



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

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June 18, 2014

James H. Hayes, Administrator
River Ridge Center
640 Filer Avenue West
Twin Falls, ID 83301-4533

Provider #: 135106

Dear Mr. Hayes:

On June 17, 2014, an off-site follow-up was conducted with your facility to verify correction of deficiencies noted during the Recertification, Complaint Investigation and State Licensure survey of April 11, 2014. River Ridge Center was found to be in substantial compliance with health care requirements as of **May 16, 2014**.

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

Thank you for your assistance during the off-site follow-up process. If you have any questions, comments or concerns, please contact Lorene Kayser, L.S.W., Q.M.R.P. or David Scott, R.N., Supervisors, Long Term Care at (208) 334-6626.

Sincerely,

DAVID SCOTT, R.N., Supervisor
Long Term Care

DS/dmj
Enclosures