ARIZONA DEPARTMENT OF HEALTH SERVICES

LICENSING

December 9, 2019

Important Notice - Please Read Carefully

Jadyne Schmidt, Administrator
Friendship Village Of Tempe
2525 East Southern Avenue
Tempe, AZ 85282

Dear Mrs. Schmidt:

Enclosed is Nursing Care Institution license number **NCI-2646**, which authorizes your facility to operate 128 beds. In accordance with A.R.S. § 36-407(C), this license is only valid for the location indicated on the license.

Please be advised that A.R.S. § 36-425(A) requires this license to be conspicuously posted in the reception area of your facility. In addition, A.R.S. § 36-422(D) requires the Department to be notified of a change of ownership at least thirty (30) days prior to the effective date.

Per A.R.S. § 36-425(C)(1), "A health care institution license does not expire and remains valid unless...The department subsequently revokes or suspends the license..." Additionally, per A.R.S. § 36-425(C)(2), "The license is considered void because the licensee did not pay the licensing fee before the licensing fee due date."

Should you have any questions or concerns, please contact the Bureau of Long Term Care at (602) 364-2690.

Sincerely,

Diane Eckles

Diane Eckles
Bureau Chief

DE:dc

Enclosure

PROPERTY OF THE

ARIZONA DEPARTMENT OF HEALTH SERVICES

Tempe Life Care Village, Inc., dba
Friendship Village Of Tempe
2525 East Southern Avenue
Tempe, AZ 85282

This facility is licensed to operate as a NURSING CARE INSTITUTION

Total Capacity: 128

Effective: February 1, 2020

Diane Eckles

Recommended By: Diane Eckles, Bureau Chief

License: NCI-2646

Issued By: Colby Bower, Assistant Director

PURSUANT TO A.R.S. §41-1092.11 (A), UPON SUBMITTAL OF A TIMELY AND SUFFICIENT APPLICATION THIS LICENSE WILL REMAIN IN EFFECT UNTIL REISSUED OR REVOKED

TO BE FRAMED AND DISPLAYED IN A CONSPICUOUS PLACE

ADHS (Rev. 8/02)

ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

INFORMATION VERIFICATION AND ANNUAL LICENSING FEES

ARIZONA DEPARTMENT OF HEALTH SERVICES

PUBLIC HEALTH LICENSING SERVICES – LONG TERM CARE FACILITIES LICENSING

In accordance with A.A.C. R9-10-107
C. Except as specified in subsection (E), a licensee shall submit to the Department, no earlier than 60 calendar days before the anniversary date of the facility's health care institution license:
1. The following information in a Department-provided format:
a. The licensee's name, and
b. The facility's name and license number;
2. Verification of the information in the Department's current records for the health care institution;
3. If applicable, information or documentation required in another Article of this Chapter, specific to the health care institution, to be submitted with the relevant fees required in R9-10-106; and
4. The applicable annual licensing fees in R9-10-106.

Fac ID: LTC0036

Fee Due Date: 1/31/2020

Legend

New Certificate | ! Updates Required | !! Review and Updates Required

HEALTH CARE INSTITUTION INFORMATION

Name of health care institution	License number
FRIENDSHIP VILLAGE OF TEMPE	NCI-2646

Facility physical address	City	State	ZIP Code
2525 EAST SOUTHERN AVENUE	TEMPE	AZ	85282

Facility mailing address	City	State	ZIP Code
2525 EAST SOUTHERN AVENUE	TEMPE	AZ	85282

Phone number	Email	Fax number (optional)
(480) 831-3184	schmidtjadyne@fvtaz.com	(480) 831-3259

Class or subclass

Nursing Care Institution

Authorized services

Authorized Service: Secured Alzheimer's Unit Not Approved (Start Date: N/A)

Authorized Service: Ventilator Area Not Approved (Start Date: N/A)

Authorized Service: Behavioral Health Unit Not Approved (Start Date: N/A)

Authorized Service: Dialysis Services Not Approved (Start Date: N/A)

Fac ID LTC0036

Fee Due Date 1/31/2020

Authorized Service: Radiology Services Not Approved (Start Date: N/A)

Authorized Service: Diagnostic Imaging Services Not Approved (Start Date: N/A)

Authorized Service: Clinical Lab Services Not Approved (Start Date: N/A)

Authorized Service: Behavioral Health Services Not Approved (Start Date: N/A)

Health care institution's days and hours of operation

Sun	Mon	Tue	Wed	Thurs	Fri	Sat
12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM

Fac ID LTC0036

Fee Due Date 1/31/2020

OWNER INFORMATION

The owner type is a

Corporation

Tax ID

Supporting documentation

!!

Owner's name

TEMPE LIFE CARE VILLAGE, INC.

Owner's mailing address	City	State	ZIP Code
2645 EAST SOUTHERN AVENUE	TEMPE	AZ	85282

Phone number	Email	Fax number (optional)
(480) 831-0880	schmidtjadyne@fvtaz.com !	(480) 831-3180

Name	Title
Don Cassano	Board of Director President
Ellen Cavanaugh	Board of Director Secretary/Treasurer

CHIEF ADMINISTRATIVE OFFICER

Name | Effective date

NURSING CARE INSTITUTION ADMINISTRATOR

Name JADYNE SCHMIDT | Effective date 8/1/2012

EMERGENCY CONTACT INFORMATION

Name Jadyne Schmidt | Phone number (480) 831-3107

Fac ID LTC0036

Fee Due Date 1/31/2020

FEES

Description	Amount
License fees	
Base fee	$870
Licensed capacity/occupancy (128) x Per unit cost of $73	$9344
Late fee	$0
Total license fees	**$10214**
Enforcement fees	
Enforcement fees previously owed	$0
Total enforcement fees	**$0**
Total amount due	**$10214**

Please note that the Department will not receive your submission unless the payment process is complete and approved.

ALL FEES ARE NON-REFUNDABLE.
NOTE: Fees do not apply to a health care institution operated by a state agency pursuant to federal law such as the veterans home, Arizona State Hospital or an adult foster care home.

[X] I acknowledge that all information has been verified and is accurate.

Submitted by

Jadyne Schmidt

Submitted on

12/9/2019