



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HUMAN SERVICES



# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to REMED RECOVERY CARE CENTERS LLC

LEGAL ENTITY

To operate REMED RECOVERY CARE CENTERS - BUILDING 2

NAME OF FACILITY OR AGENCY

Located at 323 PAOLI PIKE, MALVERN, PA 19460

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Assisted Living-Special Care

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 8

(MAXIMUM CAPACITY)

or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

**Special Care Unit - 55 Pa.Code §§ 2800.231-239 - Capacity 8**

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2800: Assisted Living Residences

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from February 1, 2020

until February 1, 2021,

unless sooner revoked for non-compliance with applicable laws and regulations.

No: **142820**

*Robert E. Robinson*

ISSUING OFFICER

*[Signature]*

Deputy Secretary

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.

HS 628 - 7/19



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

OCT 30 2019

Ms. Elaine Lecatsas,  
Vice President of Operations  
ReMed Recovery Care Centers, Inc.  
16 Industrial Boulevard, Suite 203  
Paoli, Pennsylvania 19301

RE: ReMed Recovery Care Centers –  
Building 2  
323 Paoli Pike  
Malvern, Pennsylvania 19355  
Certificate #: 142820

Dear Ms. Lecatsas:

The Department has received your October 10, 2019 renewal application to operate the above Assisted Living Home pursuant to Title 55, PA Code, Chapter 2800. A regular license is being issued in response to your application. Your license is enclosed.

Please be advised that, pursuant to 55 Pa.Code § 20.31 (relating to annual inspection), the Department is required to conduct an onsite inspection of the above Assisted Living Home at least once every twelve months. The Department will conduct an inspection of ReMed Recovery Care Centers – Building 2 within the next twelve months. If evidence of noncompliance with Title 55, PA Code, Chapter 2800 is found during the inspection, the Department will take appropriate enforcement action.

If you have any questions about the Department's process, please contact the Bureau of Human Services Licensing's Provider Support Hotline at 1-866-503-3926 or by electronic mail at [ra-pwarlheadquarters@state.pa.us](mailto:ra-pwarlheadquarters@state.pa.us).

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Hancock".

Kevin Hancock  
Deputy Secretary  
Office of Long-term Living

Enclosure  
License