



Department of Health and Human Services
Division of Public Health
Licensure Unit
301 Centennial Mall So, P O Box 94986
Lincoln, NE 68509-4986

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
CERTIFIES THAT

Saunders Medical Center
MEETS STATUTORY REQUIREMENTS AS
LONG TERM CARE HOSP/NF
Lic # LTCH035

Services

EXPIRES
12/31/2016

 
Chief Executive Officer
Department of Health and Human Services

Cut on heavy line and place on license.

FACILITY NAME: Saunders Medical Center
ADDRESS: 1760 COUNTY RD J, WAHOO, NE 68066

This is to verify that your LONG TERM CARE HOSP/NF is licensed through the date indicated on the above renewal card. Place the renewal card in the lower left hand corner of your original license.

Please notify this office at the address listed above of any change in name, address, or ownership.

Sent
12-28-15
ADD

LICENSURE UNIT



Department of Health and Human Services
Division of Public Health - Licensure Unit
P.O. Box 94986, Lincoln, NE 68509-4986

OCT 28 2015

Expiration Date
12/31/2015

Make payable to: DHHS
See license renewal letter for fees

RECEIVED

Hospital Licensure Renewal Application

- Hospital Type: Please Check
General Acute Hospital
Critical Access Hospital
Long-Term Care Hospital
Psychiatric or Mental Hospital
Rehabilitation Hospital

IDENTIFYING INFORMATION

- 1. NAME AND ADDRESS OF FACILITY: Saunders Medical Center, 1760 COUNTY RD J, WAHOO, NE 68066
2. PREFERRED MAILING ADDRESS (IF DIFFERENT FROM FACILITY ADDRESS) FOR THE RECEIPT OF OFFICIAL NOTICES FROM THE DEPARTMENT:
LICENSE NO: LTCH035
TELEPHONE NUMBER: (402) 443-4191
FAX NUMBER: (402) 443-1433
ADMINISTRATOR: TYLER TOLINE
3. FEDERAL EMPLOYER IDENTIFICATION NUMBER OF THE FACILITY:
4. BED CLASSIFICATION: (Specify Number) LTC
Acute ___ Other (Specify Type and Number)
5. DEEMED STATUS FOR LICENSURE: (Check if applicable) JCAHO ___ AOA ___ CARF ___ Medicare or Medicaid

OFFSITE LOCATIONS CURRENTLY LISTED IN OUR FILES (if any)

REC'D HHS ACCOUNTING
OCT 29 10:30

OWNERSHIP INFORMATION

- 6. OWNERSHIP OF FACILITY: SAUNDERS MEDICAL CENTER
(Mailing Address: 1760 COUNTY RD J, WAHOO, NE 68066)
7. BUSINESS ORGANIZATION: (Check one)
Sole Proprietorship
Partnership
Limited Partnership
Corporation
Limited Liability Company
Governmental (State, District, County, City or Municipal)
Other (Please Specify)
Profit ___ Non Profit X

CERTIFICATION

I/we have read the Rules and Regulations issued by the Nebraska Department of Health and Human Services and will comply with them should a license be issued. I/we certify that to the best of my/our knowledge, all information and statements on the application are true and correct and I/we hereby apply for a renewal license.

PLEASE NOTE: Neb.Rev.Stat. Section 71-433 requires: Applications shall be signed by

- (1) the owner, if the applicant is an individual or partnership,
(2) two of its members, if the applicant is a limited liability company,
(3) two of its officers, if the applicant is a corporation, or
(4) the head of the governmental unit having jurisdiction over the facility to be licensed, if the applicant is a governmental unit.

AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

SIGNATURE

DATE 10.20.15

AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

SIGNATURE

DATE

NEBRASKA STATE FIRE MARSHAL

OCCUPANCY PERMIT

Certificate Number: 402751

Name of Facility: **Saunders Medical Center LTC**

Type of Facility: **Nursing Home**

Location: **1760 County Road J, Wahoo**

Maximum
Occupancy: **60 Beds**

Date Issued: **11/19/2014**

Approved By:

Inspected By: **8725 Susen Lindner**
Deputy State Fire Marshal

[Redacted Signature]
State Fire Marshal



POST IN PROMINENT PLACE

Change in occupancy classification or failure to meet State Fire Marshal codes shall invalidate this occupancy permit.

**Saunders County Board of Supervisors
as of October, 2015**

Name	Address
Doris Karloff	P. O. Box 153 Yutan, NE 68066
Dave Lutton	1442 Silver Street Ashland, NE 68003
Scott Sukstorf	980 Co Rd W, Lot S108 Fremont, NE 68025
Larry Mach	2744 County Road N Weston, NE 68070
Craig Breunig	926 N Linden Wahoo, NE 68066
Leroy Hanson	PO Box 367 Ceresco, NE 68017
Ed Rastovski	1673 County Road J Wahoo, NE 68066

SMC Board Roster as of October, 2015

Name	Address	Title
Bromm, Curt	551 North Linden P. O. Box 277 Wahoo, NE 68066	Chairperson
Curtis, Dean	1403 Bill's Drive Ashland, NE 68003	Member
Hohl, Greg	164 East 5 th Street P. O. Box 188 Wahoo, NE 68066	Treasurer
Klein, Theresa	1531 County Road 21 Wahoo, NE 68066	Member
Robertson, George	P. O. Box 95 Mead, NE 68041-0095	Member
Rogers, Marsha	621 S 4 th Street P. O. Box 492 Ceresco, NE 68017	Vice Chairperson
Thomas, Susan	20 Thomas Lakes Ashland, NE 68003	Secretary

**Management Organization
Bryan Health
1600 S. 48th Street
Lincoln, NE
Managing Staff as of October, 2015**

Name

Carol Friesen, VP Rural Health Systems

Tyler Toline, Interim CEO

Julie Rezac, Chief Operations Officer/Interim LTC
DON

Chase Manstedt, CFO

**Saunders Medical Center – Hospital
Room Numbers and Beds Per Room**

Rm #501	1 bed
Rm #502	1 bed
Rm #503	1 bed
Rm #504	1 bed
Rm #505	1 bed
Rm #506	1 bed
Rm #507	1 bed
Rm #508	1 bed
Rm #509	1 bed
Rm #510	1 bed
Rm #511	1 bed
Rm #512	1 bed
Rm #515	1 bed
Rm #516	1 bed
Rm #517	1 bed
Rm #518	1 bed

**Saunders Medical Center – Long Term Care
Room Numbers and Beds Per Room**

Rm #101	1 bed
Rm #102	1 bed
Rm #103	1 bed
Rm #104	1 bed
Rm #105	1 bed
Rm #106	1 bed
Rm #107	1 bed
Rm #108	1 bed
Rm #110	1 bed
Rm #112	2 beds
Rm #114	2 beds
Rm #116	1 bed
Rm #118	1 bed
Rm #119	1 bed
Rm #120	1 bed
Rm #121	1 bed
Rm #122	1 bed
Rm #123	1 bed
Rm #124	1 bed
Rm #125	1 bed
Rm #126	1 bed

Rm #201	1 bed
Rm #202	1 bed
Rm #203	1 bed
Rm #204	1 bed
Rm #205	1 bed
Rm #206	1 bed
Rm #207	1 bed
Rm #208	1 bed
Rm #210	1 bed
Rm #212	2 beds
Rm #214	2 beds
Rm #216	1 bed
Rm #218	1 bed
Rm #219	1 bed
Rm #220	1 bed
Rm #221	1 bed
Rm #222	1 bed
Rm #223	1 bed
Rm #224	1 bed
Rm #225	1 bed
Rm #226	1 bed

Rm #301	1 bed
Rm #302	1 bed
Rm #303	1 bed
Rm #304	1 bed
Rm #306	1 bed
Rm #308	1 bed
Rm #310	1 bed
Rm #312	1 bed
Rm #314	1 bed
Rm #316	1 bed
Rm #317	1 bed
Rm #318	1 bed
Rm #319	1 bed
Rm #320	1 bed



March 31, 2016

Tyler Toline, Administrator
Saunders Medical Center
1760 County Rd J
Wahoo, NE 68066-0185

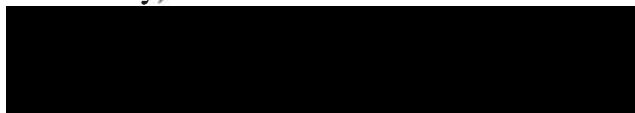
Dear Mr. Toline,

This correspondence is to provide you notification that your request to be deemed in compliance with state licensure regulations at 175 NAC 12 based on Medicare/Medicaid certification is approved. This approval is in accordance with 175 NAC 9-006.11.

For this approval to continue, Medicare/Medicaid certification must be maintained. If any sanctions, modifications, termination or withdrawal of the certification occurs, the long term care hospital may continue to operate unless the Department determines that licensure requirements are no longer met.

Should you have any questions, please feel free to contact me.

Sincerely,



Diana Meyer, RN, BSN, Program Manager
Office of Acute Care Facilities
DHHS Public Health - Licensure Unit
P O Box 94986, Lincoln, NE 68509-4986
(402) 471-3484 FAX (402) 742-8319
Email: Diana.Meyer@nebraska.gov

DM/lc