Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	034525	08/07/2018
Name of Provider or Supplier	**Street Address, City, State**	
Saguaro Rehabilitation And Aquatic Therapy, Llc	305 North Plaza Drive, Apache Junction, AZ	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	**Summary Statement of Deficiencies** (Each deficiency should be preceded by full regulatory or LSC identifying information)
I0535	PLAN OF TREATMENT CFR(s): 485.58(b) For each patient, a physician must establish a plan of treatment before the facility initiates treatment. The plan of treatment must meet certain specified requirements. This STANDARD is not met as evidenced by: Based on a review of patients' medical records, and staff interviews, it was determined the CORF failed to require physicians review patient treatment plans every 60 days, for 10 of 10 patients on service for greater than 60 days (Patient #'s 1 thru 10). This deficient practice failed to ensure the comprehensive reassessment of the patient's condition/progress was evaluated and revised. Findings include: Review of 10 of 10 medical records for patients #1 thru 10 revealed physicians do not conduct 60 day treatment plan reviews. Facility administrator provided treatment plan reviews by the medical director on half slip papers dated for 2015. The Administrator and Physical Therapist (PT) confirmed during interviews conducted on 08/02/18, and telephonic interview 8/07/18, that the physicians perform 60-day treatment plan reviews.