



**Division of Medical Services
Office of Long Term Care**

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<https://www.medicaid.state.ar.us/InternetSolution/General/units/oltc/index.aspx>



CERTIFIED MAIL #7005 1820 0002 2039 3057

May 17, 2010

Dr. Charles Green, Administrator
Alexander Human Development Center
14701 Highway 111 South
Alexander, AR 72002

Dear Dr. Green:

On February 19, 2010, the Office of Long-Term Care (“OLTC”) conducted a Recertification and Complaint survey to determine if the Alexander Human Development Center (“Center”) was in compliance with Federal requirements for Intermediate Care Facilities for the Mentally Retarded participating in the Medicaid program. This survey found that the Center was not in substantial compliance with the participation requirements. Please refer to our March 9, 2010, letter.

On March 31, 2010, OLTC conducted a revisit to verify that the Center had achieved and maintained compliance with the Conditions of Participation. The revisit survey verified that the Center was in compliance with Conditions of Participation for Governing Body and Management and Client Protection. However, the remaining deficiencies for the Recertification and Complaint Survey dated February 19, 2010, required an additional revisit. The Life Safety Code Survey dated February 1, 2010, also required a revisit. OLTC recertified the Center via a conditional agreement subject to an automatic cancellation clause.

42 C.F.R. §§ 442.105 and 442.111 provide for the automatic cancellation of conditional agreements within sixty (60) days after the latest projected date (excluding correction dates for construction/renovation) on a plan of correction. The latest projected date of compliance on the Center’s plan of correction was March 24, 2010. Please refer to our April 2, 2010, letter.

On May 12, 2010, OLTC conducted a complaint survey to determine if the Center was in compliance with Federal requirements for Intermediate Care/Mental Retardation facilities participating in the Medicaid program. The Center failed to meet the Conditions of Participation for Governing Body and Management and Client Protection. Specifically, the Center was not in compliance with the following requirements:

42 C.F.R. § 483.410	Governing Body and Management
42C.F.R. § 483.420	Client Protections
42C.F.R. § 483.420(a)(5)	Protection of Clients
42C.F.R. § 483.420(d)(1)(i)	Staff Treatment of Clients
42C.F.R. § 483.420(d)(2)	Staff Treatment of Clients

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42C.F.R. § 483.420(d)(3) Staff Treatment of Clients

The CMS-2567L survey report is enclosed for your reference. **Due to the Center's failure to complete corrections and maintain compliance with Conditions of Participation, OLTC must direct your attention to the automatic cancellation clause. The Center's agreement is therefore cancelled effective May 23, 2010. The Division of Medical Services will issue a final, formal notice of cancellation of the Center's Medicaid certification under separate cover. Accordingly, OLTC is not requesting a Plan of Correction.**

Informal Dispute Resolution

In accordance with 42 C.F.R. § 488.331, the Center has one opportunity to question deficiencies through an informal dispute resolution ("IDR") process. To obtain an IDR, the Center must send a written request to Health Facility Services, Arkansas Department of Health within ten (10) calendar days from receipt of the Statement of Deficiencies. The request must state the specific deficiencies the Center wishes to challenge. The request should also state whether the Center wants the IDR to be performed by a telephone conference call, record review, or a face-to-face meeting.

An informal dispute resolution procedure request will not delay the effective date of any enforcement action. Informal dispute resolution in no way is to be construed as a formal evidentiary hearing. It is an informal administrative process to discuss the findings.

Please submit your request via fax to:

Connie Melton, Section Chief
Health Facility Services
Arkansas Department of Health
5800 West 10th Street, Suite 400
Little Rock, AR 72204
(501) 661-2201
Fax (501) 661-2165

All references to regulatory requirements contained in this letter are found in Title 42, Code of Federal Regulations.

If you have any questions, please contact Sandra Broughton, Reviewer (501) 682-8430.

Sincerely,

Judy Johnston, Nursing Manager
Office of Long Term Care
Survey & Certification Section

cc: Ombudsman
DDS
DRC
file