

STATE OF FLORIDA
AGENCY FOR HEALTH CARE ADMINISTRATION

FILED
ARDA
AGENCY CLERK

SARAI HOME CARE, INC.,

2013 SEP -9 A 10: 27

Petitioner,

v.

DOAH No. 12-3864

STATE OF FLORIDA, AGENCY FOR
HEALTH CARE ADMINISTRATION,

AHCA No. 2012010367

RENDITION NO.: AHCA- 13-875 -S-OLC

Respondent.

STATE OF FLORIDA, AGENCY FOR
HEALTH CARE ADMINISTRATION,

AHCA Nos. 2012005228

2012011499

2013002917

Petitioner,

2013002918

2013002919

v.

2013002920

SARAI HOME CARE, INC.,

2013002921

2013002925

Respondent.

FINAL ORDER

Having reviewed the Administrative Complaints, the Amended Notice of Intent to Deny (“NOI”) letter, and all other matters of record, the Agency for Health Care Administration finds and concludes as follows:

The Agency has jurisdiction over the above-named party pursuant to Chapter 408, Part II, Florida Statutes, and the applicable authorizing statutes and administrative code provisions.

1. The Agency issued the attached NOI and Election of Rights form (Exhibit 1). The Election of Rights form advised of the right to an administrative hearing.
2. The Agency issued the attached Administrative Complaints and Election of Rights forms. (Exhibits 2-8) The Election of Rights form advised of the right to an administrative hearing.
3. The parties have since entered into the attached Settlement Agreement. (Exhibit 9)

Based upon the foregoing, it is **ORDERED:**

4. The Settlement Agreement is adopted and incorporated by reference into this Final Order. The parties shall comply with the terms of the Settlement Agreement.

5. Sarai Home Care Inc. shall:

a. Pay the Agency \$6,606.00.

b. Retain a consultant who has been an administrator for at least five (5) years and whose facility has not been cited with a Class I, Class II, or three or more uncorrected Class III deficiencies in the last five (5) years. It shall also disclose the identity of the consultant that it has retained within 10 days of the signing of the Settlement Agreement by its administrator.

c. Reduce its capacity to fifteen (15) beds. At the time of its licensure renewal, Sarai Home Care can return to its original capacity of 17 beds once the renewal license is granted.

d. Not have more than two (2) residents in a bedroom.

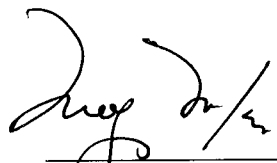
e. Not be cited with a Class I, Class II, or three or more Class III deficiencies prior to its renewal license being granted. If Sarai Home Care Inc. is cited with a Class I, Class II, or a Class III prior to its renewal license being granted, this shall be grounds for revocation of its license if any such citation is not challenged by Sarai Home Care Inc., or if challenged, is upheld after all appeals.

6. This Agreement shall supersede the Notice of Intent to Deny (NOI). If the Agency has not already completed its review of the application, it shall resume its review of the application upon entry of the Final Order adopting this Agreement. Nothing in this Agreement, however, shall prohibit the Agency from denying the application based upon any statute, rule, or regulation, and, if applicable, an unsatisfactory licensure survey.

7. If full payment has been made, the cancelled check acts as receipt of payment and no further payment is required. If full payment has not been made, payment is due within 180 days of the Final Order. Overdue amounts are subject to statutory interest and may be referred to collections. A check made payable to the "Agency for Health Care Administration" and containing the AHCA ten-digit case number should be sent to:

Office of Finance and Accounting
Revenue Management Unit
Agency for Health Care Administration
2727 Mahan Drive, MS 14
Tallahassee, Florida 32308

ORDERED at Tallahassee, Florida, on this 9 day of September, 2013.



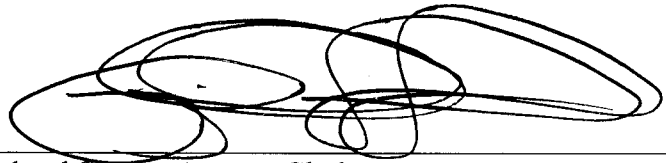
Elizabeth Dudek, Secretary
Agency for Health Care Administration

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 one copy of a notice of appeal with the Agency Clerk of AHCA, and a second copy, along with filing fee as 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 of proceedings shall be conducted in accordance with the Florida appellate rules. The Notice of Appeal must be filed within 30 days of rendition of the order to be reviewed.

CERTIFICATE OF SERVICE

I CERTIFY that a true and correct copy of this Final Order was served on the below-named persons by the method designated on this 7th day of September, 2013.



Richard Shoop, Agency Clerk
Agency for Health Care Administration
2727 Mahan Drive, Bldg. #3, Mail Stop #3
Tallahassee, Florida 32308-5403
Telephone: (850) 412-3630

Jan Mills Facilities Intake Unit (Electronic Mail)	Finance & Accounting Revenue Management Unit (Electronic Mail)
Shaddrick Haston, Unit Manager Licensure Unit Agency for Health Care Administration (Electronic Mail)	Lourdes A. Naranjo, Senior Attorney Office of the General Counsel Agency for Health Care Administration (Electronic Mail)
Arlene Mayo-Davis, Field Office Manager Local Field Office Agency for Health Care Administration (Electronic Mail)	Paul Anthony Dieguez, Esq. Smith and Associates 1499 South Harbor City Blvd., Suite 200 Melbourne, Florida 32901 (U.S. Mail)
Claude B. Arrington Administrative Law Judge Division of Administrative Hearings (Electronic Mail)	