

Medical Update for Jean Reese DOB: 08/25/1950

Date Order Created: 06/22/2026

Order ID: 1150/19861

Agency Assigned Id: 25020

Certification Period: 06/16/2026 to 08/14/2026

*HomeCentris Healthcare LLC MD217058
10 Crossroads Drive, Suite 102
Owings Mills, MD 21117-8284
PHONE 410-321-8448 FAX*

Orders:

Patient was recerted for continuing therapy (OT/PT) to meet set goals. HHA is needed to help with ADLs.

*Asima Rahman
1447 York Rd*

*1447 York Rd, MD 21093
Tele:4103913700 FAX: 14103914355*

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by Messick, Charles Date 06/23/2026