Oregon Department of Human Services

Mike McCormick

Number: APD-AR-20-084 Issue date: 9/15/2020

Topic: Provider Information

Authorized signature

Due date:

Subject: Change in Ownership In Home Care Agency, New Specific Needs contract

Applies to (check all that apply):

All DHS employees	County Mental Health Directors
🖂 Area Agencies on Aging: Type B	Health Services
\boxtimes Aging and People with Disabilities	Office of Developmental
Self Sufficiency Programs	Disabilities Services (ODDS)
County DD program managers	ODDS Children's Intensive In Home Services
ODDS Children's Residential Services	Stabilization and Crisis Unit (SACU)
Child Welfare Programs	Other (<i>please specify</i>):

Change in Ownership In Home Care Agency

Hearts of Gold Caregivers- Hood River

Previous Provider Number: 525684 Expiration date: 8/18/2020 New Provider Number: 528618 Effective date: 8/19/2020

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 Specific Needs Contract

Celia's House in Holmes Park-Medford Hospice focused residential care services 6 beds Provider Number: 528624 Effective date: 8/15/2020

Action Required: None Information Only

Field/stakeholder review:YesNoIf yes, reviewed by:

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

Contact(s):		
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