

Mt. Hood Senior Solutions, LLC

Long Term Care Referral Agent Disclosure and Advisory Form

Agent Business Information

Business Name: Mt. Hood Senior Solutions, LLC
Address: 376 NE 219th Ave, Gresham OR 97030
Telephone: Oregon (971)757-5142 - Washington (360) 947-1278

Agent Advisor:

Email:

Web: www.mthoodseniorsolutions.com

General Information for Oregon Consumers

Oregon law requires all long-term senior care living agents to be registered with the Department of Human Services (DHS). The law also mandates the following disclosures to clients. These disclosures will be written in a conspicuous and clear manner. The disclosure may be made orally first if the agent makes an audio recording with your consent and thereafter provides a written disclosure.

General Information for Washington Consumers

In WA, the Elder and Vulnerable Adult Referral Act, RCW 18.330, established minimum standards of conduct of placement agencies. Each senior living provider we work with is carefully pre-screened. You will be provided with the date our latest screening and whether it was virtual or onsite regarding each place we select for you. We represent and advocate for you, as well as senior living provided at the same time.

Mandated Disclosures

Our Provider screening included onsite and virtual visits and review of the following:

- Facility Licensing
- The credentials and story of the provider
- Caregivers and staffing ratios
- Cultural accommodations and activities provided
- Care that can and cannot be accommodated
- Challenging behaviors that can and cannot be accommodate
- Meal plans offered and special diets that can be accommodated
- Sources of payment accepted, including whether Medicaid is accepted
- Other special care and services provided
- Citations publicly listed on the Dept. of Social & Health Services website

We understand of the importance of finding senior living options that fit your current and future needs. To establish the best options for you, here is a list of the topics we will cover:

- Your current living situation
- Recent, relevant, medical history
- Medications and medication management needs
- Diagnosis, health concerns, and the reasons you or your loved one(s) are seeking care

- Significant known behaviors or symptoms that require special care
- Assistance needed with activities of daily living
- Activities of interest, spiritual preferences, and lifestyle info
- Sleeping habits
- Basic information about your finances, LTC insurance and Veterans status
- Location preferences
- Preferences regarding meals and daily routines

Description of Services to be provided by Mt. Hood Senior Solutions, LLC agent:

- Mt. Hood Senior Solutions, LLC agent serve you and/or your designate(s) needing or seeking information on available long- term care support options. The type of referral(s) being provided to you includes the following:
☒ Adult Foster Home ☒ Medicaid Contracted ☒ Contracted
☒ Assisted Living Facility ☒ Independent Living ☒ Non-Contracted
☒ Residential Care Facility ☒ Memory Care

Referral Fees/Payment/Structure: Any fees paid to Mt. Hood Senior Solutions LLC will be paid by the admitting home/facility. Mt Hood Senior Solutions LLC has NO ownership interest in any care provider business as required by law. Mt. Hood Senior Solutions LLC is an Oregon/Washington registered business in good standing. If you would like to hire us directly, we have a separate agreement for you to sign.

Mt. Hood Senior Solutions has referral fee contracts with each community we refer potential clients to. Referral fees are charged as a one-time fee after the referred resident moves into the community/home. The community/home is charged a percentage of the first month's rent and care rate for the referred resident. Fees are paid to Mt. Hood Senior Solutions after the resident has lived in a community or home for 30 days. Refunds are issued according to the policy set forth in the mutual referral contract with the senior living home or community.

Privacy Policy Regarding Client Information: Clients understand and acknowledge that each transition situation is different and unique. Your personal information will never be sold for any reason. During our client inquiry process, we will ask you for pertinent health information, your preferences and your available financial resources. At no time will we ask for any banking, investment statements or account numbers. We collect only the necessary information required to make our professional referrals. A copy of our full policy is attached.

Limitations on Referrals: Mt. Hood Senior Solutions LLC will contact prospective facilities and arrange for a time for a tour. This will include options that we are contracted with. Appropriate noncontracted options may also be identified for pursuit on your own.

Length of contract: Mt. Hood Senior Solutions LLC's right to a referral fee lasts anywhere from six months to an indeterminate duration from the time of the referral to the time of a client's move in to a referred facility, depending on the terms of the contract with the facility.

- The agent must discontinue services to you if you notify the agent in writing that you no longer wish to use services of the agent.
- If the agent has received compensation from a facility for a referral that has been made, you may notify the agent in writing that you wish to use the services of another agent in the future for referral to another facility in a subsequent move. Your notice shall identify the name of the facility and the move-in date of the original referral made by the agent.

Facility Complaint History: It is our policy to review the Department of Human Services Licensing website for information on a provider's violations and inspections. The Licensing office stated there has been a reduction in on-site visits to reduce the spread of COVID-19 however, they are still investigating the more serious complaints. With that said, the information we generally review may not be as reflective of a provider as it has been in the past.

- Consumers interested in reviewing the substantiated complaints on any given facility may visit:

OREGON:

<https://ltclicensing.oregon.gov/Facilities>

<https://www3.multco.us/AdultCareOptions/Home/HowToCheckTheComplaintHistory>

WASHINGTON:

<https://www.dshs.wa.gov/altsa/long-term-care-services-information>

COVID-19 Process and Procedures: Mt. Hood Senior Solutions LLC will review long term care communities COVID-19 status as they are released by the Oregon Department of Human Services. Please note that community/home COVID-19 status can change at any time during the long-term care exploration process. We will inform families and individuals of any changes in COVID 19 status as we are made aware.

By signing below, I acknowledge I am the ☐ client ☐ designate authorized to receive this disclosure document. Concurrently, I authorize the sharing of personal client information as may be required to find satisfactory accommodations and support services.

Client name

Receiving Individual – Signature

Date

Time

Receiving Individual – Printed Name

Agent Advisor--Signature

Date

Time

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