Agency for Health Care Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	AL11911234	A. BUILDING: _____ B. WING _____	02/26/2020

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BETHESDA ON TURKEY CREEK	2800 FORDHAM ROAD, NE PALM BAY, FL 32905

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments A Complaint investigation (2020001652) was conducted at Bethesda On Turkey Creek Assisted Living Facility on . The facility had a deficiency at the time of the survey.	A 000		
A 168 SS=B	429.24(3)(a) FS; 429.27(7), FS Resident Refund Policy 429.24 (3)(a) . . . The refund policy shall provide that the resident or responsible party is entitled to a prorated refund based on the daily rate for any unused portion of payment beyond the termination date after all charges, including the cost of damages to the residential unit resulting from circumstances other than normal use, have been paid to the licensee. For the purpose of this paragraph, the termination date shall be the date the unit is vacated by the resident and cleared of all personal belongings. If the amount of belongings does not preclude renting the unit, the facility may clear the unit and charge the resident or his or her estate for moving and storing the items at a rate equal to the actual cost to the facility, not to exceed 20 percent of the regular rate for the unit, provided that 14 days' advance written notification is given. If the resident's possessions are not claimed within 45 days after notification, the facility may dispose of them. The contract shall also specify any other conditions under which claims will be made against the refund due the resident. Except in the case of or a discharge due to medical reasons, the refunds shall be computed in accordance with the notice of relocation requirements specified in the contract. However, a resident may not be required to provide the licensee with more than 30 days' notice of termination. If after a contract is terminated, the facility intends to make a claim	A 168		

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A 168	Continued From page 1 against a refund due the resident, the facility shall notify the resident or responsible party in writing of the claim and shall provide said party with a reasonable time period of no less than 14 calendar days to respond. The facility shall provide a refund to the resident or responsible party within 45 days after the transfer, discharge, or of the resident. The agency shall impose a fine upon a facility that fails to comply with the refund provisions of the paragraph, which fine shall be equal to three times the amount due to the resident. One-half of the fine shall be remitted to the resident or his or her estate, and the other half to the Health Care Trust Fund to be used for the purpose specified in s. 429.18. 429.27, FS Property and personal affairs of residents. - (7) In the event of the of a resident, a licensee shall return all refunds, funds, and property held in trust to the resident's personal representative, if one has been appointed at the time the facility disburses such funds, and, if not, to the resident's spouse or adult next of kin named in a beneficiary designation form provided by the facility to the resident. If the resident has no spouse or adult next of kin or such person cannot be located, funds due the resident shall be placed in an interest-bearing account, and all property held in trust by the facility shall be safeguarded until such time as the funds and property are disbursed pursuant to the Florida Probate Code. Such funds shall be kept separate from the funds and property of the facility and other residents of the facility. If the funds of the resident are not disbursed pursuant to the Florida Probate Code within 2 years after the resident's , the funds shall be deposited in the Health Care Trust Fund administered by the	A 168		

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A 168	Continued From page 2 agency. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to follow its refund policy to provide a refund to 1 of 3 sampled resident's (#2) within 45 days after discharge. Findings: Review of the admission and discharge log revealed resident #2 was discharged on . . . . . and also listed the reason why and the facility the resident was admitted to. Record review revealed that she was given a 45-day discharge notice on because the facility would not be renewing their Limited Nursing Service License and the resident required those services. Review of the contract signed by the resident and the facility on revealed it noted under their refund policy: "Reimbursement shall occur within 45 days of a written notice of termination. Except in the case of or discharge due to a medical reason, including mental health, the refund shall be computed in accordance with the relocation requirements specified in the agreement." Review of an email sent to the facility by their resident care coordinator on revealed she informed the facility, she had spoken with resident #2's case manager who informed her that the resident was going to be leaving on and she provided the name of the nursing and rehabilitation center that she was being admitted to.	A 168		

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A 168	Continued From page 3 Review of a resident move-out form that was dated . . . . . that noted the refund amount due and also noted the location the check was to be sent to. The name of another nursing and rehabilitation center was listed, not the name of the one provided. Review of the refund check receipt revealed it was dated for the move out date, the mailing date was . . . . . which was more than 45 days from the move out date. Review of an email sent to the facility on . . . . . from resident #2 revealed she inquired about the refund and to notify them where she was located and to notify them that the check was mailed to another facility and that they were over the 45-day refund window. On . . . . . the facility notified the resident that a new check was being issued and mailed to the appropriate address. On . . . . . the resident notified the facility that she had received her check. On at 2 PM, the business office manager confirmed the findings. She said once the facility completed the move out form it was sent to another location for approval and that process took some time. She confirmed the check was sent to the wrong facility and she did not know why. Class	A 168		