

Aging and People with Disabilities

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Number: APD-IM-15-084
Issue date: 10/21/2015

Topic: Long Term Care

Subject: HCBS Surveys

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 | <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 (<i>please specify</i>): |
| <input type="checkbox"/> Child Welfare Programs | |

Message: As described in [APD-IM-15-061](#) dated 8/21/2015, consumers and providers have begun receiving surveys related to the new Home and Community Based Services regulations.

If consumers or providers return surveys to the local office instead of sending them to Acumentra, local office staff should send the surveys to:

Acumentra Health
Survey Dept.
2020 SW 4th Ave, Suite 520
Portland, OR 97201

If the consumer or provider has questions about the HCBS Survey, they should contact Acumentra at 1-866-432-8403 (*then select Option 3*).

If you have any questions about this information, contact:

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|--------------------|---------------------------|-------------|--|
| Contact(s): | Chris Angel | | |
| Phone: | 503-945-7034 | Fax: | |
| Email: | chris.s.angel@state.or.us | | |