ABUNDANCE ASSISTED LIVING LLC

Sunrise House – 6248 Sunrise Terrace N, Brooklyn Park, MN 55428 | HFID 41269 | (763) 290-6075
Sailor Lane – 5400 Sailor Ln, Brooklyn Center, MN 55429 | HFID 42971 | (763) 390-5783
Fax: (763) 260-9940 | Email: abundancehomemn@gmail.com | www.abundanceassistedliving.com

Abundant Care. Meaningful Living.

CASE MANAGER REFERRAL PACKET

Everything you need to refer a client – the referral form is on page 2 (fillable)

WHO WE SERVE

- Older adults who need help with daily care
- Adults with physical or developmental disabilities
- Adults with mental health conditions (schizophrenia, bipolar disorder, depression and more)
- Complex medical, psychiatric and behavioral needs reviewed case by case

FUNDING ACCEPTED

- CADI waiver
- DD waiver
- BI waiver
- MA Room & Board
- Private pay
- MHCP Provider ID: A837492400

WHAT WE PROVIDE

- Small homes – only 5 residents per house
- Staff on-site 24/7, including awake overnight staff
- RN oversight – Crystal Stuewe, RN; RN pre-admission assessment
- Medication management with our pharmacy partner
- Three home-cooked meals a day; special diets followed
- Coordination with primary care, psychiatry, specialists and county case managers
- Activities, outings and help getting to appointments
- Regular updates to case managers and families

DOCUMENTS WE NEED WITH THE REFERRAL

- ☐ Current CSSP / 6790 service plan
- ☐ Diagnosis list / diagnostic summary
- ☐ Behavioral support plan (if applicable)
- ☐ PCA or nursing assessment (MnCHOICES)
- ☐ Current medication list (MAR or physician orders)
- ☐ Insurance / waiver authorization

HOW TO REFER – 4 STEPS

1	**Call or email**	Call (763) 222-6062 or email us with the client's needs. We tell you right away if we may be a fit.
2	**Send the referral**	Complete the form on page 2 and fax or email it back with the documents listed above.
3	**RN assessment**	Our RN completes a pre-admission nursing assessment and coordinates with you and the care team.
4	**Placement**	We confirm placement, coordinate move-in, build the service plan and follow up with you at 30 days.

CONTACT US – WE RESPOND WITHIN 24 HOURS, OFTEN THE SAME DAY

Gregory Slah, Assisted Living Director
Email: abundancehomemn@gmail.com
Sunrise House (Brooklyn Park): (763) 290-6075
Website: www.abundanceassistedliving.com

Direct: (763) 222-6062
Fax: (763) 260-9940
Sailor Lane (Brooklyn Center): (763) 390-5783
Tours: free, no obligation – call to schedule

Fax completed referrals to (763) 260-9940 or email them to abundancehomemn@gmail.com.

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CLIENT REFERRAL FORM

Type directly into this form, save it, and send it with the referral documents

REFERRING CASE MANAGER

Referral date | **Agency / county** | **Case manager name**

Phone | **Email** | **Fax**

CLIENT INFORMATION

Client full name | **Date of birth** | **Gender** | **PMI / MA #**

Current living situation / address | **Desired move-in date**

Guardian / representative (name & relationship) | **Guardian phone**

FUNDING & PLACEMENT

Funding (check all that apply)

☐ CADI ☐ DD ☐ BI ☐ MA Room & Board ☐ Private pay ☐ Other

Waiver span / authorization dates | **If other funding, describe**

Preferred home

☐ Sunrise House – Brooklyn Park ☐ Sailor Lane – Brooklyn Center ☐ Either

CARE NEEDS

Primary diagnoses (medical and mental health)

Mobility

☐ Independent ☐ Cane / walker ☐ Wheelchair ☐ Needs transfer help ☐ Fall risk

Help needed with

☐ Bathing ☐ Dressing ☐ Toileting ☐ Eating ☐ Medications ☐ Diabetes / insulin ☐ Oxygen

Behaviors, safety concerns or recent hospitalizations

Documents attached

☐ CSSP / 6790 ☐ Nursing / PCA assessment ☐ Diagnosis list
☐ Medication list ☐ Behavior plan ☐ Waiver authorization

Additional notes

Case manager signature (type name) | **Date**

Fax it back: (763) 260-9940 or Email it back: abundancehomemn@gmail.com • Questions: (763) 222-6062