Action Request Transmittal Aging and People with Disabilities



| Mike McCormick | <u>Number</u> : APD-AR-20-056 | |
|--|---|--|
| Authorized signature | Issue date: 5/8/2020 CORRECTED | |
| <u>Topic</u> : Provider Information | Due date: | |
| <u>Subject</u> : Change in Ownership/Change Nar Care Adult Foster Home Contract | ne Residential Care Facility/New Advanced | |
| Applies to (check all that apply): | | |
| ☐ All DHS employees ☑ Area Agencies on Aging: Type B ☑ Aging and People with Disabilities ☐ Self Sufficiency Programs ☐ County DD program managers | County Mental Health Directors Health Services Office of Developmental Disabilities Services (ODDS) ODDS Children's Intensive In Home Services | |
| ODDS Children's Residential ServicesChild Welfare Programs | Stabilization and Crisis Unit (SACU)Other (please specify): | |
| Change in Ownership/Change In Name Residential Care Facility | | |

Previous Provider Name

All Comfort Residential Care Facility- Portland

Previous Provider Number: 525037 Expiration date: 4/30/2020

New Provider Name:

Barbur Vista Residential Care

New Provider Number: 528493 Effective 5/1/2020

Action Required:

For the above change of ownership, staff will need to update all client records with the new provider numbers. Staff will need to close the Plan of Care (POC) with the old provider number and open a new POC with the new provider number for consumers who are currently Medicaid eligible.

| New Advanced Adult Foster Home Contract: | | |
|---|-------------------|--|
| Provider Name: Abebe Yeshihareg Provider Number: 526161 Effective date:4/22/2020 | | |
| Action Required: None. Information Only | | |
| Field/stakeholder review: ☐ Yes ☒ No If yes, reviewed by: If you have any questions about this action request, contact: | | |
| Contact(s): Dana Vafiades, Policy Analyst III, Provider Relations Enrollment questions Darwin Frankenhoff, Policy Analyst, Long Term Care Services and Supports Sarah Hansen, Policy Analyst, Policy Analyst III, Central Delivery Supports Jackie Gibbins, Medicaid Eligibility and Training Questions | | |
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