pennsylvania
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**
**MAILING DATE: 1/28/25**

[redacted]
Walden's View North Huntingdon OPCO LLC
7990 US Route 30
North Huntingdon, Pennsylvania 15642

RE: The Neighborhoods at Walden's View
License/COC #: 44681

Dear [redacted]:

On 12/30/24, the Department of Human Services (Department) issued a notice of its intent to assess a fine for regulatory violations with 55 Pa.Code Ch. 2600 (relating to personal care homes) for the above personal care home.

Pursuant to 62 P.S. §§ 1085-1087 and 55 Pa.Code §§ 2600.261-268 (relating to enforcement), the Department hereby assesses a fine for the following uncorrected violations.

| 55 Pa.Code Chapter 2600 Section no. | Class of Violation | Census at Inspection X | Fine Per resident Per day | = | Calculated Fine Per day | Initial Fine Assessment |
|---|---|---|---|---|---|---|
| 42(b) | II | 39 | $5 | | $195 | $2,145 |

Total Fine Assessment for period 12/31/2024 through 1/10/25 = $2,145

The enclosed Invoice for The Neighborhoods at Walden's View specifies the total amount of the fines for the period following the Department's notice of intent to assess a fine. The invoice is payable within 30 days from the mailing date of this letter. The fines will continue to accumulate and will be recalculated at the end of each month until all violations are fully corrected. You must notify the Department's Regional Human Services Licensing office in writing as soon as each violation is fully corrected and submit written documentation of each correction. Even if you pay the full amount of this invoice, fines will continue to accumulate for each violation until you have provided written notice of full correction and the Department has verified that the violations are fully corrected.

If you disagree with the decision to assess a fine, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa.Code Part II, Chs. 31-35 and 62 P.S. §1086(f). If you decide to appeal, a written request for an appeal with a check made payable to the "Commonwealth of Pennsylvania" for the total monthly fine amount or $500, whichever is less, must be received within 30 days of the mailing date of this letter by:

[redacted]
Bureau of Human Services Licensing
Department of Human Services
Room 631, Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120

This decision to assess a fine is final 31 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

If you have any questions regarding this invoice please contact [redacted] Enforcement Manager, [redacted].

Sincerely,

Theresa Hartman

Theresa Hartman
Director

Enclosure
Personal Care Home Fine Invoice

bcc: [redacted]

# Personal Care Home Invoice

PA Department of Human Services
Bureau of Human Services Licensing
Room 631, Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120
Phone: 717-783-3670 Fax: 717-783-5662

**Assessment #:** NW001224
**Invoice Date:** 1/28/2025
**Due Date:** 2/27/2025
**License Number:** 44681

## Bill To:

Walden's View North Huntingdon OPCO LLC
7990 US Route 30
North Huntingdon, PA 15642

Re: The Neighborhoods at Walden's View
7990 US Route 30
North Huntingdon, PA 15642

**Contact Name**

| Fine/Appeal | Description - 55 Pa.Code § 2600 | From: | To: | Fine Imposed |
|---|---|---|---|---|
| Class II | 42b | 12/31/2024 | 1/10/2025 | $2,145.00 |

**Invoice Total** **$2,145.00**

**Please remit this portion with payment to ensure proper credit**

Walden's View North Huntingdon OPCO LLC
7990 US Route 30
North Huntingdon, PA 15642

**Assessment #:** NW001224
**Invoice Date:** 1/28/2025
**Due Date:** 2/27/2025
**License Number:** 44681

Re: The Neighborhoods at Walden's View
7990 US Route 30
North Huntingdon, PA 15642

**Please make checks payable to:**
**Commonwealth of Pennsylvania**
**Bureau of Human Services Licensing**
**Room 631, Health and Welfare Building**
**625 Forster Street**
**Harrisburg, PA 17120**

**Total Due** **$2,145.00**

**Payment Enclosed**

You can also pay by using SNAP PAY at https://www.bpp.ob.pa.gov/Customer/PaymentForm