



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
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September 11, 2014

Lari Storro, Administrator
Liberty Dialysis Sandpoint
1210 Washington Ave
Sandpoint, ID 83864

RE: Liberty Dialysis Sandpoint, Provider #132522

Dear Ms. Storro:

On September 10, 2014, a follow-up visit of your facility, Liberty Dialysis Sandpoint, was conducted to verify corrections of deficiencies noted during the survey of August 1, 2014.

We were able to determine that the Medicare ESRD Condition for Coverage of **CFC-Patient Plan of Care (42 CFR 494.90)** 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,

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

NICOLE WISENOR
Co-Supervisor
Non-Long Term Care

TO/pmt
Enclosures
cc:Kate Mitchell, CMS Region X Office