

Medical Update for Josephine Kemp DOB: 01/03/1940

Date Order Created: 09/02/2026

Order ID: 1195/1162

Agency Assigned Id: 815

Certification Period: 07/15/2026 to 09/12/2026

*Evergreen Home Health 239350
403 W Main Street Suite A1
Gaylord, MI 49735-1887
PHONE 989-214-1114 FAX*

Orders:

Authorization changes of OT skill Total Visits: 5 and Visit Freq: WK2: 1 (07/19/26-07/25/26),WK3: 1 (07/26/26-08/01/26),WK5: 1 (08/09/26-08/15/26),WK6: 1 (08/16/26-08/22/26),WK9: 1 (09/06/26-09/12/26)

*CHANGXIN LI
829 N CENTER AVE SUITE 140*

*829 N CENTER AVE SUITE 140, MI 49735-1595
Tele:(989) 731-7870 FAX: 19897317837*

Physician Signature_____ Date _____

Staff Signature: Electronically Signed by CHURCHES, CHRISTOPHER Date 09/02/2026