

# Action Request Transmittal Aging and People with Disabilities



Mike McCormick

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**Number:** APD-AR-20-013

**Issue date:** 2/28/2020

**Topic:** Long Term Care

**Due date:** March 1, 2020

**Subject:** New CBC [AFH/RCF] Exception & AFH Standard Vent Email Box

**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                        |   |

**Action required:**

Effective March 1, 2020 send all CBC Exception Requests for Adult Foster Home and Residential Care Facilities to [APD.CBCExceptions@dhsosha.state.or.us](mailto:APD.CBCExceptions@dhsosha.state.or.us)

Effective March 1, 2020 send all Adult Foster Home Standard Ventilator Rate requests to [APD.CBCExceptions@dhsosha.state.or.us](mailto:APD.CBCExceptions@dhsosha.state.or.us)

Continue to submit all In-home and Adult Day Service Exception Requests to [SPD.Exceptions@dhsosha.state.or.us](mailto:SPD.Exceptions@dhsosha.state.or.us)

**Reason for action:** Increase processing efficiency.

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:**

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

Contact(s): Erin Drake, APD CBC Exceptions Coordinator

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