



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

TAMARA PRISOCK—ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
DEBBY RANSOM, R.N., R.H.I.T. – Chief
BUREAU OF FACILITY STANDARDS
3232 Elder Street
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE: (208) 334-6626
FAX: (208) 364-1888
E-mail: fsb@dhw.idaho.gov

November 12, 2015

Michele Magnuson, Administrator
North Idaho Pain Center
1686 W Riverstone Drive, Suite 2
Coeur D'Alene, ID 83814-5779

RE: North Idaho Pain Center, Provider #13C0001058

Dear Ms. Magnuson:

On October 26, 2015, a follow-up visit of your facility, North Idaho Pain Center, was conducted to verify corrections of deficiencies noted during the survey of September 14, 2015.

We were able to determine that the Conditions of Participation of **Governing Body and Management (42 CFR 416.41)** and **Medical Records (42 CFR 416.47)** are 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, option 4.

Sincerely,

SUSAN COSTA
Health Facility Surveyor
Non-Long Term Care

NICOLE WISENOR
Co-Supervisor
Non-Long Term Care

SC/pmt

Enclosures

cc: Lynnette Osias, CMS Region X Office