



STATE OF MICHIGAN

GRETCHEN WHITMER  
GOVERNOR

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
ACTING DIRECTOR

September 7, 2023

Amitkumar Kalasariya  
Caring Professionals LLC  
73 Birchwood  
Troy, MI 48083

RE: License #: AS500408403  
Investigation #: 2023A0604023  
Caring Professionals AFC Home

Dear Mr. Kalasariya:

Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place  
3026 West Grand Blvd Ste 9-100  
Detroit, MI 48202  
(248) 285-1703

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
SPECIAL INVESTIGATION REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS500408403
<b>Investigation #:</b>	2023A0604023
<b>Complaint Receipt Date:</b>	06/13/2023
<b>Investigation Initiation Date:</b>	06/15/2023
<b>Report Due Date:</b>	07/13/2023
<b>Licensee Name:</b>	Caring Professionals LLC
<b>Licensee Address:</b>	40150 Sara Rose Clinton Twp, MI 48038
<b>Licensee Telephone #:</b>	(586) 224-9909
<b>Administrator:</b>	Amitkumar Kalasariya
<b>Licensee Designee:</b>	Amitkumar Kalasariya
<b>Name of Facility:</b>	Caring Professionals AFC Home
<b>Facility Address:</b>	40150 Sara Rose Clinton Twp, MI 48038
<b>Facility Telephone #:</b>	(586) 224-9909
<b>Original Issuance Date:</b>	01/26/2022
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	07/26/2022
<b>Expiration Date:</b>	07/25/2024
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Owner is fraudulently billing Medicare for physical therapy services that are not being provided.	No
Residents are not receiving their medications. They are being taken by staff.	No
Additional Findings	Yes

## III. METHODOLOGY

06/13/2023	Special Investigation Intake 2023A0604023
06/15/2023	Special Investigation Initiated - Telephone TC to Complainant
06/15/2023	Inspection Completed On-site Completed unannounced onsite investigation. Interviewed Licensee Designee, Amitkumar Kalasariya, Staff, Jenna Bezdziecki and Resident A, Resident B and Resident C.
06/16/2023	APS Referral Adult Protective Services (APS) referral denied.
07/14/2023	Contact- Document Received Received copies of APS denial letters dated 06/16/2023 by email.
07/18/2023	Contact- Document Sent Special investigation status report letter emailed to Complainant.
07/28/2023	Contact- Document Sent Email to Amitkumar Kalasariya. Requested documents.
07/28/2023	Contact- Telephone call received Received text message from Amitkumar Kalasariya
07/31/2023	Contact- Document Received Email from Amitkumar Kalasariya. Sent return email.

08/02/2023	Contact- Document Received Emails from Amitkumar Kalasariya. Received copies of resident assessment plans, resident care agreements, and staff list. Sent return email.
08/04/2023	Contact- Document Received Received resident documents and resident list from Caring Professionals by email. Sent return email.
08/07/2023	Contact- Document Sent Email to and from Caring Professionals
08/08/2023	Contact- Document Sent Email to and from Caring Professionals. Received Resident E's assessment plan and resident care agreement.
08/08/2023	Exit Conference Completed exit conference with Licensee Designee, Amitkumar Kalasariya by phone.

**ALLEGATION:**

**Owner is fraudulently billing Medicare for physical therapy services that are not being provided.**

**INVESTIGATION:**

On 06/14/2023, I received a complaint regarding Caring Professionals AFC Home. It was alleged that residents are not receiving their medications, they are being taken by the staff. It was also alleged that there is therapy fraud. The owner is fraudulently billing Medicare for physical therapy services that aren't being provided.

On 06/15/2023, I interviewed the Complainant by phone. He stated that staff are skipping residents' medications and still signing for them. Residents have been in wet briefs for hours or double briefs. Resident B does not get out of bed. The owner, "Yogi", is charging residents for physical therapy that is not being provided. There is not a lift for residents and staff have hurt themselves.

On 06/15/2023, I completed an unannounced onsite investigation. I interviewed Staff, Jenna Bezdziecki, Licensee Designee, Amitkumar Kalasariya, Resident A, Resident B and Resident C. I observed that Resident D and Resident E were sleeping.

On 06/15/2023, I interviewed Staff, Jenna Bezdziecki. She stated that "Yogi" comes to the home for two to three hours a day and does physical therapy with the residents. She stated that none of the residents are left in wet briefs. She did not report any concerns regarding the home.

On 06/15/2023, I interviewed Resident A. She was in bed at the time of investigation. She stated that she has lived at the home for along time. Resident A stated that she is receiving all her medication. She stated that she does not participate in physical therapy. Resident A stated that she is always in her room and does not get out of bed. She had a wheelchair in her bedroom. Resident A stated that staff do change her briefs. She did not report any concerns. During the onsite investigation, Mr. Kalasariya and Ms. Bezdziecki stated that Resident A does get out of bed. On 06/15/2023, Mr. Kalasariya text a picture of Resident A sitting in a reclining chair in the living room.

On 06/15/2023, I interviewed Resident B. He stated that he has lived at the home since early October 2022. He stated that he wishes he was at home. Resident B stated that he is supposed to be getting out of bed more, however, he gets dizzy due to his hypertension, and it prevents him from doing so. He stated that it is not due to staff why he does not get out of bed more. Resident B stated that he was doing physical therapy, however, ran out of sessions. He stated that he is getting all his medications. Resident B stated that staff are assisting him as needed. He did not report any concerns regarding the home.

On 06/15/2023, I interviewed Resident C. He stated that it is “going good” at the home. He stated that he was recently in the hospital and had returned to home. Resident C stated that he is feeling better. He stated that he is getting all his medications. Staff help him with everything he needs. Resident C stated that he participates in physical therapy with “Yogi”. He did not have any concerns regarding the home.

On 06/15/2023, I observed Resident D in the home. Resident D was sleeping in the living room.

On 06/15/2023, I observed Resident E in the home. Resident E is on hospice and was sleeping during investigation.

On 06/15/2023, I interviewed Licensee Designee, Amitkumar Kalasariya, at the home. Mr. Kalasariya arrived during the onsite investigation. He stated that he is “Yogi”. He has not received any complaints regarding residents being left in briefs. He believed that false complaint was made by staff who were recently terminated. Mr. Kalasariya stated that he is a physical therapist and does physical therapy with residents two times per week. It is ordered by physician for home care. Mr. Kalasariya stated that it is not mandatory for residents to do physical therapy and families all approve. Residents are not billed for physical therapy unless it is approved. Mr. Kalasariya stated that he works for Americas Choice Homecare and the owner, Dave, bills insurance companies.

On 08/02/2023, I received copies of assessment plans and resident care agreements for Resident A, Resident B, Resident C, Resident D, Resident F and Resident G. On 08/08/2023, I received assessment plan and resident care agreement for Resident E. None of the resident assessment plans noted participation in physical therapy with Mr.

Kalasariya. None of the resident care agreements noted fees for physical therapy services in the home.

On 08/02/2023, I received email from Amitkumar Kalasariya. He indicated that he is currently working with Resident C as a physical therapist. He sees him through his employment as a physical therapist through America's Choice Homecare. Mr. Kalasariya indicated that he documents those visits in America's Choice Homecare software called Pointcare.

<b>APPLICABLE RULE</b>	
<b>R 400.14301</b>	<b>Resident admission criteria; resident assessment plan; emergency admission; resident care agreement; physician's instructions; health care appraisal.</b>
	(6) At the time of a resident's admission, a licensee shall complete a written resident care agreement. A resident care agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and the licensee and which specifies the responsibilities of each party. A resident care agreement shall include all of the following: (b) A description of services to be provided and the fee for the service. (c) A description of additional costs in addition to the basic fee that is charged.
<b>ANALYSIS:</b>	Licensee Designee, Amitkumar Kalasariya indicated that he is currently working with Resident C as a physical therapist. Resident C also stated that he has participated in physical therapy. The services and fee are not documented in Resident C's resident care agreement.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.14303</b>	<b>Resident care; licensee responsibilities.</b>
	<b>(2) A licensee shall provide supervision, protection, and personal care as defined in the act and as specified in the resident's written assessment plan.</b>

<b>ANALYSIS:</b>	There is not enough information to substantiate that residents are not receiving personal care, including physical therapy services, as specified in their written assessment plans. None of the assessment plans indicated that residents required physical therapy services. Also, none of the residents interviewed reported not receiving adequate personal care in the home such as being left in briefs for long periods of time.
<b>CONCLUSION:</b>	VIOLATION NOT ESTABLISHED

**ALLEGATION:**

**Residents are not receiving their medications. They are being taken by staff.**

**INVESTIGATION:**

On 06/15/2023, I interviewed Staff, Jenna Bezdziecki. Ms. Bezdziecki was not aware of any staff taking medications and stated that there have not been any missing medications while she has worked at the home.

On 06/15/2023, I interviewed Licensee Designee, Amitkumar Kalasariya, at the home. Mr. Kalasariya stated that there have not been any missing medications in the home.

On 06/15/2023, I interviewed Resident A. Resident A stated that she is receiving all her medication.

On 06/15/2023, I interviewed Resident B. He stated that he is getting all his medications.

On 06/15/2023, I interviewed Resident C. He stated that he is getting all his medications.

On 06/15/2023, I reviewed resident medication logs in the home at approximately 2:30 pm. I observed Resident A's medication log was initiated ahead of time by staff for 8 pm medication Enoxaparin 30 mg.

On 06/15/2023, I observed that Resident C's medication log was initiated ahead of time by staff for 5:00 pm, 8:00 pm and 9:00 pm medications. Resident C's Acetaminophen 325 mg (8PM), Atorvastatin 10 mg (8PM), Donepezil 10 mg (8PM), Famotidine 20 mg (5PM), Iprat-Albut Inhahler (8 PM), Lorazepam 0.5 mg (9PM), Metoprolol Tar 25 mg (8PM) and Montelukast Sod 10 mg (8PM) had been initiated as given by staff on medication log prior to medications scheduled time.

Resident A Resident B, Resident D had all medications listed on medication logs available in the home. Resident C's Tramadol HCl 50 mg tab could not be located by



staff during the inspection, however, was initiated as given on 06/15/2023. Mr. Kalasariya stated that medication had not been delivered.

<b>APPLICABLE RULE</b>	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<b>(2) Medication shall be given, taken, or applied pursuant to label instructions.</b>
<b>ANALYSIS:</b>	<p>On 06/15/2023, during the onsite investigation, Resident C's Tramadol HCl 50 mg tab could not be located by staff during the inspection, however, was initiated as given on 06/15/2023. Licensee Designee, Amitkumar Kalasariya, indicated that the medication had not been delivered.</p> <p>However, there is not enough information to substantiate that medications are being taken by staff.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<p><b>(4) When a licensee, administrator, or direct care staff member supervises the taking of medication by a resident, he or she shall comply with all of the following provisions:</b></p> <p><b>(a) Be trained in the proper handling and administration of medication.</b></p> <p><b>(b) Complete an individual medication log that contains all of the following information:</b></p> <p><b>(v) The initials of the person who administers the medication, which shall be entered at the time the medication is given.</b></p>
<b>ANALYSIS:</b>	<p>On 06/15/2023, I reviewed resident medication logs in the home at approximately 2:30 pm. I observed that Resident A's medication log was initialed ahead of time by staff on 06/15/2023 for Enoxaparin 30 mg (8PM).</p> <p>I also observed that Resident C's medication log was initialed ahead of time by staff for 5:00 pm, 8:00 pm and 9:00 pm medications. Resident C's Acetaminophen 325 mg (8PM), Atorvastatin 10 mg (8PM), Donepezil 10 mg (8PM), Famotidine 20 mg (5PM), Iprat-Albut Inhahler (8 PM), Lorazepam 0.5 mg (9PM), Metoprolol Tar 25 mg (8PM) and Montelukast Sod 10 mg</p>

	(8PM) had been initialed as given by staff on medication log prior to medications scheduled time.  Resident C's Tramadol HCl 50 mg tab could not be located by staff during the inspection, however, was initialed as given on 06/15/2023.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**ADDITIONAL FINDINGS:**

**INVESTIGATION:**

On 06/15/2023, I completed an unannounced onsite investigation. I observed that the medications were not locked up appropriately. I observed that that the key was being kept in the lock of medication cabinet in the kitchen.

I completed an exit conference on 08/08/2023 by phone with Licensee Designee, Amitkumar Kalasariya. I informed him of the violations found and that a copy of the special investigation report would be mailed once approved. I also informed him that a corrective action plan would be requested. Mr. Kalasariya indicated that since the onsite inspection he has obtained an actual medication cart and switched to the electronic Quick Mar system for medication administration records. He also indicated that on 06/15/2023 Resident C's Tramadol had not yet been delivered. Mr. Kalasariya indicated that he spoke to his employer and he will no longer be providing physical therapy services for residents in his home to avoid any future issues.

<b>APPLICABLE RULE</b>	
<b>R 400.14312</b>	<b>Resident medications.</b>
	<b>(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being {333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.</b>

<b>ANALYSIS:</b>	On 06/15/2023, I observed that that the key was being kept in the lock of medication cabinet in the kitchen.
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Contingent upon receipt of an acceptable corrective action plan, I recommend no change in license status.

*Kristine Cilluffo*

08/08/2023

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Kristine Cilluffo  
Licensing Consultant

Date

Approved By:

*Jay Calwerts*

For

09/07/2023

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Denise Y. Nunn  
Area Manager

Date