STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION



2016 JAN -8 P 12: 45

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

Petitioner, vs. SANDRA GOODMAN,	AHCA No. 2015006607 RENDITION NO.: AHCA-1(2 - ∞2) -8-OLC
Respondent.	/
<u>F</u>	INAL ORDER
THIS CAUSE came on for consider ("the Agency"), which finds and concludes a	eration before the Agency for Health Care Administration as follows:

- 1. The Agency issued the Respondent the attached Notice of Intent to Impose Fine (Ex. 1). The parties have since entered into the attached Settlement Agreement (Ex. 2), which is adopted and incorporated by reference.
 - 2. The Notice of Intent to Impose Fine is withdrawn.

ORDERED in Tallahassee, Florida, on this 8 day of January, 2016

Zlizabeth Dydek, Secretary

Agency for Health Care Administration

NOTICE OF RIGHT TO JUDICIAL REVIEW

A party that is adversely affected by this Final Order is entitled to seek 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

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

Facilities Intake Unit Agency for Health Care Administration (Electronic Mail)	Warren J. Bird, Assistant General Counsel Office of the General Counsel Agency for Health Care Administration (Electronic Mail)
	Sandra D. Goodman, Administrator Sandra Goodman 4050 SW 147 th PI Ocala, Florida 34473 (U.S. Mail)



RECEIVED
FACILITY INTAKE UNIT

JUL 0 7 2015

Agency for Health Care Administration 2015006607

CERTIFIED

RICK SCOTT GOVERNOR

ELIZABETH DUDEK SECRETARY

June 24, 2015

File Number: 52963125 License Number: 6906721

Provider Type: Adult Family Care Home

Sandra D Goodman, Administrator Goodman, Sandra 4050 SW 147th Pl Ocala, FL 34473

RE: Complaint Number 2015006607, 4050 Sw 147th Pl, Ocala, FL 34473

Notice of Intent To Impose Fine

Pursuant to Section 408.813(3), Florida Statutes, an administrative fine of \$250.00 is being imposed on the provider based upon the failure to utilize an online database approved by the Agency. Pursuant to Section 408.821(4), Florida Statutes, licensees providing residential or inpatient services must utilize an online database approved by the Agency to report information to the Agency regarding the provider's emergency status, planning, or operations. The Agency provided prior notice to providers regarding this requirement as well as notice of administrative fines. The provider failed to timely comply by registering a primary user on the EMResource System. Site Address: https://emresource.emsystem.com/login.jsp

TO PAY NOW, PAYMENT SHOULD BE MADE WITHIN 21 DAYS AND MAILED WITH A COPY OF THE ENCLOSED PAYMENT STATEMENT:

Agency for Health Care Administration 2727 Mahan Drive, MS#61 Tallahassee, Florida 32308

EXPLANATION OF RIGHTS

Pursuant to Section 120.569, F.S., you have the right to request an administrative hearing. In order to obtain a formal proceeding before the Division of Administrative Hearings under Section 120.57(1), F.S., your request for an administrative hearing must conform to the requirements in Section 28-106.2015, Florida Administrative Code (F.A.C), and must state the material facts you dispute.

SEE ATTACHED ELECTION AND EXPLANATION OF RIGHTS FORMS.

If you have any questions or need further assistance, please call 850-412-4402.

Laura MacLafferty, Bureau Chief Bureau of Health Facility Regulation

Agency for Health Care Administration

EXHIBIT 1



STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

Petitioner,

VS.

AHCA No. 2015006607

SANDRA GOODMAN,

Respo	ndent.
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SETTLEMENT AGREEMENT

The Petitioner, State of Florida, Agency for Health Care Administration (hereinafter "the Agency"), through its undersigned representatives, and the Respondent, Goodman Sandra (hereinafter "the Respondent"), pursuant to Section 120.57(4), Florida Statutes, each individually, a "party," collectively as "parties," enter into this Settlement Agreement ("Agreement") and agree as follows:

WHEREAS, the Respondent is an adult family care home facility licensed pursuant to Chapters 429, Part II, and 408, Part II, Florida Statutes, and Chapter 58A-14, Florida Administrative Code; and

WHEREAS, the Agency has jurisdiction by virtue of being the regulatory and licensing authority over the Respondent; and

WHEREAS, the Agency served the Respondent with a Notice of Intent to Impose Fine ("Notice if Intent") notifying the party of its intent to impose a fine; and

WHEREAS, the parties have agreed that a fair, efficient, and cost effective resolution of this dispute would avoid the expenditure of substantial sums to litigate the dispute; and

WHEREAS, the parties stipulate to the adequacy of considerations exchanged; and WHEREAS, the parties have negotiated in good faith and agreed that the best interest of

all the parties will be served by a settlement of this proceeding; and

NOW THEREFORE, in consideration of the mutual promises and recitals herein, the parties intending to be legally bound, agree as follows:

- 1. All recitals are true and correct and are expressly incorporated herein.
- 2. Both parties agree that the "whereas" clauses incorporated herein are binding findings of the parties.
- 3. Upon full execution of this Agreement, the Respondent agrees to a withdrawal of any request for administrative proceeding it may have filed; agrees to waive any and all proceedings and appeals under Chapter 120, Florida Statutes to which it may be entitled including, but not limited to, an informal proceeding under Subsection 120.57(2), a formal proceeding under Subsection 120.57(1), appeals under Section 120.68, Florida Statutes; and declaratory and all writs of relief in any court or quasi-court (DOAH) of competent jurisdiction; and further agrees to waive compliance with the form of the Final Order (findings of fact and conclusions of law) to which it may be entitled as to this matter. Provided, however, that no agreement herein, shall be deemed a waiver by either party of its right to judicial enforcement of this Agreement.
- 4. Upon full execution of this Agreement, the parties agree that the Notice of Intent to Impose Fine directed to the Respondent dated June 24, 2015, shall be deemed withdrawn by this Agreement.
- 5. Venue for any action brought to interpret, challenge or enforce the terms of this Agreement or the Final Order entered pursuant hereto shall lie solely in the Circuit Court in Leon County, Florida.
- 6. Upon full execution of this Agreement, the Agency shall enter a Final Order adopting and incorporating the terms of this Agreement and closing the above-styled case(s).

- 7. Each party shall bear its own costs and attorney's fees.
- 8. This Agreement shall become effective on the date upon which it is fully executed by all the parties.
- 9. The Respondent for itself and for its related or resulting organizations, its successors or transferees, attorneys, heirs, and executors or administrators, does hereby discharge the Agency and its agents, representatives, and attorneys of all claims, demands, actions, causes of action, suits, damages, losses, and expenses, of any and every nature whatsoever, arising out of or in any way related to the Notice of Intent referenced herein, including, but not limited to, any claims that were or may be asserted in any federal or state court or administrative forum, including claims arising out of the subject of this Agreement, by or on behalf of the Respondent or related or resulting organizations.
- 10. This Agreement is binding upon all parties herein and those identified in the aforementioned paragraph of this Agreement.
- 11. In the event that the Respondent is or was a Medicaid provider, this settlement does not prevent the Agency from seeking Medicaid overpayments or from imposing any sanctions pursuant to Rule 59G-9.070, Florida Administrative Code.
- 12. The undersigned have read and understand this Agreement and have authority to bind their respective principals. The Respondent has the capacity to execute this Agreement. The Respondent understands that it has the right to consult with counsel and has knowingly and freely entered into this Agreement without exercising its right to consult with counsel. The Respondent understands that counsel for the Agency represents solely the Agency and that Agency counsel has not provided legal advice to or influenced the Respondent in its decision to enter into this Agreement.
 - 13. This Agreement contains the entire understandings and agreements of the parties.

- 14. This Agreement supersedes any prior oral or written agreements between the parties. This Agreement may not be amended except in writing. Any attempted assignment of this Agreement shall be void.
 - 15. All parties agree that a facsimile signature suffices for an original signature.
- 16. The following representatives hereby acknowledge that they are duly authorized to enter into this Agreement.

Molly McKinstry, Deputy Secretary

Health Quality Assurance

Agency for Health Care Administration

2727 Mahan Drive

Tallahassee, Florida 32308

DATED: _____/8/16

Stuart F. Williams General Counsel

Agency for Health Care Administration 2727 Mahan Drive, Mail Stop #3

Tallahassee, Florida 32308

DATED: $\frac{12}{2}$ 9/15

Sandra D. Goodman, Administrator

Goodman Sandra 4050 SW 147th PI Ocala, Florida 34473

DATED: 12/1/2015

Warren A. Bird

Assistant General Counsel

Agency for Nearth Care Administration

2727 Mahan Drive, Mail Stop #3

Tallahassee, Florida 32308

DATED: 12-2-2013