Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CUA IDENTIFICATION NUMBER: 0017050	(X2) MULTIPLE CONSTRUCTION A. BUILDING B.WING	(X3) DATE SURVEY COMPLETED 10/19/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MILESTONE SENIOR LIVING RENEE	**5512 RENEE DR , EAU CLAIRE, Wisconsin, 54703**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
u0000	INITIAL COMMENTS On 10/19/2026, Surveyor conducted a complaint investigation and verification visit at Milestone Senior Living Renee. The complaint was unsubstantiated. One deficiency was identified and was a repeat deficiency. See Statement of Deficiency (SOD) H54P13, dated 06/22/2026, and SOD 1LZ611, dated 09/05/2023. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed. Census: 33 tenants; 31 apartments	u0000		
U0152	SCHEDULE OF FEES FOR SERVICES. 89.25(1)(c) Residential care apartment complexes shall have a written schedule of fees for services which includes all of the following: The facility's refund policy regarding application and entrance fees, security deposits and monthly rent, meal and service charges in the event of death or termination of the contract between the tenant and the facility. This LICENSURE REQUIREMENT is NOT MET as evidenced by:	U0152		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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U0152	Continued from page 1 Based on record review and interview, the provider did not ensure the refund policy regarding security deposits and monthly rent, meal and service charges in the event of death or termination of the contract between the tenant and the facility was followed for 2 of 2 tenants. Tenant 1 and Tenant 2's refund was not issued pursuant to the terms of the service agreement signed upon admission. This is a repeat deficiency and is being cited for the third time. See Statement of Deficiency H54P13, dated 06/22/2026, and SOD 1LZ611, dated 09/05/2023. Findings include: On 10/19/2026 at approximately 11:00 AM, Surveyor requested a list of recently discharged residents from Administrator A. The following tenants and dates of discharge were received: -Tenant 1 was discharged (deceased) on 07/06/2026 and had a billing end date listed as 07/20/2026. -Tenant 2 was discharged (higher level of care) on 07/20/2026 and had a billing end date listed as 07/20/2026. -Tenant 3 was discharged (independent setting) on 07/28/2026 and had a billing end date listed as 07/30/2026. Administrator A informed Surveyor Tenant 2 was not owed a refund upon discharge as s/he was working with a managed care organization (MCO). On 10/19/2026, Surveyor reviewed Tenant 1 and Tenant 3's record, including the admission/service agreement, schedule of fees for service and refund policy, current statements, account balance and summary of funds owed upon discharge. Tenant l's service agreement was signed on	U0152		

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	0017050	A. BUILDING B.WING	10/19/2026

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U0152	Continued from page 2 06/11/2024 with a commencement date of 06/11/2024. Tenant 3's service agreement was signed on 09/24/2025 with a commencement date of 09/24/2025. The service agreements read, in part: "Refund of Base Monthly Fee. The Base Monthly Fee for the month in which discharge occurs shall be prorated to the date the Apartment is vacated. If any refund of the Base Monthly Fee is due, the Community will make the refund within thirty (30) days after the date of discharge..." "Death of Tenant. This Agreement may be terminated 15 days after the death of a Resident, provided that advanced written notice is given to the Community and the Apartment is vacated. The Base Monthly Fee will be assessed until all personal property of the deceased Tenant is removed. The deceased Tenant's estate will be liable for all provisions outlined in this Agreement until all charges and fees due pursuant to this Agreement have been paid, at which time refunds will be issued pursuant to the terms of this Agreement." On 10/19/2026 at approximately 12:00 PM, Administrator A confirmed Tenant 1 was owed a refund of $2315.00, and Tenant 3 was owed a refund of $161.00. Administrator A acknowledged the refunds had not been issued within 30 days of the date of discharge and s/he would work towards submitting refund requests timely. Surveyor reviewed the account balances for Tenant 1. Tenant 1's ledger showed a statement total of $2315.70 due for refund. Surveyor reviewed the account balance for Tenant 3. Tenant 3's ledger showed a statement total of $161.29 due for refund. Tenant 1 and Tenant 3 did not receive a refund within 30 days of discharge or billing end date.	U0152		