IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – Governor
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DIVISION OF MEDICAID
Post Office Box 83720
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February 21, 2008

COPY

Linda Williams
Williams and Uralde, Inc.
6015 E Cleveland Blvd.
Caldwell, Idaho 83607

Dear Mrs. Williams,

Thank you for submitting your signed compliance review. This review found that your agency was deficient free. We have issued Williams and Uralde, Inc. a certificate effective February 20, 2008.

Thank you for your patience and accommodating us through the survey process.

Rebecca Fadness
Program Supervisor
DD Survey and Certification

PAGE 2/2 * RCVD AT 2/20/2008 1:25:47 PM [Mountain Standard Time] * SVR:DHWRIGHTFAX/2 * DNIS:1811 * CSID: * DURATION (mm-ss):00-34

IDAHO DEPARTMENT OF HEALTH & WELFARE

RESIDENTIAL HABILITATION AGENCY COMPLIANCE REVIEW

COPY

AGENCY NAME: WILLIAMS AND URALDE, INC

REVIEW DATE(s): 2-4-2008

NOTE: This document contains a listing of findings made by the survey team. The summary of survey findings is based on the survey team's professional knowledge and interpretation of IDAPA requirements. In the Column, "Agency's Plan for Compliance", the statement should reflect the agency's plan for compliance action and anticipated time for plan to be implemented.

REVIEW TEAM MEMBERS: Rebecca Fadness, Program Supervisor
Cyndy Jonsson, Clinician

SURVEY FINDINGS

Deficiencies:	Agency's Plan for Compliance:
No deficient practices found.	

Survey report completed by : Rebecca Fadness — Date: 2/19/2008

Agency Administrator Signature: Linda Williams — Date: 2/20/08

Plan of correction accepted: N/A — Date: _____

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