



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Brookdale Hunter's Crossing
4607 Nw 53rd Avenue
Gainesville, FL 32606

Dear Administrator:

This letter reports the findings of a desk review, as follow-up to complaint investigation (CCR#2015009582), conducted on , 2016 by representative(s) of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies and/or new deficiencies identified during the desk review.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2016.**

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/CB
Enclosure

BBT7



**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/09/2016
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965013	(X3) DATE SURVEY COMPLETED R
NAME OF PROVIDER OR SUPPLIER BROOKDALE HUNTER'S CROSSING	STREET ADDRESS, CITY, STATE, ZIP CODE 4607 NW 53RD AVENUE GAINESVILLE, FL 32606	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 Initial Comments

A desk review was conducted on _____, as a revisit for complaint investigation (CCR#2015009582) at Brookdale Hunter's Crossing. The facility is not in compliance. The previously cited deficiency is being recited as a result of the desk review.

0167 Resident Contracts

Based on record review and interview, the facility failed to ensure that a 30 day notice of rate increase is being provided to residents, and per the The Residency Agreement Peace of Mind Pricing notification to facility residents and family members, new Personal Service Rate is effective immediately after written notice is given.

Findings:

Review of the facility's _____, 2016 Update to Second Addendum to The Residency Agreement Peace of Mind Pricing, sent to residents and family members, showed effective 30 days from the date of the notice, and stated in part: "Rate Changes. We will provide a thirty (30) days written notice of any change in the rates for Basic Services, Personal Services, Select Services, Therapeutic Services, the Predictable Maximum related to Care Groups or monthly fees for services within each care group. We may offer or require a change in the Personal Service Plan when we determine additional services are requested or required. The new Personal Service Rate is effective immediately after written notice is given."

An interview was conducted on _____ at 4:26 PM with the Executive Director. When asked about the sentence in the Update to Second Addendum to The Residency Agreement Peace of Mind Pricing that "new Personal Service Rate is effective immediately after written notice is given," she stated that her corporate office does not agree that this statement in the updated residency agreement is not providing the residents with a 30 day notice of a rate increase.

Class III