POST-CERTIFICATION REVISIT REPORT

PROVIDER / SUPPLIER / CLIA /	MULTIPLE CONSTRUCTION		DATE OF REVISIT	Т						
IDENTIFICATION NUMBER	A. Building									
345312 _{Y1}	B. Wing	Y2	1/27/2023	Y3						
NAME OF FACILITY		STREET ADDRESS, CITY, STATE, ZIP CODE								
THE GREENS AT HENDERSONVILLE		1870 PISGAH DRIVE								
		HENDERSONVILLE, NC 28791								

This report is completed by a qualified State surveyor for the Medicare, Medicaid and/or Clinical Laboratory Improvement Amendments program, to show those deficiencies previously reported on the CMS-2567, Statement of Deficiencies and Plan of Correction, that have been corrected and the date such corrective action was accomplished. Each deficiency should be fully identified using either the regulation or LSC provision number and the identification prefix code previously shown on the CMS-2567 (prefix codes shown to the left of each requirement on the survey report form).

ITEM DATE		ITEM		DATE	ITEM		DATE	
Y4		Y5	Y4		Y5	Y4		Y5
ID Prefix Reg. # LSC	F0600 483.12(a)(1)	Correction Completed 01/27/2023	_	33.25	Correction Completed 01/27/2023	ID Prefix Reg. # LSC	F0686 483.25(b)(1)(i)(ii)	Correction Completed 01/27/2023
ID Prefix Reg. # LSC	F0885 483.80(g)(3)(i)-(ii	Correction i) Completed 01/27/2023	_	50886 83.80 (h)(1)-(6)	Correction Completed 01/27/2023	ID Prefix Reg. # LSC	F0887 483.80(d)(3)(i)-(vii)	Correction Completed 01/27/2023
ID Prefix Reg. # LSC		Correction	ID Prefix Reg. # LSC		Correction Completed	ID Prefix Reg. # LSC		Correction Completed
ID Prefix Reg. # LSC		Correction Completed	ID Prefix Reg. # LSC		Correction Completed	ID Prefix Reg. # LSC		Correction Completed
ID Prefix Reg. # LSC		Correction	ID Prefix Reg. # LSC		Correction	ID Prefix Reg. # LSC		Correction Completed
REVIEWE STATE AG REVIEWE CMS RO	SENCY	REVIEWED BY (INITIALS) REVIEWED BY (INITIALS)	DATE	SIGNATURE O	F SURVEYOR		DATE	
FOLLOWUP TO SURVEY COMPLETED ON 11/21/2022			CHECK FOR ANY UNCORRECTED DEFICIENCIES. WAS A SUMMARY OF UNCORRECTED DEFICIENCIES (CMS-2567) SENT TO THE FACILITY?				s 🗆 no	