  No
- 4) **Limitations on referrals.** You will only be referred to care facilities/homes with which I/we have a business-to-business contract.  Yes  No
- 5) **Privacy Policy.** This Referral Agent's/Agency's privacy policy is found at the link \_\_\_\_\_, or a copy is attached.
- 6) **Facility's Complaint History.** The State agency website listing complaints concerning communities is found at: <https://ltclicensing.oregon.gov>

**Additional Disclosures/Advisory Statement**

The following disclosures are not required by law to be made to consumers, but are provided to assist the consumer in understanding Oregon laws regarding Senior Referral Agents:

**A Referral Agent Must:**

- ❖ Discontinue providing services to a client who notified the referral agent in writing that the client wishes to use the services of another referral agent in the future for referral to another facility in a subsequent move.
- ❖ Provide the required disclosures to the client in writing in a conspicuous and clear manner. The disclosure may be made orally first if the agent makes an audio recording with the consent of the client and thereafter provides the client a written disclosure.

**A Referral Agent May Not:**

- ❖ Provide a referral to a long-term care facility/home for compensation unless registered with DHS.
- ❖ Share a client's placement information with or sell a client's placement information to a facility or marketing affiliate without obtaining affirmative consent from the client or his/her authorized representative for each instance of sharing or selling such information.
- ❖ Refer a client to a facility in which the Referral Agent or an immediate family member has an ownership interest.
- ❖ Contact a client or authorized representative who has requested in writing that the Referral Agent stop contacting them.

**Discontinuing services**

If the Referral Agent has received compensation from the facility for a referral that has been made, you or your representative may notify the referral agent in writing that you, or your representative, wish to use the services of another Long-Term Care Referral Agent/Agency in the future for referral to another facility in a subsequent move.