

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/18/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967222	(X3) DATE SURVEY COMPLETED R 04/17/2018
NAME OF PROVIDER OR SUPPLIER MGR HOME, INC	STREET ADDRESS, CITY, STATE, ZIP CODE 5305 SW 137 CT MIAMI, FL 33175	

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 04/17/18. MGR Home, Inc (License #11295) had no deficiencies found at time of survey;