STATE OF FLORIDA AGENCY FOR HEALTH CARE ADMINISTRATION

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

Petitioner,

VS.

ADVENTIST HEALTH SYS. /SUNBELT, INC. DBA FLORIDA HOSPITAL ORLANDO, *

Respondent.

FINAL ORDER

THIS CAUSE comes before the AGENCY FOR HEALTH CARE ADMINISTRATION (the "Agency") for entry of a Final Order.

1. This matter concerns a Final Audit Report ("FAR") dated January 22, 2015 (Exhibit "A"),

notifying the Respondent, ADVENTIST HEALTH SYS./SUNBELT, INC. DBA FLORIDA HOSPITAL ORLANDO * (PROVIDER), which alleged that AHCA overpaid Respondent for certain services rendered to Medicaid eligible undocumented aliens. (FAR attached "Exhibit A")

2. On February 11, 2015, PROVIDER filed a Petition for Formal Hearing.

3. On August 16, 2017, a Sue (sic) Sponte Order Closing File and Relinquishing Jurisdiction was issued by the Division of Administrative Hearings (DOAH) pending the litigation of *Lee Memorial Health System Gulf Coast Medical Center v. Agency for Health Care Administration*, DOAH Case No. 15-3876, First District Court of Appeal Case No. 1D16-1969 ("*Gulf Coast*"), *AHCA v. Lee Memorial Health System d/b/a Lee Memorial Hospital, Case No. 14-4171MPI & 15-3271MPI, First*

Agency for Health Care Administration vs. Adventist Health Sys./Sunbelt, Inc., dba Florida Hospital Orlando * (DOAH Case No.: 16-4410MPI MPI Case No.: 2015-0001957 C.I. No.: 13-0068-000 Provider No.: 010129001 NPI No.: 1306938071 License No.: 4369) Final Order Page 1 of 4

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 DOAH CASE NO.: 16-4410MPI

 MPI CASE NO.: 2015-0001957

 C.I. NO.: 13-0068-000

 PROVIDER NO.: 010129001

 NPI NO.: 1306938071

 LICENSE NO.: 4369

DCA No. 1D16-3975 (Lee Memorial) and AHCA v. Cape Memorial Hospital, Inc. d/b/a Cape Coral Hospital, Case No. 14-3606MPI, First DCA No. 1D16-5310 (Cape Memorial).

4. On February 27, 2019, the First District Court of Appeal issued its Opinion in the cases mentioned above.

5. On January 20, 2020, the Agency filed a Notice of Voluntary Dismissal (Exhibit "B") of the case.

It is therefore **ORDERED** and **ADJUDGED**:

1. The FAR dated January 22, 2015, is hereby vacated.

2. The Agency agrees that Respondent is eligible for and may seek a refund of all amounts previously recouped by the Agency with regard to the FAR that is the subject of this matter. The total amount recouped by the Agency to date is \$1,010,614.36. Within 60 days of the Final Order, Financial Services shall prepare the refund application and mail it to the Provider. Once an originally signed, complete, and correct application is received at the Agency, Mail Stop #14, Financial Services shall process the application for refund.

Based on the foregoing, this file is CLOSED.

DONE and ORDERED on this the 28th day of April 2020, in Tallahassee, Leon

County, Florida.

MARY COMAYHEW, SECREPARY Agency for Health Care Administration

*Current provider DBA is Florida Hospital.

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:

Adventist Health Sys./Sunbelt, Inc. DBA Florida Hospital Orlando * 900 Winderley Place, Suite 2100 Maitland, FL 32751-4191 (U.S. Mail)

Division of Health Quality Assurance Bureau of Health Facility Regulation <u>BHFR@ahca.myflorida.com</u> (Electronic Mail)

Division of Health Quality Assurance Bureau of Central Services <u>CSMU-86@ahca.myflorida.com</u> (Electronic Mail)

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Shena L. Grantham, Esquire MAL & MPI Chief Counsel (Electronic Mail)

Stefan R. Grow, Esquire General Counsel (Electronic Mail)

Joseph G. Hern, Jr., Esquire Medicaid Admin. Litigation Counsel (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 \overline{TT} day of \underline{ADC} , 2020.

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