



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

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BUREAU OF FACILITY STANDARDS
3232 Elder Street
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December 13, 2013

Kerri Harpole, Administrator
Legacy Home Health
680 S Progress Avenue, Suite 2A
Meridian, ID 83642

RE: Legacy Home Health, Provider #137106

Dear Ms. Harpole:

On December 11, 2013, a follow-up visit of your facility, Legacy Home Health, was conducted to verify corrections of deficiencies noted during the survey of November 1, 2013.

We were able to determine that the **Condition of Participation of Acceptance Of Patients, POC, Med Super (42 CFR 484.18)** 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,

GARY GUILLES
Health Facility Surveyor
Non-Long Term Care

SYLVIA CRESWELL
Co-Supervisor
Non-Long Term Care

GG/pt
Enclosures
ec: Kate Mitchell, CMS Region X Office