

FILED  
AHCA  
AGENCY CLERK

STATE OF FLORIDA  
AGENCY FOR HEALTH CARE ADMINISTRATION 2019 APR 19 P 3:47

STATE OF FLORIDA, AGENCY FOR  
HEALTH CARE ADMINISTRATION,

Petitioner,

Case No. 2018009127

License No. 11423

DOAH No. 18-6680

v.

Facility Type: Assisted Living

RENDITION NO.: AHCA-19-0372-S-OLC

WHISPERING PINES HOME CARE, INC.,

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 parties have since entered into the attached Settlement Agreement, which is adopted and incorporated by reference into this Final Order. (Ex. 2)

2. The Respondent shall pay the Agency \$6,750.00. 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 90 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, Mail Stop 61  
Tallahassee, Florida 32308

**ORDERED** at Tallahassee, Florida, on this 19 day of April, 2019.



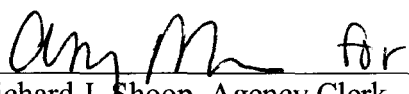
Mary C. Mayhew, Secretary  
Agency for Health Care Administration

**NOTICE OF RIGHT TO JUDICIAL REVIEW**

A party who is adversely affected by this Final Order is entitled to 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 of 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.

**CERTIFICATE OF SERVICE**

I CERTIFY that a true and correct copy of this Final Order was served on the below-named persons by the method designated on this 19 day of April, 2019.

  
\_\_\_\_\_  
Richard J. Shoop, Agency Clerk  
Agency for Health Care Administration  
2727 Mahan Drive, Mail Stop 3  
Tallahassee, Florida 32308  
Telephone: (850) 412-3630

Facilities Intake Unit Agency for Health Care Administration (Electronic Mail)	Central Intake Unit Agency for Health Care Administration (Electronic Mail)
Lourdes Naranjo, Senior Attorney Office of the General Counsel Agency for Health Care Administration (Electronic Mail)	Odalys Gonzalez Whispering Pines Home Care, Inc. 8830 SW 196 <sup>th</sup> Drive Cutler Bay, Florida 33157 (U.S. Mail)