STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION



2016 MAY -6 P 2: 57

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

Petitioner,

DOAH No. 16-0992

VS.

AHCA No. 2015008975

RENDITION NO.: AHCA-16 -0306 -S-OLC

3920 ROSEWOOD WAY OPERATIONS, LLC, d/b/a ROSEWOOD HEALTH AND REHABILITATION CENTER,

Respondent.	/

FINAL ORDER

Having reviewed the Administrative Complaint, and all other matters of record, the Agency for Health Care Administration finds and concludes as follows:

- 1. The Agency issued the attached Administrative Complaint and Election of Rights form to the Respondent. (Ex. 1) The Election of Rights form advised of the right to an administrative hearing.
 - 2. The parties have since entered into the attached Settlement Agreement. (Ex. 2)

Based upon the foregoing, it is ORDERED:

- 3. The Settlement Agreement is adopted and incorporated by reference into this Final Order. The parties shall comply with the terms of the Settlement Agreement.
- 4. The Respondent shall pay the Agency \$5,000.00. 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. A check made payable to the "Agency for Health Care Administration" and containing the AHCA ten-digit case number should be sent to:

Central Intake Unit Agency for Health Care Administration 2727 Mahan Drive, MS 61 Tallahassee, Florida 32308

5. Conditional licensure status is imposed on the Respondent beginning on June 8, 2015 and ending on July 11, 2015.

ORDERED at Tallahassee, Florida, on this	6 day of May , 2016.
	izabeth Dunek, Secretary lency for Health Care Administration
NOTICE OF RIGHT	TO JUDICIAL REVIEW
instituted by filing one copy of a notice of appeal along with filing fee as prescribed by law, with	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 there a party resides. Review of proceedings shall be e rules. The Notice of Appeal must be filed within 30
CERTIFICAT	TE OF SERVICE
I CERTIFY that a true and correct copy persons by the method designated on this day	of this Final Order was served on the below-named ay of
A 2 T	Agency Clerk Agency for Health Care Administration 727 Mahan Drive, Bldg. #3, Mail Stop #3 Fallahassee, Florida 32308-5403 Felephone: (850) 412-3630
Facilities Intake Unit Agency for Health Care Administration (Electronic Mail)	Central Intake Unit Agency for Health Care Administration (Electronic Mail)
John E Bradley, Senior Attorney Office of the General Counsel Agency for Health Care Administration (Electronic Mail)	George Huffman, Esquire Consulate Health Care 5102 W. Laurel, Suite 700 Tampa, Florida 33607 (U.S. Mail)

Honorable Linzie F. Bogan Administrative Law Judge Division of Administrative Hearings

(Electronic Filing)