

STATE OF FLORIDA  
AGENCY FOR HEALTH CARE ADMINISTRATION

FILED  
AHCA  
AGENCY CLERK

2017 APR 17 P 3:41

STATE OF FLORIDA, AGENCY FOR  
HEALTH CARE ADMINISTRATION,

Petitioner,

vs.

TENET HEALTHSYSTEM HOSPITALS, INC.  
D/B/A WEST BOCA MEDICAL CENTER,

DOAH CASE NO.: 15-3120MPI

MPI CASE NO.: 2015-0002446

C.I. NO.: 11-2619-000

PROVIDER NO: 012024300

NPI NO: 1588697296

LICENSE NO.: 4283

RENDITION NO.: AHCA- 7 - 0277-S-MDO

Respondent.

**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. Based on the foregoing, this file is **CLOSED**.

DONE and ORDERED on this the 15<sup>th</sup> day of April, 2017, in Tallahassee,  
Florida.

  
JUSTIN M. SENIOR, SECRETARY  
Agency for Health Care Administration

**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.**

Copies furnished to:

Tenet Healthsystem Hospitals, Inc.  
4660 Communication Ave  
Boca Raton, FL 33431  
(U.S. Mail)

Joanne B. Erde, Esquire  
Duane Morris, LLP.  
200 South Biscayne Blvd., Suite 3400  
Miami, Florida 33131  
[jerde@duanemorris.com](mailto:jerde@duanemorris.com)  
(Electronic Mail)

Joseph M. Goldstein, Esquire  
Shutts & Bowen, LLP  
200 East Broward Blvd., Suite 2100  
Fort Lauderdale, FL 33301  
[jgoldstein@shutts.com](mailto:jgoldstein@shutts.com)  
(Electronic Mail)

Health Quality Assurance  
(Electronic Mail)

Kelly Bennett, Chief, MPI  
(Electronic Mail)

Bureau of Financial Services  
(Electronic Mail)

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that a true and correct copy of the foregoing has been furnished to the above named addressees by U.S. Mail or other designated method on this the 17<sup>th</sup> day of April, 2017.



Richard J. Shoop, Esquire  
Agency Clerk  
State of Florida  
Agency for Health Care Administration  
2727 Mahan Drive, MS #3  
Tallahassee, Florida 32308-5403  
(850) 412-3689/FAX (850) 921-0158