Information Memorandum Transmittal Aging and People with Disabilities



Diana Nott Authorized signature	Number: APD-IM-24-104 Issue date: 10/17/2024
<u>Topic</u> : Provider Information	Due date:
Subject: New Specific Needs Contract and New In Home Care Agency.	
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):
New Specific Needs Hospice Contract	
Provider Name	Location
Hopewell House	Portland
Provider Number	Effective
530520 (up to 7 beds)	10/08/2024
New In-Home Care Agency	
Provider Name	Location
Sunshine In Home Care	Medford
Provider Number	Effective
530523 MMIS # 500843781	10/09/2024

If you have any questions about this information, contact:

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