

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: MHL011-454	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 01/08/2026
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NAME OF PROVIDER OR SUPPLIER MAYRX RECOVERY	STREET ADDRESS, CITY, STATE, ZIP CODE 302 STONERIDGE BOULEVARD ASHEVILLE, NC 28804
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(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) COMPLETE DATE
V 000	<p>INITIAL COMMENTS</p> <p>A complaint survey was completed on January 8, 2026. The complaints were unsubstantiated (intake # NC00234886, NC00234848, and NC00235087). A deficiency was cited.</p> <p>This facility is licensed for the following service categories: 10A NCAC 27G .4400 Substance Abuse Intensive Outpatient Program, and 10A NCAC 27G .4500 Substance Abuse Comprehensive Outpatient Treatment Program.</p> <p>This facility has a current census of 24. The .4400 Substance Abuse Intensive Outpatient Program (SAIOP) has a current census of 11 and the .4500 Substance Abuse Comprehensive Outpatient Treatment Program (SACOT) has a current census of 13. The survey sample consisted of audits of 3 current SAIOP client, 3 current SACOT clients.</p>	V 000		
V 268	<p>27G .4403 Sub. Abuse Intensive Outpt - Operations</p> <p>10A NCAC 27G .4403 OPERATIONS</p> <p>(a) A SAIOP shall operate in a setting separate from the client's residence.</p> <p>(b) Each SAIOP shall operate at least three hours per day, at least three days per week with a maximum of two days between offered services.</p> <p>(c) A SAIOP shall provide services a maximum of 19 hours for each client.</p> <p>(d) Each SAIOP shall provide services a minimum of nine hours per week for each client.</p> <p>(e) Group counseling shall be provided each day program services are offered.</p> <p>(f) Each SAIOP shall develop and implement written policies to carry out crisis response for their clients on a face to face and telephonic basis 24 hours a day, seven days a week, which</p>	V 268	<p style="text-align: center;">RECEIVED JAN 27 2026 DHSR-MH Licensure Sect</p>	

Division of Health Service Regulation LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X8) DATE
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V 268	<p>Continued From page 1</p> <p>shall include at a minimum the capacity for face to face emergency response within two hours. (g) Before discharge, the program shall complete a discharge plan and refer each client who has completed services to the level of treatment or rehabilitation as specified in the treatment plan.</p> <p>This Rule is not met as evidenced by: Based on interviews the facility failed to operate in a setting separate from the clients' residence. The findings are:</p> <p>Interview on 1/7/26 with Client #1 revealed: -Enrolled in SAIOP 10/15/25. -SAIOP was done virtually, from 6pm-9pm, Monday, Wednesday and Friday. -She would log into the SAIOP link on her own personal computer while at her residence from 6pm-9pm, Monday, Wednesday and Friday.</p> <p>Interview on 1/7/26 with the Certified Alcohol and Drug Counselor revealed: -Facilitated SAIOP online Monday and Wednesday from 6pm-9pm. -Never facilitated SAIOP group and individual therapy in person at the facility. -Would email clients the SAIOP link once clients were enrolled in SAIOP. -Report concerns with clients enrolled in SAIOP directly to the Staff Director of Operations.</p> <p>Interview on 1/7/26 with the Staff Director of Operations revealed: -SAIOP was done virtually through link emailed to clients enrolled in SAIOP since her employment in August 2025, "always been that way (SAIOP</p>	V 268	<p>Please see attached.</p>	
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V 268	Continued From page 2 done virtually and not separate from clients' residence)." -"Clients are at their residence and log in to the system for group and therapy Monday, Wednesday and Friday from 6pm-9pm." -"Was never told we (facility) couldn't do 4400 (SAIOP) virtual (not separate from clients' residence)." -"Want to do what's right so we will make the corrections we need to." -"It would work with them (clients) coming into the facility for IOP (SAIOP)."	V 268		
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20 January 2026

Mental Health Licensure and Certification Section
NC Division of Health Service Regulation
2718 Mail Service Center
Raleigh, NC 27699-2718

Re: Plan of Correction
Mayrx Recovery, 302 Stone Ridge Boulevard, Asheville, NC 28804
MHL # 011-454

Plan of Correction

1) Immediate Corrective Action Taken

- Effective February 2, 2026, the SAIOP program will no longer be provided in any client residence or residential setting.
- All SAIOP group services will be conducted only at 302 Stoneridge Blvd, Asheville, NC 28804, which is a setting separate from client residences.
- Staff were notified of the requirement and the new location, and scheduling was updated to reflect the change.

2) Ongoing Compliance Plan (Addresses (a)–(f))

(a) SAIOP shall operate in a setting separate from the client's residence.

Correction/Compliance:

- The agency will operate SAIOP only in a non-residential, program-designated location (302 Stoneridge Blvd, Asheville, NC 28804) beginning February 2, 2026.
- The Clinical Director will ensure no SAIOP groups are scheduled, held, or billed from any client residence.

Monitoring:

- Clinical Director will review the weekly group schedule and service location documentation weekly for 90 days, then monthly thereafter.

302 Stoneridge Blvd, Asheville, NC 28804

- Any identified variance will be corrected immediately and documented via incident/quality report.

(b) Each SAIOP shall operate at least three hours per day, at least three days per week, with a maximum of two days between offered services.

Correction/Compliance:

- Beginning February 2, 2026, SAIOP will operate a minimum of three (3) hours per day, at least three (3) days per week.
- The program calendar will ensure no more than two (2) days occur between offered service days. The schedule shall consist of Monday, Wednesday, and Friday from 6:00pm to 9:00pm.

Monitoring:

- Clinical Director will verify the calendar meets this requirement weekly and retain the schedule in the program records.

(c) A SAIOP shall provide services a maximum of 19 hours for each client.

Correction/Compliance:

- Individualized treatment planning and scheduling will ensure each client receives no more than 19 hours of SAIOP services during the applicable service week/timeframe as required.
- The EHR/service log will be used to track accumulated hours by client.

Monitoring:

- Clinical Supervisor will review client service hour totals weekly for all active SAIOP clients to ensure the 19-hour maximum is not exceeded.

(d) Each SAIOP shall provide services a minimum of nine hours per week for each client.

Correction/Compliance:

- Each active SAIOP client will be scheduled for at least nine (9) hours per week, consistent with the program design and individualized treatment plan.
- Attendance will be monitored daily; missed sessions will be addressed through outreach and rescheduling when clinically appropriate.

Monitoring:

- Clinical Supervisor will run a weekly attendance/service hour report to verify each client meets the nine (9) hours per week minimum, or document clinical justification/barriers and corrective outreach.
- (e) Group counseling shall be provided each day program services are offered.

Correction/Compliance:

- Group counseling will be offered every day SAIOP services are provided, beginning February 2, 2026.
- The daily schedule will clearly identify group counseling blocks and assigned facilitators.

Monitoring:

- Clinical Director will review daily group rosters and facilitator documentation weekly for 90 days, then monthly.

(f) Written crisis response policies for face-to-face and telephonic response 24/7.

Correction/Compliance:

- The agency has developed, implemented, and maintained written crisis response policies and procedures for SAIOP clients that provide 24 hours/day, 7 days/week coverage, including:
 - Telephonic response procedures (immediate response, triage, documentation).
 - Face-to-face response criteria and procedures (when required/appropriate).
 - Escalation to emergency services (911), mobile crisis, or higher levels of care when indicated.
 - On-call coverage schedule, roles/responsibilities, and required documentation.
 - Client notification process (crisis numbers provided upon admission and reviewed regularly).
- Staff will be trained on the crisis response policy prior to or upon implementation, and training will be documented.

Monitoring:

- Clinical Supervisor will review crisis logs/documentation monthly to confirm timely response and adherence to policy.
- Policy will be reviewed annually and updated as needed.

3) Staff Training and Accountability

- All SAIOP staff will receive documented training on:
 - Location requirements (SAIOP not in residences)
 - Program hour requirements (minimums/maximums)
 - Daily group counseling requirement
 - Crisis response policy (24/7, telephonic and face-to-face)
- Any staff noncompliance will result in corrective coaching and, if repeated, progressive disciplinary action per HR policy.

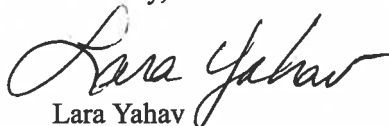
4) Documentation and Quality Assurance

- The agency will maintain:
 - SAIOP schedule (days/hours) showing compliance with service frequency requirements
 - Group rosters and session notes for each service day
 - Weekly client hour tracking to ensure minimum 9 hours/week and maximum 19 hours
 - Crisis policy, on-call schedule, and crisis contact documentation provided to clients
- QA audits will occur weekly for 90 days post-implementation, then monthly.

5) Completion Date

- All corrective actions will be fully implemented by February 2, 2026, including relocation of services to 302 Stoneridge Blvd, Asheville, NC 28804, updated scheduling, hour monitoring procedures, group counseling scheduling, and crisis response policy implementation/training.

Sincerely,



Lara Yahav
Director of Operations