

Donna Keddy  
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**Authorized Signature**

**Number:** APD-PT-14-006  
**Issue Date:** 2/26/2014

**Topic:** Licensing

**Transmitting (check the box that best applies):**

- New policy   
  Policy change   
  Policy clarification   
  Executive letter  
 Administrative Rule   
  Manual update   
  Other: \_\_\_\_\_

**Applies to (check all that apply):**

- |   |   |
|---|---|
| <input type="checkbox"/> All DHS employees                  | <input checked="" type="checkbox"/> County DD Program Managers  |
| <input type="checkbox"/> Area Agencies on Aging             | <input type="checkbox"/> County Mental Health Directors   |
| <input type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Health Services  |
| <input type="checkbox"/> Children, Adults and Families      | <input checked="" type="checkbox"/> Other (please specify): AFH-DD Providers; CDDP AFH-DD Licensing staff |

Policy/rule title:	Business Registry		
Policy/rule number(s):		Release no:	
Effective date:	Immediately upon issue date	Expiration:	
References:			
Web Address:	<a href="http://www.filinginoregon.com/pages/business_registry/research/">http://www.filinginoregon.com/pages/business_registry/research/</a>		

**Discussion/interpretation:** Oregon law requires all persons (individuals and entities) who transact business in Oregon to register their business with the Oregon Secretary of State Corporation Division. Registration informs the public of the business owner’s intent to conduct business.

If the name of the business includes the “real and true” name of the owner, or each owner, if applicable, the Adult Foster Home (AFH) business is not required to register with the Corporation Division. A “real and true” name means a first name, middle initial or name and last name. For example:

<b>Real and True Name of AFH Licensee</b>	<b>Registration Not Required</b>	<b>Registration Is Required</b>
Monica G. Provider	Monica G. Provider Adult Care Home	Monica's Adult Care Home
Monica Gayle Provider	Monica Gayle Provider Adult Foster Home	Monica Provider's AFH

More information about registering business names in Oregon is available at: [http://www.filinginoregon.com/pages/business\\_registry/register/registering.html](http://www.filinginoregon.com/pages/business_registry/register/registering.html).

**Implementation/transition instructions:** The Provider Relations Unit will reject all Provider Enrollment requests for AFH-DD providers that are required to be registered with the Oregon Secretary of State, Corporation Division that are not registered at the time of the enrollment request. In addition, the AFH-DD provider enrollment request will be rejected if the applicant/licensee is not associated with the business name on the registry.

**Training/communication plan:** Notice of this requirement will be sent to AFH-DD licensees by means of an email. In addition to this transmittal, this information will be shared with local CDDP licensing staff via the AFH-DD monthly call in and an email of this transmittal.

**Local/branch action required:** None

**Central office action required:** The Office of Licensing and Regulatory Oversight, DD Licensing Unit, will email this information to inform AFH providers of this requirement. Also will include the new requirement in the renewal application packets sent to providers.

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:**

**Filing Instructions:** File according to local office protocol.

*If you have any questions about this policy, contact:*

<b>Contact(s):</b>	Barbara Southard		
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