

Department of
SOCIAL SERVICES

Community Care Licensing

COMPLAINT INVESTIGATION REPORT

Facility Number: 435202807
Report Date: 04/09/2026
Date Signed: 04/09/2026 02:11:17 PM

Unsubstantiated

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY	CALIFORNIA DEPARTMENT OF SOCIAL SERVICES COMMUNITY CARE LICENSING DIVISION CENTRAL COAST CR/RES, 2580 N. FIRST STREET, STE. 350 SAN JOSE, CA 95131
COMPLAINT INVESTIGATION REPORT	

This is an official report of an unannounced visit/investigation of a complaint received in our office on 01/02/2026 and conducted by Evaluator Marcela Yanez

	COMPLAINT CONTROL NUMBER: 26-AS-20260102141149
FACILITY NAME: MERRILL GARDENS AT WILLOW GLEN	FACILITY NUMBER: 435202807
ADMINISTRATOR: GOLDEN, KIM	FACILITY TYPE: 740
ADDRESS: 1420 CURCI DRIVE	TELEPHONE: (408) 283-0941
CITY: SAN JOSE	ZIP CODE: 95126
CAPACITY: 150	DATE: 04/09/2026
	UNANNOUNCED TIME BEGAN: 01:10 PM
MET WITH: Eva Reiter and Brittney Leonard	TIME COMPLETED: 02:20 PM

ALLEGATION(S):

1	Facility charging services not stated on the admission agreement.
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INVESTIGATION FINDINGS:

1	Licensing Program (LPA) Analyst Marcela Yanez conducted an unannounced complaint investigation visit
2	to deliver findings. LPA announced the purpose of the visit and met with Brittney Leonard, Memory Care
3	Director MCD and Eva Reiter, Resident Care Director RCD, GM was not in the office.
4	
5	On January 2, 2026, the department received a complaint with the allegation that the Facility was
6	charging for services not stated on the admission agreement.
7	
8	On 01/08/26 LPA Yanez conducted an initial 10-day complaint investigation visit and a continued
9	complaint visit on 02/25/26. LPA reviewed residents file, admissions agreement, level of care plan,
10	resident progress notes, change in service agreement, and billing ledger.
11	
12	Page 1 of 2
13	

Unsubstantiated	Estimated Days of Completion:
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SUPERVISORS NAME: Christine Kabariti	
LICENSING EVALUATOR NAME: Marcela Yanez	
LICENSING EVALUATOR SIGNATURE:	DATE: 04/09/2026
I acknowledge receipt of this form and understand my licensing appeal rights as explained and received.	
FACILITY REPRESENTATIVE SIGNATURE:	DATE: 04/09/2026

This report must be available at Child Care and Group Home facilities for public review for 3 years.
LIC9099 (FAS) - (06/04) Page: 1 of 2
Control Number 26-AS-20260102141149

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COMPLAINT INVESTIGATION REPORT (Cont)	

FACILITY NAME: MERRILL GARDENS AT WILLOW GLEN	FACILITY NUMBER: 435202807
	VISIT DATE: 04/09/2026

NARRATIVE	
1	Page 2 of 2
2	During the investigation the department interviewed General Manager (GM) and 1 staff.
3	Resident (R1) moved into facility on 01/29/21 and entered into agreement with a signed admissions
4	agreement. When R1 moved into the facility he/she had a level 5 care, then on 05/24/21 it increased to
5	level 6 then was lowered to level 2 on 8/25/21.
6	
7	On 10/22/21 R1 was credited for level 6 care for \$6461.08 for previous months when level 2 care was to
8	be applied. R1 was charged for level 2 care for \$3341.94 on 10/22/21. On 03/17/23 R1 had an increase
9	in level of care status to level 3 until 06/26/23 when it was reduced to level 1 care. R1s level of care
10	increased again on 10/12/23 to level 6 until it was reduced to level 2 on 11/01/23.
11	
12	GM stated that R1s level of care was documented and signed every time R1 had an increase in level of
13	care and placed in residents file. R1 also signed every level of care plan change. GM stated R1 was
14	notified every time the level of care increased or decreased. GM stated per facility policy every level of
15	care change is documented and signed by the GM and the Resident.
16	
17	LPA Yanez reviewed R1s ledger and verified all charges on the ledger were agreed upon when R1
18	entered into an admissions agreement dated 01/29/21. R1 was charged and credited accordingly for
19	services when there was an increase or decrease in level of care.
20	
21	
22	On 02/10/26 R1 became in agreement with the facility to pay a total final balance of \$9006.10 after the
23	facility gave a credit of \$1500.00 as a courtesy to settle the final bill. Based on documentation R1
24	received services he/she agreed upon and paid for according to the admissions agreement.
25	
26	On 04/09/26 the department has completed its investigation.
27	
28	Based on investigation, interviews conducted, and records reviewed, the Department found that the
29	above allegation is UNSUBSTANTIATED. An unsubstantiated finding indicates that although the
30	allegation may have happened or is valid, there is not a preponderance of evidence to prove that the
31	allegations did or did not occur.
32	
	This report was reviewed with MCD and RCD, and a copy of the report was provided.

SUPERVISORS NAME: Christine Kabariti	
LICENSING EVALUATOR NAME: Marcela Yanez	
LICENSING EVALUATOR SIGNATURE:	DATE: 04/09/2026
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