STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION



STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION.

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Case No. 14-5336

v.

AHCA No. 2014006942 RENDITION NO.: AHCA- 15 - 0153 -S-OLG

LP PORT CHARLOTTE, LLC d/b/a SIGNATURE HEALTHCARE OF PORT CHARLOTTE.

Re	spondent.	

FINAL ORDER

Having reviewed the Administrative Complaint, 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 Respondent pursuant to Chapter 408, 1. Part II, Florida Statutes, and the applicable authorizing statutes and administrative code provisions.
- The Agency issued the attached Administrative Complaint and Election of Rights form to 2. the Respondent. (Ex. 1) The Election of Rights form advised of the right to an administrative hearing.
 - The parties have since entered into the attached Settlement Agreement. (Ex. 2) 3.

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

- The Settlement Agreement is adopted and incorporated by reference into this Final Order. The parties shall comply with the terms of the Settlement Agreement.
- The Respondent shall pay the Agency \$10,000.00 in administrative fines. 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 30 days of the Final Order. Overdue amounts are subject to statutory interest and may be referred to collections. In addition the Respondent shall pay the Agency \$6,000.00 as survey fee in accord with law. The checks are to be made payable to the "Agency for Health Care Administration" and contain the AHCA ten-digit case number and 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

3. Conditional licensure status is impand ending on July 28, 2014.	posed on the Respondent beginning on June 13, 2014
ORDERED at Tallahassee, Florida, on thi	s /b day of <u>uard</u> , 2015.
NOTICE OF RIGHT A party who is adversely affected by this Final instituted by filing one copy of a notice of appeal along with filing fee as prescribed by law, with where the Agency maintains its headquarters or v	lizabeth Dudek, Secretary Igeney for Health Care Administration TO JUDICIAL REVIEW Order is entitled to judicial review, which shall be with the Agency Clerk of AHCA, and a second copy, the District Court of Appeal in the appellate district where a party resides. Review of proceedings shall be e rules. The Notice of Appeal must be filed within 30
CERTIFICA	TE OF SERVICE
I CERTIFY that a true and correct cony persons by the method designated on this	of this Final Order was served on the below-named ay of
A 2 T	Aichard J. Shoop, Agency Clerk Agency for Health Care Administration 727 Mahan Drive, Bldg. #3, Mail Stop #3 Fallahassee, Florida 32308-5403 Felephone: (850) 412-3630
Jan Mills Facilities Intake Unit (Electronic Mail)	Finance & Accounting Revenue Management Unit (Electronic Mail)
Deborah E. Leoci Office of the General Counsel Agency for Health Care Administration (Electronic Mail)	Jonathan s. Grout, Esq., Attorney for Facility Goldsmith & Grout, P.A. PO Box 2011 Winter Park, Florida 32790 (U.S. Mail)
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