Information Memorandum Transmittal Aging and People with Disabilities



Diana Nott	<u>Number</u> : APD-IM-23-078
Authorized signature	Issue date : 8/11/2023
<u>Topic</u> : Provider Information <u>Subject</u> : Changes in Ownership & Name Ch	<u>Due date</u> : nanges Memory Care Facilities
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 ☐ Support Service Brokerage Directors ☐ ODDS Children's Residential Services ☐ Child Welfare Programs 	 ☐ County Mental Health Directors ☐ Health Services ☐ Office of Developmental Disabilities Services (ODDS) ☐ ODDS Children's Intensive In Home Services ☐ Stabilization and Crisis Unit (SACU) ☐ Other (please specify):

Change in Ownership Memory Care Facility		
Previous Provider	Location	
Aspen Ridge Memory Care	Bend	
Previous Provider Number	Expired	
524331	7/31/2023	
New Provider Number	Effective	
529887	8/1/2023	

Change in Ownership/Change in Name Memory Care Facility		
Previous Provider Name	Location	
Revere Court of Portland	Portland	
Previous Provider Number	Expired	
525858	7/31/2023	
New Provider Name		
Hazelwood Enhanced Memory Care		
New Provider Number	Effective	
529884	8/1/2023	

If you have any questions about this information, contact:

n you have any queedene assure the information, contact.		
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