

This form is required to report changes to a child's current Office of Developmental Disabilities Services (ODDS) – Host Homes. Please refer to the guide page for information on how to report changes.

Date: ____ / ____ / ____

Section 1: Child information

Last name: _____ First name: _____
Date of birth: ____ / ____ / ____ Prime number: _____

Section 2: Agency Information

Current agency name and Medicaid number: _____
New agency name and Medicaid number (if applicable): _____

Section 3: Changes in child placement

Effective date: ____ / ____ / ____

- Host Home in-residence address change
- In-residence caregiver change within the same agency
- Move from one Host Home agency to another Host Home
- agency Temporary absence beyond thirty (30) consecutive days

Reason for absence: _____

Start date: ____ / ____ / ____ End date: ____ / ____ / ____

- Termination of any ODDS Host Home services and reason
 - Adult; moved to an adult foster home or residential setting
 - Moved to a children's residential setting
 - Moved in with parents, relatives or friends
 - Other (please describe below): _____

Section 4: Address change

Current agency name: _____

Street address: _____

City: _____ ZIP: _____ County: _____

New agency name: _____

Street address: _____

City: _____ ZIP: _____ County: _____

Current Host Home street address: _____

City: _____ ZIP: _____ County: _____

New Host Home street address: _____

City: _____ ZIP: _____ County: _____

Section 5: Additional information

Add any information that may assist the state with processing (*below*):

Section 6: Community Developmental Disabilities Program (CDDP) information

Name of services coordinator: _____
Email: _____
Phone: _____

Section 7: Form submission

Must be electronically submit via a secure **email both**:

- **The Host Home email box:** Host.Homes@dhsoha.state.or.us
- **Central Coordination Unit (CCU) box:** 5517.inbox@dhsoha.state.or.us

List the following in the subject line: **DD Host Home change**

If you do not have secure email, please request one by sending an email to [Host Homes email](#) and entering the following in the subject line: **Request for secure email**

 **Don't forget:** Before submitting the form:

- Enter the date at the top of page 1.
- Review the form for accuracy and completeness to ensure timely processing.

ODDS Host Home update reporting form guide

Purpose: To notify Host Homes, Federal Resource/SSI Unit, and Aging and People with Disabilities (APD) Central Coordination Unit of certain types of changes to existing Host Home placements.

Reporting deadline: Report this change as soon as possible; delays in reporting may affect CCO enrollment.

Notifications are required to ensure timely processing of Host Home updates that include the following:

1. Enrollment in coordinated care organizations (CCOs) for child's medical coverage.
2. Issuance or termination of room and board payments.
3. Reporting changes to the Social Security Administration to comply with federal representative payee regulations.

- Report this type of change when a youth exits one Host Home agency and moves into another Host Home agency.

Effective date: Date when the change takes place.

Temporary absence beyond 30 consecutive days

- Report this type of change only under the following circumstances:
 - A child has been absent from the Host Home for more than thirty (30) consecutive days regardless of the reason for the absence; and
 - The intent is for the child to return to the Host Home.
- The start date is the first evening the child was absent from the Host Home overnight.
- The end date is the last evening the child was absent from the Host Home overnight.
- Reporting deadline: Must be reported within five business days after the child returns to the Host Home. If the child exits host home services, rather than returning to host home, the change must be reported as a termination rather than a temporary absence.

Termination of Host Home services

- Report when a child exits from Host Home services.
- Effective date of termination: Last evening child was in the Host Home overnight.
- The forwarding address must be the physical address where the child resides upon exiting Host Home services.
- Reporting deadline: Must be reported when ending the plan of care for Host Homes in the Express Payment and Reporting System (eXPRS).

Questions?

Contact the Host Home Coordinator at 971-283-0981 or Host.Homes@dhsosha.state.or.us.