



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – Governor
RICHARD M. ARMSTRONG – Director

TAMARA PRISOCK—ADMINISTRATOR
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BUREAU OF FACILITY STANDARDS
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December 28, 2015

Joseph Frasure, Administrator
Aspen Transitional Rehabilitation
2867 East Copper Point Drive
Meridian, ID 83642-1716

Provider #: 135130

Dear Mr. Frasure:

On December 15, 2015, an on-site revisit of your facility was conducted to verify correction of deficiencies noted during the survey of August 13, 2015. Aspen Transitional Rehabilitation was found to be in substantial compliance with federal health care requirements regulations as of October 19, 2015.

Your copy of the Form CMS-2567B, Post-Certification Revisit Report listing the deficiencies that have been corrected is enclosed.

Thank you for the courtesies extended to us during our on-site revisit. If you have any questions, comments or concerns, please contact David Scott, R.N. or Nina Sanderson, L.S.W., Supervisors, Long Term Care at (208) 334-6626, option 2.

Sincerely,

A handwritten signature in cursive script, appearing to read "Nina Sanderson".

Nina Sanderson, LSW, Supervisor
Long Term Care

NS/lj

Enclosure