



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
INTERIM SECRETARY

January 6, 2017

Administrator
Family Connect Life Inc
7969 Pinehurst Drive
Spring Hill, FL 34606

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on December 22, 2016 by representative(s) of this office.

The previously cited deficiencies were found corrected on the day of the revisit. **You will not receive a copy of this report in the mail; you will only receive this faxed report.**

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(s). Should you have any questions please call Chuck Bory at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/CB
Enclosure

DT9D



**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 01/06/2017
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967453	(X3) DATE SURVEY COMPLETED R 12/22/2016
NAME OF PROVIDER OR SUPPLIER FAMILY CONNECT LIFE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 7969 PINEHURST DRIVE SPRING HILL, FL 34606	

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

0000 - Initial Comments

A follow up complaint investigation (CCR 2016009074) was conducted at Family Connect Life, Inc. (facility license number 11521), on December 22, 2016. Family Connect Life, Inc. had no deficiencies in reference to this complaint investigation follow-up only.