

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 10/09/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966213	(X3) DATE SURVEY COMPLETED R 09/13/2018
NAME OF PROVIDER OR SUPPLIER TL SEA HOME CARE SERVICES	STREET ADDRESS, CITY, STATE, ZIP CODE 14031 SW 39 ST MIAMI, FL 33175	

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

0000 - Initial Comments

A Follow Up Visit to a Standard Biennial Survey was conducted on 09/13/18. TL Sea Home Care Services (license #10455) with Limited Mental Health component did not have deficiencies identified at the time of the survey.