

STATE OF FLORIDA
AGENCY FOR HEALTH CARE ADMINISTRATION

FILED
AHCA
AGENCY CLERK

2018 SEP - 7 P 3: 00

FLORIDA MHS, INC., d/b/a
MAGELLAN COMPLETE CARE,

Petitioner,

vs.

STATE OF FLORIDA, AGENCY FOR
HEALTH CARE ADMINISTRATION,

Respondent.

AHCA ITN NOs: 001-17/18; 002-17/18
003-17/18; 004-17/18
005-17/18; 006-17/18
007-17/18; 008-17/18
009-17/18; 010-17/18
011-17/18


RENDITION NO.: AHCA- 18 - 611 -S-BID

DOAH NOs. 18-3516BID; 18-3517BID
18-3518BID; 18-3519BID
18-3520BID; 18-3521BID
18-3523BID; 18-3528BID
18-3530BID; 18-3531BID
18-3534BID

FINAL ORDER

THE PARTIES resolved all disputed issues and executed a Settlement Agreement. On September 4, 2018, the Petitioner voluntarily dismissed its protests. 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 7th day of September 2018, in Tallahassee, Florida.


For: JUSTIN M. SENIOR, 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 THE 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.

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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 Email on September 7, 2018.



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