IDAHO DEPARTMENT OF HEALTH & WELFARE

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

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DIVISION OF MEDICAID
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April 22, 2011

Frede Trenkle-MacAllister, Administrator
Progressive Behavior Systems
1092 Eastland Drive N., Suite C
Twin Falls, Idaho 83301

Dear Ms. Trenkle-MacAllister:

The Department reviewed the Res Hab services offered by your agency on April 11, 2011 through April 14, 2011. The purpose of the review was to assure that your agency provides quality services in compliance with IDAPA 16.04.17 rules governing Res Hab and all other applicable rules. Based on observation of services and documentation presented during the review, no deficient practices were identified.

Thank you for accommodating the survey team during the review process. Please contact me via e-mail: lovelanp@dhw.idaho.gov or call me at 208-239-6267 if you have any questions.

Sincerely,

Pam Loveland-Schmidt

Pam Loveland-Schmidt, Adult & Child DS
Medical Program Specialist
Medicaid Survey and Certification
lovelanp@dhw.idaho.gov

Statement of Deficiencies

Residential Habilitation Agency

Progressive Behavior Systems -- Rupert
RHA-1108

512 6th St
Rupert, ID 83350-1621
(208) 436-4911

Survey Type: Recertification

Entrance Date: 4/11/2011

Exit Date: 4/13/2011

Initial Comments: Surveyors Present: Pam Loveland-Schmidt,Medical Program Specialist, Survey & Certification; and Eric Brown, Supervisor, Survey & Certification

Rule Reference/Text	Category/Findings	Plan of Correction (POC)
<No Deficiencies>	<Substantial Compliance>	

Scope and Severity: /	Date to be Corrected:	Administrator Initials:

Administrator Signature (confirms submission of POC):	Date:
Team Leader Signature (signifies acceptance of POC):	Date: