

STATE OF FLORIDA  
AGENCY FOR HEALTH CARE ADMINISTRATION

FILED  
AHCA  
AGENCY CLERK

STATE OF FLORIDA, AGENCY FOR  
HEALTH CARE ADMINISTRATION,

2016 DEC -1 A 9:06

Petitioner,

DOAH CASE NO.: 16-3546MPI

MPI CASE ID: 2015-0001968

vs.

C.I. NO.: 13-0105-000

PROVIDER NO.: 010110900

LEE MEMORIAL HEALTH SYSTEM,  
d/b/a LEE MEMORIAL HOSPITAL,

NPI NO.: 1558302570

LICENSE NO.: 4186

Respondent.

RENDITION NO.: AHCA- 16 - 0805 -S-MDO

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 23<sup>rd</sup> day of November, 2016, in Tallahassee, Florida.



JUSTIN M. SENIOR, INTERIM 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:

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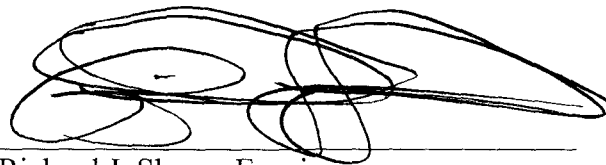
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**CERTIFICATE OF SERVICE**

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 1st day of December, 2016.



Richard J. Shoop, Esquire  
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