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
	AL11912091	A. BUILDING: _____ B. WING _____	09/22/2021

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
TAMIAMI LAKES MONTBLANC ALF	2040 SOUTHWEST 127TH AVENUE MIAMI, FL 33175

(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 (complaint number 2021011870) was conducted at Tamiami Lakes Montblanc ALF, Corp on . A deficiency was identified at the time of the survey.	A 000		
A 168 SS=D	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. .... 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 agency. This Statute or Rule is not met as evidenced by: Based on record review and interview, the facility failed to provide the prorated refund based on the daily rate for any unused portion of payment for one out of five sampled residents (Resident #5). Findings included:	A 168		

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A 168	Continued From page 2 Review of Resident #5's record showed the resident had been admitted to the facility on [redacted] and discharged on [redacted]. A review of the facility's contract for Resident #5 showed the resident would pay a monthly rent of $794.00. Record review of the facility's refund policy revealed that refunds would be given 45 days following the date of transfer, discharge, or [redacted] of the resident. The policy also showed that the termination date shall be the date the unit is vacated by the resident and cleared of all personal belongings. Afterwards, the facility would provide a refund to the resident or responsible party by check within 45 days, provided that cancellation is executed accordingly to the terms of termination of residency. On [redacted] at 11:57 AM, during a telephone interview with Resident #5's mother she stated that Resident #5 was sent to the hospital at the end of [redacted] and per resident's decision she did not go [redacted] to the facility. But, by mistake the Social Security sent the checks for the months of [redacted], and [redacted], to the Owner. The mother further stated that when she contacted the Owner regarding the checks, she did not want to talk to her and had not refunded the money. On [redacted] at 12:22 PM, the Owner stated that Resident #5's belongings were removed from the facility on [redacted] and she would discount $158.80 for the 6 days the room was vacated. The Owner acknowledged that Resident #5's was entitled to a prorated refund in the amount of $1,429.20 and stated that she would reimburse the money to the resident.	A 168		

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A 168	Continued From page 3 Class III	A 168		