### STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

#### FILED AHCA AGENCY CLERK

## STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

# 2010 NOV -8 A 10:45

## DOAH CASE NO. 08-4921MPI AUDIT NO. C.I. 07-4891-000

v.

HAMID BAGLOO, M.D.,

Petitioner.

Respondent.

/

### FINAL ORDER ON REMAND FROM THE FIRST DCA

On November 12, 2009, the Agency rendered a Corrected Final Order in this matter, modifying some of the findings of fact and conclusions of law in the Recommended Order, and ordering the Respondent to repay \$82,836.07 in Medicaid overpayments and imposing a \$3,000 fine.

On November 24, 2009, the Respondent appealed the Corrected Final Order to the First District Court of Appeal.

On October 19, 2010, the First District Court of Appeal issued a Mandate and Opinion reversing the Agency's Corrected Final Order, and ordering the Agency to enter a final order in accordance with the administrative law judge's recommended order.

Based on the foregoing,

#### **IT IS THEREFORE ADJUDGED THAT:**

The Recommended Order is hereby adopted by the Agency in its entirety. Respondent is required to repay \$34,018.26 in Medicaid overpayments, plus statutory interest, to the Agency for paid claims covering the period from January 1, 2002 to August 31, 2006. However, the Agency will not impose a fine on the Respondent. Respondent shall make full payment of the

overpayment to the Agency for Health Care Administration within 30 days of the rendition of this Final Order. Respondent shall pay by check payable to the Agency for Health Care Administration and mailed to the Agency for Health Care Administration, Office of Finance and Accounting, 2727 Mahan Drive, Fort Knox Building 2, Mail Stop 14, Tallahassee, Florida 32308.

DONE and ORDERED this <u>5</u> day of hovember, 2010, in Tallahassee,

Florida.

ELIZABET DUDEK, Interim Secretary AGENCY FOR HEALTH CARE ADMINISTRATION

# **NOTICE OF RIGHT TO JUDICIAL REVIEW**

A PARTY WHO IS ADVERSELY AFFECTED BY THIS FINAL ORDER IS ENTITLED TO JUDICIAL REVIEW, WHICH SHALL BE INSTITUTED BY FILING THE ORIGINAL NOTICE OF APPEAL WITH THE AGENCY CLERK OF AHCA, AND A COPY ALONG WITH THE FILING FEE PRESCRIBED BY LAW WITH THE DISTRICT COURT OF APPEAL IN THE APPELLATE DISTRICT WHERE THE AGENCY MAINTAINS ITS HEADQUARTERS OR WHERE A PARTY RESIDES. REVIEW PROCEEDINGS SHALL BE CONDUCTED IN ACCORDANCE WITH THE FLORIDA APPELLATE RULES. THE NOTICE OF APPEAL MUST BE FILED WITHIN 30 DAYS OF THE RENDITION OF THE ORDER TO BE REVIEWED.

## **CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that a true and correct copy of the foregoing Final Order has

been furnished by U.S. or interoffice mail to the persons named below on this

Noventer, 2010.

RICHARD J. SHOOP, Agency Clerk Agency for Health Care Administration 2727 Mahan Drive, MS #3 Tallahassee, Florida 32308 (850) 412-3630

#### **COPIES FURNISHED TO:**

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Henry Evans Finance & Accounting