

LIFE CARE AT HOME OF UTAH  
5097 SOUTH 900 EAST  
MURRAY UT 84107  
STATE'S REGION CODE: 001

PROVIDER #: 467115  
PHONE NUMBER: (801) 288-0200  
PARTICIPATION DATE: 08/21/1997

TYPE ACTION: RECERTIFICATION  
TYPE FACILITY: OFFICIAL HEALTH  
TYPE OWNERSHIP: PROPRIETARY

COMPLIANCE STATUS: FACILITY MEETS REQUIREMENTS

CURRENT SURVEY REVISIT DATES -

PRIOR 3 SURVEY	PRIOR 2 SURVEY	PRIOR 1 SURVEY	CURRENT SURVEY	PLAN/DATE OF CORRECTION	PROGRAM REQUIREMENTS
07/1999	07/2000	06/2001	02/20/2004		

\*\*\* NO DEFICIENCIES WERE FOUND \*\*\*

C=DATE OF CORRECTION N=NO DATE GIVEN P=PLAN OF CORRECTION R=REFUSED TO CORRECT W=WAIVED X=DEFICIENT  
\* = REGIONAL OFFICE FLAG (INCLUDES COPS) ELE = ELEMENT STD = STANDARD COP = CONDITION

RUN DATE OF REPORT: 11/09/2005

OSCAR REPORT 3  
HISTORY FACILITY PROFILE

LAST FILE UPDATE: 11/08/2005  
PAGE: 2

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TYPE OF DEFICIENCY	CURRENT SURVEY	PRIOR 1 SURVEY	PRIOR 2 SURVEY	PRIOR 3 SURVEY
CONDITION STANDARD	0	0	0	0
REGIONAL OFFICE FLAG (INCLUDES COPS)	0	0	0	0
HEALTH TOTAL	0	0	0	0

STATUS OF DEFICIENT COPS  
CURRENT SURVEY

COP	DEFICIENCY NOT CORRECTED	DEFICIENCY CORRECTED AFTER APPROVAL	REPEAT COP DEFICIENCY
	0	0	0

COMPLAINT SURVEY INFORMATION

SURVEY DATE	STATUS
10/20/2004	UNSUBSTANTIATED

FMS SURVEY INFORMATION

\* NO FMS SURVEYS FOR THIS FACILITY