STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

06/13/2025

Acaring Adult Home II LLC
Acaring Adult Home II LLC
32634 49th Pl SW
Federal Way, WA 98023

RE: Acaring Adult Home II LLC # 756990

Dear Provider:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 61090 (Completion Date 06/13/2025) and 56970 (Completion Date 04/16/2025).

The Department completed a follow-up inspection of your Adult Family Home on 06/13/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10025 License annual fee.

(1) The adult family home must pay the license fee that is established in the state's operating budget, as described in RCW 70.128.060 .

(2) Each year, the home's annual license fee is due during the same month in which the home was initially licensed. For example, if the home was licensed in June, 2010, then the annual licensing fee will be due in June of each year.

(3) The home must ensure that the department receives the annual license fee when it is due.

The Department staff who did the On Site verification:
Jennifer Domingo, AFH Complaint Investigator

If you have any questions, please contact me at (253)234-6033.

Sincerely,

Cecile Leano, Field Manager
Region 2, Unit E
Residential Care Services

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You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for an unannounced on-site complaint investigation on 03/26/2025 of:

Acaring Adult Home II LLC
32634 49th Pl SW
Federal Way, WA 98023

This document references the following complaint number(s): 169125

The following sample was selected for review during the unannounced on-site visit: 1 of 1 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Jennifer Domingo, AFH Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit E
20425 72nd Avenue S, Suite 400
Kent, WA 98032

As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Residential Care Services | Date

I understand that to maintain an Adult Family Home license, I must be in compliance with all the licensing laws and regulations at all times.

Provider (or Representative) | Date

WAC 388-76-10025 License annual fee.

(1) The adult family home must pay the license fee that is established in the state's operating budget, as described in RCW 70.128.060 .

(2) Each year, the home's annual license fee is due during the same month in which the home was initially licensed. For example, if the home was licensed in June, 2010, then the annual licensing fee will be due in June of each year.

(3) The home must ensure that the department receives the annual license fee when it is due.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to pay the annual licensing fee when it was due on 01/15/2025. This failure placed residents at risk of possible unmet care needs due to unknown financial status of the AFH and living in an AFH with unpaid license fee.

Findings included…

Review of the Department's record on 03/25/2025, showed the AFH did not pay their annual licensing fee of $1125, which was due on 01/15/2025 and remained unpaid when the Department Staff (DS) arrived at the AFH on 03/26/2025 at 8:47 AM. Department records showed that the AFH was licensed on 01/31/2024 with capacity of five.

Observation on 03/26/2025 at 8:50 AM showed Staff C, Caregiver, provided care for one resident.

In an interview on 03/26/2025 at 8:54 AM, Staff A, Provider, stated that they did not receive an AFH renewal invoice from the Department.

In a telephone interview on 03/26/2025 at 3:09 PM, Staff B, Entity Representative, stated that they were waiting for the Department's confirmation of their license capacity request to decrease from six to five. Staff B stated that they did not receive an invoice from the Department to determine how much they had to pay because of this request.

An email correspondence from the Department Staff from the Department of Social and Health Services (a state agency that provides health care services, assistance programs, and public health interventions) business department on 04/16/2025 at 1:46 PM, showed that the AFH invoice was mailed to the AFH Provider on 11/15/2024. DS's email correspondence showed an AFH renewal invoice dated 11/15/2024 was sent to the address of this AFH. The invoice showed a balance of $1,125.00, and the payment was due on 01/15/2025. The Invoice further indicated, "Effective July 1, 2013, all AFH are required to pay an annual fee of $225 times the number of licensed beds in your AFH. This notice is to inform you that the annual fee for AFH licensure is due. “If you do not pay the balance due by the above due date, enforcement action will be taken against your AFH."

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, Acaring Adult Home II LLC is or will be in compliance with this law and / or regulation on (Date)_____ .

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

_____ _____

Provider (or Representative) Date