

COPY



IDAHO DEPARTMENT OF  
**HEALTH & WELFARE**

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

DEBRA RANSOM, R.N., R.H.I.T., Chief  
BUREAU OF FACILITY STANDARDS  
3232 Elder Street  
P.O. Box 83720  
Boise, ID 83720-0009  
PHONE 208-334-6626  
FAX 208-364-1888

January 24, 2013

Rod Jacobson, Administrator  
Bear Lake Dialysis Center  
164 South 5th Street  
Montpelier, ID 83254

RE: Bear Lake Dialysis Center, Provider #132304

Dear Mr. Jacobson:

On January 23, 2013, a follow-up visit of your facility, Bear Lake Dialysis Center, was conducted to verify corrections of deficiencies noted during the survey of December 14, 2012.

We were able to determine that the Condition for Coverage of **Water & Dialysate Quality (42 CFR 494.40)** is now met.

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

Thank you for the courtesies extended to the surveyors during their visit. If we can be of any help to you, please call us at (208) 334-6626.

Sincerely,

A handwritten signature in black ink that reads "Trish O'Hara". The signature is written in a cursive, slightly slanted style.

TRISH O'HARA  
Health Facility Surveyor  
Non-Long Term Care

A handwritten signature in black ink that reads "Nicole Wisenor". The signature is written in a cursive, slightly slanted style.

NICOLE WISENOR  
Co-Supervisor  
Non-Long Term Care

TO/nw  
Enclosures  
ec: Kate Mitchell, CMS Region X Office