

# Action Request Transmittal Aging and People with Disabilities



Mike McCormick

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**Number:** APD-AR-20-106

**Issue date:** 12/9/2020

**CORRECTED**

**Topic:** Provider Information

**Due date:**

**Subject:** New Memory Care Facility, New Residential Care Facility, Change in Ownership Memory Care and Residential Care Facility, New In Home Care Agency

**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"/> ODDS Children's Residential Services          | <input type="checkbox"/> Other (please specify):                              |
| <input type="checkbox"/> Child Welfare Programs                        |   |

**New Memory Care Facility**

<b>Provider Name</b>	<b>Location</b>
HOLI Senior Living	Hillsboro
<b>Provider Number</b>	<b>Effective Date</b>
528704	11/2/2020

**New Residential Care Facility**

<b>Provider Name</b>	<b>Location</b>
HOLI Senior Living	Hillsboro
<b>Provider Number</b>	<b>Effective Date</b>
528707	11/2/2020

**New Residential Care Facility**

<b>New Provider Name</b>	<b>Location</b>
Elite Care Jefferson- Ashland	Milwaukie
<b>Provider Number</b>	<b>Effective Date</b>
528699	11/19/2020

New Residential Care Facility	
New Provider Name	Location
Elite Care Rainier-Helens	Milwaukie
Provider Number	Effective Date
528709	11/30/2020

New Residential Care Facility	
New Provider Name	Location
Elite Care Adams-Hood	Milwaukie
Provider Number	Effective Date
528710	11/30/2020

New Residential Care Facility	
New Provider Name	Location
Elite Care Larch-Tabor	Milwaukie
Provider Number	Effective Date
528712	11/30/2020

New In Home Care Agency	
New Provider Name	Location
Homewell Care Services	Clackamas
Provider Number	Effective Date
528705 MMIS# 500786176	11/23/2020

**Action Required: None. Information Only.**

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:**

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

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