STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

AHCA AGENCY CLERK 2014 OCT - L. A. II: 42

EAST ORLANDO HEALTH AND REHAB CENTER, INC.,

Petitioner,

Respondent.

VS.

Case No.: 14-2057 Provider No.: 032042100 Invoice No.: NH16759

RENDITION NO.: AHCA- 14 - 0811 -S-MDA

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

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FINAL ORDER

THE PARTIES resolved all disputed issues and executed a Settlement Agreement. The parties are directed to comply with the terms of the attached settlement agreement, attached hereto and incorporated herein as **Exhibit "1."** Based on the foregoing, this file is **CLOSED**.

DONE and ORDERED on this the <u>30th</u> day of <u>September</u>, 2014, in Tallahassee, Florida.

ELIZABETH DUDEK, SECRETARY
Agency for Health Care Administration

Final Order Invoice No. NH16759 Page 1 of 3 A PARTY WHO IS ADVERSELY AFFECTED BY THIS FINAL ORDER IS ENTITLED TO A 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 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.

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(Via Electronic Mail)

Agency for Health Care Administration Bureau of Finance and Accounting (Interoffice Mail)

Bureau of Health Quality Assurance Agency for Health Care Administration (Interoffice Mail) Jeffries Duvall, Esquire Assistant General Counsel Agency for Health Care Administration (Interoffice Mail)

Stuart Williams, General Counsel Agency for Health Care Administration (Interoffice Mail) Zainab Day, Medicaid Audit Services Agency for Health Care Administration (Interoffice Mail)

Shena Grantham, Chief Medicaid FFS Counsel (Interoffice Mail)

State of Florida, Division of Administrative Hearings The Desoto Building 1230 Apalachee Parkway Tallahassee, Florida 32399-3060 (Via U.S. Mail)

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CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing has been furnished to the above named addressees by the designated method of delivery on this the day of the designated method of delivery on this the day.

Richard J. Shoop, Esquire
Agency Clerk
State of Florida
Agency for Health Care Administration
2727 Mahan Drive, Building #3
Tallahassee, Florida 32308-5403
(850) 412-3671