

Health Care

Our health care practice includes many areas of concern to health care providers. As a result, our clients include hospitals, the North Carolina Hospital Association, physicians, including physician trade associations, assisted living facilities, home health care agencies, hospices, managed care companies, nursing homes, nuclear pharmacists, and group homes for the mentally impaired.

We represent health care providers on matters which include regulatory compliance, medical staff issues, patient-related issues, contracting and joint ventures, managed care, governmental lobbying, and the drafting of health care legislation. In the regulatory area, we represent providers in all areas related to Certificates of Need (CON), such as providing advice on CON law requirements, reviewing CON applications, representing providers before the State Health Coordinating Council, the CON Section, and other related regulatory bodies, and representing providers in CON litigation.

We also advise providers concerning compliance with the Medicare fraud and abuse or anti-kickback laws and the Stark self-referral laws, as compliance with those laws must be considered in virtually every health care transaction. Our representation in this area includes assisting our health care clients in developing effective compliance programs. We likewise advise clients on licensure matters and the numerous other regulatory schemes to which they are subject.

In the area of hospital-physician relations, we prepare and review physician contracts (including recruitment agreements), practice acquisition agreements, joint venture agreements, and medical staff bylaws. We also assist with medical staff, credentialing, and peer review matters.

In the area of patient issues, we advise hospitals concerning risk management, patient consent, and medical record issues, among others.

Finally, our practice includes governmental lobbying efforts for health care providers, and the review and drafting of health care legislation and regulation. To that end, during the last few years, we have, for example,

- Convinced the North Carolina Department of Health and Human Services to include a "prompt pay" provision in its contracts with county mental health programs and drafted the prompt pay provision adopted by the department;
- Drafted a statute making "silent PPOs" an unfair trade practice;

- Drafted the Medical Care Data Act and related regulations, which privatized the statewide collection of data from hospitals and ambulatory surgical centers;
- Filed a lawsuit in federal court that was instrumental in causing Medicare to issue a national fee schedule for ambulance suppliers;
- Lobbied successfully North Carolina's Governor to amend the 1997 State Medical Facilities Plan and obtained a decision from the North Carolina Supreme Court upholding and affirming the Governor's power to amend the 1997 Plan;
- Obtained exemptions for providers from the North Carolina moratorium on assisted living facilities;
- Persuaded North Carolina's Governor to include a need for an additional fixed PET scanner in the 2003 State Medical Facilities Plan (SMFP);
- Persuaded the Medical Care Commission to make substantial revisions to proposed rules for assisted living facilities;
- Persuaded the North Carolina Rules Review Commission to object to, and prevent the adoption of, certain regulations concerning open heart surgery services;
- Persuaded the State Health Coordinating Council not to deregulate ambulatory surgical centers performing endoscopy; and,
- Persuaded the State Health Coordinating Council to find a need for mobile PET scanners in the state.

Publications & Alerts

- Article: Could Your Law Firm Unknowingly Be a HIPAA Business Associate?