



Office of Licensing & Regulatory Oversight

Requirements for Nursing Facility Name Change

1. Letter of Intent

Summary of proposed action that includes:

- Current “doing business as/assumed business name” of the nursing facility
- Proposed “doing business as/assumed business name” of the nursing facility
- Requested effective date
- Statement that facility ownership remains unchanged

Note: Business names must be registered with the [Oregon Secretary of State Business Registry](#)

2. SDS0466 - Nursing Facility License Application

<https://apps.state.or.us/Forms/Served/se0466.doc> reflecting new dba/abn.

3. For Medicare-certified Nursing Facilities (NF), the following must be submitted to the fiscal intermediary (FI) to update the facility name; please send copy (electronic or paper) of 855A to Oregon NF Licensing:

Medicare Provider/Supplier Enrollment Form (CMS 855), submit to Fiscal Intermediary (FI)
<http://www.cms.gov/cmsforms/downloads/cms855a.pdf>