

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 04/13/2018
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965295	(X3) DATE SURVEY COMPLETED R 03/27/2018
NAME OF PROVIDER OR SUPPLIER TLC HOME INC	STREET ADDRESS, CITY, STATE, ZIP CODE 8395 SW 112 STREET MIAMI, FL 33156	

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

0000 - Initial Comments

A Standard Biennial Revisit Survey 2nd revisit was conducted on 03/27/2018. TLC Home Inc., license #9762 had no deficiencies identified at the time of the survey.