STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION



2017 APR 17 P 3: 41

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION.

Petitioner,

DOAH CASE NO.: 16-3544MPI

C.I. NO.: 14-0352-000

MPI CASE NO.: 2015-0002042 PROVIDER ID NO.: 010214800

NPI NO.: 1265469605 LICENSE NO.:4207

RENDITION NO.: AHCA- 17 -0 274-S-MDO

vs.

FMC HOSPITAL LTD. D/B/A FLORIDA MEDICAL CENTER, A CAMPUS OF NORTH SHORE MEDICAL CENTER, INC.

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 day of April, 2017, in Tallahassee, Florida.

ASTIN M. SEMOR, SECRETARY Agency for Health Care Administration

Agency for Health Care Administration vs. FMC HOSPITAL, LTD. D/B/A FLORIDA MEDICAL CENTER, A CAMPUS OF NORTH SHORE MEDICAL CENTER, INC.

(C.I. No.: 14-0352-000 MPI CASE NO.: 2015-0002042) Final Order 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.

Copies furnished to:

FMC Hospital, LTD
DBA Florida Medical Center, A Campus of
North Shore Medical Center, Inc.
Attn: Oksana Baczyk, Hospital Compliance
and Privacy Officer
5000 West Oakland Park Blvd.
Lauderdale Lakes, Fl. 33313-1503
(U.S. Mail)

Michael J. Glazer Ausley/McMullen 123 S. Calhoun Street Tallahassee, FL 32301 850-425-5474 mglazer@ausley.com (Electronic Mail)

Kelly Bennett Agency for Health Care Administration Chief of Medicaid Program Integrity (Electronic Mail) Ephraim D. Livingston, Esquire Agency for Health Care Administration Ephraim.Livingston.@ahca.myflorida.com (Electronic Mail)

Bureau of Financial Services Agency for Health Care Administration (Electronic Mail)

Health Quality Assurance Agency for Health Care Administration (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

day of

_, 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