

Department of Health & Human Services
Centers for Medicare & Medicaid Services

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Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 056185	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/29/2026
NAME OF PROVIDER OR SUPPLIER Menifee Lakes Post Acute		STREET ADDRESS, CITY, STATE, ZIP CODE 27600 Encanto Drive Sun City, CA 92586	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0573 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Let each resident or the resident's legal representative access or purchase copies of all the resident's records. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the facility failed to provide a resident representative with a copy of the resident's medical records within the required timeframe following a written request for one of three residents reviewed for resident's rights (Resident 1). This failure had the potential to cause unnecessary delay, frustrations, and anxiety for the resident's representative in obtaining the resident's medical information. Findings: On June 9, 2026, an unannounced visit was conducted at the facility to investigate a resident rights issue. A review of Resident 1's admission Record, indicated, Resident 1 was admitted to the facility on [DATE], and was discharged from the facility on April 5, 2026. A review of the facility correspondence related to the medical records request indicated the resident's representative submitted a written request for Resident 1's medical records on May 6, 2026. A review further indicated an invoice was prepared on May 7, 2026, but was not emailed until May 12, 2026. Documentation indicated the requested medical records were transmitted to the resident's representative on May 26, 2026. On June 11, 2026, at 10:52 a.m., an interview was conducted with the Medical Records Assistant (MRA). The MRA stated that she received the request on May 6, 2026, requesting a copy of Resident 1's medical records be released to Resident 1's representative. On June 11, 2026, at 2:20 p.m., an interview was conducted with the Administrator. The Administrator stated requests for medical records are forwarded to the Medical Records Department for processing. The Administrator stated that once payment is received, the requested records are sent within two days. The Administrator stated regarding Resident 1's representative request, he did not know exactly when the payment was received because there was no documentation reflecting the date it arrived at the facility. On June 11, 2026, at 3:35 p.m., a concurrent interview and record review was conducted with the MRA. The MRA stated she informed the resident representative on May 6, 2026, that payment was required, and an invoice was prepared on May 7, 2026. The MRA stated she had many responsibilities and did not email the invoice until May 12, 2026. The MRD stated she was not aware that requests for medical records were time-sensitive, and she did not know that the invoice needed to be sent immediately. The MRA further stated she had not received direction regarding medical records release process. The MRA stated she was informed on May 25, 2026, that payment had arrived and emailed the requested records on May 26, 2026. On June 11, 2026, at 3:56 p.m., during an interview with the Medical Records Director (MRD), the MRD stated residents or resident representatives may request medical records. The MRD stated the requested records should generally be provided within two days. The MRD stated it was important to provide the requested records within the required timeframe because individuals need the records for review and timely access to medical records is a patient's rights. On June 11, 2026, at 4:40 p.m., during an interview with the Business Manager (BM), the BM stated she recalled opening the envelope containing the payment on May 26, 2026, after returning from the holiday weekend. The BM stated she could not determine when the payment had actually been delivered to the facility or placed on her desk because there was no documentation identifying the date the payment was received.		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER
REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE