

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

| | |
|-------|---------|
| TO | DATE |
| Mells | 4-27-07 |

| | |
|---|---|
| DIRECTOR'S USE ONLY | ACTION REQUESTED |
| 1. LOG NUMBER 000680 | <input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ |
| 2. DATE SIGNED BY DIRECTOR <i>cc: Singleton, Bowling</i> | <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ |
| | <input type="checkbox"/> FOIA DATE DUE _____ |
| | <input checked="" type="checkbox"/> Necessary Action |

| APPROVALS (Only when prepared for director's signature) | APPROVE | * DISAPPROVE (Note reason for disapproval and return to preparer.) | COMMENT |
|--|---------|---|---------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |

Department of Health & Human Services
Centers for Medicare & Medicaid Services
61 Forsyth St., Suite 4T20
Atlanta, Georgia 30303-8909



April 25, 2007

Easley Living Center
200 Anne Drive
Easley, SC 29640

Lois Wells
"Yla. Astori"
cc: Sung Ektor
Bowling

RECEIVED

APR 25 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Ref.: SNF CMS Certification Number (CCN): 42-5018

Dear Administrator:

This is to inform you that as a result of the Centers for Medicare and Medicaid Services Ruling (CMS-R-92-1) and Section 1819 and 1919 of the Social Security Act (the Act), agreements for Skilled Nursing Facilities and Nursing Facilities will no longer be time limited. Therefore, your facility's provider agreement will not automatically expire. The ruling affirms CMS's intention to assure consistency between the nursing home reform provisions of Section 1819 and 1919 of the Act and other program regulations.

Your facility must comply with the Requirements for Participation as specified in Sections 1819(b), (c), and (d) and/or 1919(b), (c), and (d) of the Act. An onsite survey by the State Agency is still required and will be conducted periodically to verify compliance.

Waiver/Variance approved (F458)
Room size-rooms 3, 10, and 12.

Waivers are not open-ended. The State Survey Agency will evaluate the justification for continuing these waivers or variances during each annual survey.

If you have any questions, please contact Hayri Ozdener at (404) 562-7541.

Sincerely,

/s/

Sandra M. Pace
Associate Regional Administrator
Division of Survey and Certification