Publications Catalog 2020–2021

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AHLA has grown to include nearly 13,000 members and over 25,000 engaged health law professionals. From attorneys to compliance professionals, in-house counsel to finance and privacy officers, health care consultants to regulators, all health law professionals interested in health care legal and regulatory issues turn to AHLA to stay up to date on the changing health care legal environment.

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Excellence in health care requires excellence in health law. As the nation’s largest, nonpartisan, educational nonprofit devoted to legal issues in the health care field, we maintain excellence in health law by educating and connecting the health law community. Whether it’s just-in-time education or publishing trusted resources, we help solve the challenges you face in today’s ever-changing health care environment.

With over 13,000 members and more than 25,000 engaged health law professionals, AHLA has deep expertise through the work of our generous volunteers—practitioners who represent clients and organizations across the entire health care industry spectrum. We particularly want to thank the authors of the publications listed in this catalog as these resources will benefit anyone who advises physicians, hospitals, health systems, specialty providers, payers, life sciences companies, and many other health care stakeholders. If you have an interest in health law, you have a home in AHLA.

This catalog offers over 30 titles addressing both fundamental and emerging issues facing the health law community today, complementing AHLA’s full offering of in-person programs, educational webinars, and on-demand resources. This not only allows you to build a foundation of knowledge in any given area of health law, but it further helps you to become an expert in your field. If you have a question in health law, turn to AHLA for the answer.

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David S. Cade
Executive Vice President/Chief Executive Officer
American Health Law Association

P.S. Did you know that members get a discount on all AHLA publications at the LexisNexis store, as well as at our in-person programs, educational webinars, and more? Join today at www.americanhealthlaw.org/join.
AHLA’s Federal Health Care Laws & Regulations
2019 – 2020 EDITION (Supplement Available Fall 2020)
William W. Horton, Editor
W. Scott Hardy, Dee Anna Hays, John A. Meyers, Daniel F. Murphy, Serra J. Schianger, Paul W. Shaw,
Donald B. Stuart, Kelly A. Thompson, Judith A Waltz, Editorial Advisory Board

This collection incorporates not only the fundamental statutes and regulations every health care practitioner consults again and again, but also annual updates to federal authority:

- Key provisions of the SUPPORT for Patients and Communities Act, Congress’s sweeping legislation in response to the opioid epidemic
- The Eliminating Kickbacks in Recovery Act (EKRA), the all-payer kickback law covering remuneration in connection with referrals to a recovery home, clinical treatment facility, or laboratory
- Rules on classification as a sole community hospital or Medicare dependent small rural hospital
- Changes to the Merit-Based Incentive Payment System (MPS) and Alternative Payment Model Incentive (APM) programs
- Health insurance reform in the group and individual markets
- Changes effected by the Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2019, as well as the Medicaid Services Investment and Accountability Act of 2019
- Regulatory changes for Medicare Advantage and Medicare Part D
- Final Affordable Care Act (ACA) payment rule for the health insurance marketplaces

The 2020 Supplement will include more recent landmark changes, including final rules on interoperability and data sharing, price transparency, federal legislation in response to COVID-19, and more.

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4 volumes, softbound with eBook

**$449** Member | ISBN 9781522186724 | **$549** Non-member | ISBN 9781522186731
AHLA’s Guide to Health Care Legal Forms, Agreements, and Policies
THIRD EDITION

This cornerstone of your health law library is designed to help you work more efficiently and accurately by bringing together hundreds of documents, checklists, and policies in one place. The revised Guide represents the cumulative work of scores of health care attorneys and providers who share their real-time, practical experience with colleagues. With the wealth of sample tools contained in the Guide, users will have a go-to source for readily extracting and adapting material needed in their day-to-day work.

Now with three volumes of material, the Guide offers an unprecedented collection spanning: health care transactions, corporate compliance, facility operations, fraud and abuse, governance, health information, contracting, labor and employment, physician practices, reimbursement, and more.

New in the Third Edition:
› Content has been divided into three convenient volumes for easier handling
› Material is organized into 15 chapters with clearly defined subsections for easier access to material
› More than 90 new resources have been added—AHLA expanded its reach by reviewing and selecting sample forms and policies from outside sources, including professional associations, health care providers, and legal experts

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› Facility-Based All Hazards Risk Assessment Tool
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› Retaining Outside Counsel Checklist
› Tax-Exempt Financing Checklist
When the authors of this book volunteered to survey a key challenge in U.S. health law, a novel coronavirus had not yet caused a worldwide outbreak of COVID-19, highlighting the challenges affecting the nation’s health care delivery system. At the federal, state, and local levels, emergency action was taken in an effort to help ease the barriers and leverage the opportunities the authors examine in these very pages.

The expert analysis in this edition of *Health Law Watch* will inform readers’ next steps forward, as the health law community seeks lasting solutions to the critical issues explored herein.

**Issue 1.** Proposed Changes to Stark and Anti-Kickback Rules May Spur Care Coordination  
**Issue 2.** Protecting Patients from Surprise Medical Bills and the Role of Network Adequacy  
**Issue 3.** Consolidation in Health Care: Antitrust Enforcement Trends, Price Transparency, and Challenges in Pharma  
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**Issue 10.** Data Interoperability and Information Blocking

374 pages, softbound, updated annually, Pub. #33741, © 2020  
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Fundamentals of Health Law
SEVENTH EDITION

This Seventh Edition of Fundamentals of Health Law is a thorough resource for individuals who need to understand not only fundamental health law requirements, but also the complex web of legal relationships among patients, providers, suppliers, payers, technology vendors, researchers, and others.

This edition includes a chapter on data sharing. It also incorporates analysis of high-impact changes in the health care industry and how they are regulated:

- Increased industry integration
- Physician employment
- The 21st Century Cures Act
- Health Insurance Portability and Accountability Act (HIPAA) guidance
- Fraud enforcement
- Evolution of payment schemes, including the Medicare Access and CHIP Reauthorization Act (MACRA)
- Legislative and regulatory changes, United States Supreme Court decisions, and more

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BEST VALUE! Print purchase price also includes the eBook.

Enterprise Risk Management Handbook for Health Care Entities
THIRD EDITION
Co-published with ASHRM, the American Society for Healthcare Risk Management
Sheila Hagg-Rickert, Editor in Chief
Roberta L. Carroll, Teresa L. Kielhorn, Erin L. Muellenberg, Fay A. Rozovsky, Editors
with numerous Contributing Authors

Once the province of financial institutions, manufacturing, and government entities, enterprise risk management (ERM) has taken hold in the health care industry, and it is easy to understand why. To cost-effectively deliver quality services, the entire entity must share the risk and responsibility for the health of the operating environment, and ERM is a means to this end.

The authors delineate how to manage risk in a variety of settings, including:

- Contract management
- Health information exchanges
- Consent to treatment
- Medical identity theft
- Human research
- Environmental compliance
- Peer review and credentialing and electronic health records
- Retail health clinics

Available in print and eBook formats
592 pages, softbound, Pub. #27997, © 2017
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CALL 800.533.1637 | GO TO store.lexisnexis.com/ahla
The latest edition of the *Health Care Compliance Legal Issues Manual* continues to be the authoritative source for every health care stakeholder. Reorganized, expanded, and updated, this book provides strategies for addressing the full scope of legal issues critical to health care compliance. Users will want to consult this instructional text for answers to these questions and more:

- What constitutes a compliance program?
- How do I conduct an internal investigation?
- Do I know the audit basics?
- What must I consider prior to deciding on repayments and disclosures?

With contributions from more than 20 esteemed authors and editors writing in their respective areas of expertise, the authors provide practical guidance for complying with requirements, as well as coverage of emerging and unsettled areas of compliance risk. The Fifth Edition includes a glossary of key compliance terms and several new chapters.

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False Claims Act & the Health Care Industry: Counseling & Litigation
THIRD EDITION WITH 2020 SUPPLEMENT

Robert S. Salcido, Author

False Claims Act & the Health Care Industry is a one-stop source for legislative and case law developments covering the gamut of potential false claims litigation, across all jurisdictions. This publication provides analysis of key arguments, including:

† Defenses that the defendant’s claim is not “false”
† Defenses that the defendant did not “know” that the claim or statement is “false”
† Defenses that the defendant’s knowingly false claims or statements are not “material” to the government’s determination to pay
† The status of actions where the relator’s action repeats public information

The 2020 supplement includes coverage of:

† Relator’s ability to pursue new claims and defendants after government intervention when the government declines to pursue the relator’s additional claims
† Plaintiff’s ability to predicate an FCA action upon subregulatory guidance in light of supervening Supreme Court precedent
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If you already own the Third Edition, call for details on how to order the supplement.
The Stark Law: Comprehensive Analysis + Practical Guide
SIXTH EDITION
Charles B. Oppenheim, Benjamin A. Durie, Amy M. Joseph, Authors

More than a summary of the law, this edition of an essential monograph offers in-depth critical analysis of this risky, complex area, as well as a wealth of practice pointers and advice for advising clients. Written by leading experts in the interpretation and application of Stark Law, the latest edition analyzes the following topics:

- The definition of entity
- Timeshare agreements
- Joint marketing
- “Stand in the Shoes” when contracting with a group
- Developments on the signature requirement
- Revisiting fair market value over the course of a term
- Bankruptcy trustees and Stark Law
- Split/shared evaluation and management services
- Valuing goodwill in physician practice acquisitions
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Ask us about the supplement to the Sixth Edition!

Available in print and eBook formats
246 pages, softbound, Pub. #27010, © 2019
$169 Member | ISBN 9781522170310  | $164 Member | eBook, eISBN 9781522170334
Fraud and Abuse Investigations Handbook for the Health Care Industry
FIRST EDITION WITH CD-ROM
Robert A. Griffith, Paul W. Shaw, Authors

Understanding the powers, procedures, and remedies available to the government during a health care fraud and abuse investigation, and acquiring a basic understanding of the issues and practical steps to employ during an audit or investigation are keys to surviving the investigation and achieving a favorable outcome.

This Handbook is designed to provide attorneys as well as health care administrators, executives, and medical practice directors and managers with a broad overview of health care fraud investigations. The authors’ discussion is supplemented with an expansive set of sample government documents, including subpoenas and search warrants, as well as helpful letters and memoranda generated by experienced health care fraud and abuse defense attorneys. Learn what to expect and how to respond with coverage of:

- Requests to examine books and records
- Interviews of employees by the OIG or the FBI
- The power of HIPAA administrative subpoenas
- Steps that should be taken in responding to the government’s request
- Dealing with on-site demands for records and access
- Internal audits and investigations
- Voluntary disclosures

Available in print and eBook formats
774 pages, softbound with CD-ROM, Pub. #28263, © 2014
$170 Member | ISBN 9780769865720 | $165 Member | eBook, eISBN 9780769865652

Best Practices Handbook for Advising Clients on Fraud and Abuse Issues
FIRST EDITION
Paul W. Shaw Editor in Chief

This publication is a highly usable guide developed by health lawyers with extensive and diverse experience who lend a practical approach to the complex representation issues that permeate this area. Every health care attorney must consider and address potential fraud and abuse concerns in almost every transaction contemplated by a health care client.

From proactively managing risk, to disclosure and resolving disputes, you will have thorough guidance that spans the most frequently encountered areas and attendant issues. Timesaving sample forms and agreements are included throughout the work, along with guidance for completing the documentation.

Whether you are a general health care attorney or a fraud and abuse specialist, as you provide counsel in this complex and dynamic area, you will benefit from an understanding of:

- Ethical concerns when counseling in the gray areas
- Responding to problematic conduct
- Privilege protection in fraud and abuse matters, including distinguishing between legal and business functions
- Providing a “fraud and abuse” opinion of counsel, the scope of the opinion, and internal and external reviews
- The attorney’s role in conducting internal compliance audits and investigation, including developing an investigation plan
- Self disclosure and voluntary disclosure, risks and benefits
- Gathering documents in response to government demands, subpoenas, search warrants, and requests for electronic files
- Preparing employees for government contact, including communicating interview strategies and rules of professional conduct
- Resolving disputes with the government, including interacting with federal and state agencies, dealing with whistle blowers, and addressing collateral damage

Available in print and eBook formats
225 pages, softbound, Pub. #33788, © 2018
$149 Member | ISBN 9781522140863 | $144 Member | eBook, eISBN 9781522140887
Health care transactions pose unique and complex legal questions arising from intense federal and state regulation and enforcement. This first edition Manual is the ideal guide for gaining an understanding of the legal landscape, and for managing the risks involved in structuring health care deals.

What makes sense in the business world does not always make sense in the health care world, and this publication is your key for knowing the difference and avoiding potential pitfalls. The Manual will help you understand nuances such as:

- When seemingly straightforward business terms can veer toward health care fraud and abuse
- How health care organization and/or management structure can impact the deal
- The need to comply with both non-disclosure terms and federal and state privacy laws when conducting due diligence
- How increased collaboration between health care entities may give raise to antitrust issues
- How tax-exempt status may be impacted in the course of a deal between exempt and non-exempt entities
- The need to consider state and federal environmental implications as they relate to radioactive materials used in patient care

With contributions from more than a dozen attorney practitioners, the Manual provides invaluable practical guidance covering everything from the transactional basics to deep-dive discussions for negotiating complicated deals. The book also contains more than 20 exhibits, ranging from a Sample Preliminary Due Diligence Request to a Sample Closing Checklist.

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Health Care Finance: A Primer
THIRD EDITION
Nathan F. Coco, Deborah Gordon, John P. Hammond, Patrick J. Martinez, Gary B. Rosenbaum, Authors

This is your ideal starting place for a full understanding of health care investment options and their potential implications. Now in its Third Edition, this guide addresses all the basics, from a discussion of the capital needs of various types of health care entities to unique financial arrangements and the attending documents that are integral to them. In addition, it includes various types of loans and sample representations and warranties for life sciences companies and health care facilities. The guide provides thorough coverage of:

› The critical importance of finance to the future of health care
› The effect of health care reform and consolidation
› Legal and economic issues
› Various types of health care providers and their need for capital

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NEW EDITION

Corporate Practice of Medicine: A Fifty State Survey
SECOND EDITION

Andrew G. Jack, Glenn P. Prives, Jed A. Roher Joel C. Rush, Editors

The corporate practice of medicine (CPOM) doctrine seeks to keep non-physician corporation owners from interfering with a physician’s professional judgment. It prohibits corporations that are not owned or controlled by physicians from employing physicians to practice medicine and charge for those professional services. CPOM application is far from simple, and adoption and enforcement vary by state. States adopt various models—with exceptions—and others eliminate the prohibition completely, while some states have CPOM prohibitions that are not enforced.

In the latest edition of this popular guide, the authors have expanded coverage to include an even broader range of health care professionals. You will find the latest information on practice restrictions by state as they relate to: behavioral health providers, chiropractors, optometrists, and more. CPOM researchers typically need to review a tangled web of statutes, regulations, case law, and attorney general or agency opinions to gain useful insight. The authors have provided a time-saving roadmap to help you:

› Learn which model of the doctrine a specific state follows
› Discover sources to consult for more detail
› Explore related issues like fee splitting and the unlicensed practice of medicine

This survey is invaluable to attorneys who represent health care entities, organizations, businesses, physicians, and investors looking for opportunities in this complex regulatory sector. Use it to efficiently gain a thorough exploration of the doctrine in each state and the District of Columbia.

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› Behavioral Health
› Psychology
› Registered Dental Hygienists

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The Medical Staff Guidebook: Minimizing Risk and Maximizing Collaboration
FOURTH EDITION
Karen S. Reiger, Author

Increased interaction between health care entities and medical staff, along with scrutiny from both regulators and the market itself, continue to impact the relationship between physicians and the entities where they provide service. At the heart of this balancing act are the medical staff bylaws. *Guidebook* coverage includes:

- An overview of the applicable regulations, including conditions of participation, and the role that accreditation organizations play
- The underlying legal and business issues that will impact the drafting of appropriate bylaws
- An overview of key provisions of the bylaws related to: medical staff governance, medical staff appointment, procedures for determining clinical privileges, and fair hearing procedure
- Organizational and drafting tips
- Sample language and key clauses

Available in print and eBook formats
152 pages, softbound, Pub. #26513, © 2016

Peer Review Guidebook
FIFTH EDITION
Barbara Blackbond, Charles J. Chulack, Joshua A. Hodges, Lauren M. Massucci, Dan Mulholland, Authors

*Peer Review Guidebook* is an invaluable source for complying with Health Care Quality Improvement Act (HCQIA) procedural requirements. From credentialing, privileging, or evaluating a physician, through potential reduction or denial of privileges, you will find thorough coverage of:

- Analysis of HCQIA and its impact on the peer review process
- Recognizing and characterizing the issue
- Informal dispute resolution
- Injunctive relief from peer review actions
- The formal hearing process
- Utilization of legal counsel by both sides
- Presentation of the case
- Reporting requirements
- Suspension of privileges

Available in print and eBook formats
234 pages, softbound, Pub. #27080, © 2016
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Peer Review Hearing Guidebook
SECOND EDITION
S. Allan Adelman, Ann O’Connell, Co-Editors and Authors
Hannah M. Whitman, Contributing Author

Since its original edition, *Peer Review Hearing Guidebook* has become a go-to source for counsel, hearing officers, and other parties with a stake in the review process. It focuses on the peer review hearing process, including steps that should be taken long before a medical staff hearing is contemplated. Expansive coverage includes:

- An introduction to the applicable laws, including a 50-state survey
- A step-by-step road map for implementation of a successful peer review hearing process
- The role of the hearing officer; using an attorney as a hearing officer
- Selection and role of the hearing committee
- Pre-hearing discovery
- The importance of a hearing record
- Preparation of the final report for the governing committee

Available in print and eBook formats
200 pages, softbound with CD-ROM, Pub. #26692, © 2013
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Representing Physicians Handbook
FOURTH EDITION
A Task Force of the AHLA Physician Organizations Practice Group
Michael F. Schaff, Task Force Chair
Lisa Gora, Coordinating Editor
with numerous Contributing Authors

From regulatory compliance and business formation and operation, to tax consequences and reimbursement issues, this informative Handbook has become a go-to source for innumerable health law attorneys. Each chapter is written by a practitioner in his or her area of expertise. In addition to relevant background on the subject matter, the authors include helpful suggestions on how to advise clients on their business matters and in their dealings with health care institutions.

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Available in print and eBook formats
786 pages, softbound, Pub. #26965, © 2016

If you represent physicians, don’t miss these related titles:
The Stark Law, p. 7
Health Care Transactions Manual, p. 10
Corporate Practice of Medicine, p. 12
Health Care Delivery Models and Settings

Representing Hospitals and Health Systems Handbook
FIRST EDITION
Dinetia Newman, Robert G. Homchick, Co-Editors
Emily Black Grey, Michael Lampert, Travis G. Lloyd, Claire Turcotte, Coordinating Editors
with numerous additional Authors and Editors

Operating the health care entity—whether an established business, or one that has been newly created—receives thorough treatment in this Handbook. Coverage includes:

- Establishment of facilities
- Certification process
- State and federal fraud and abuse regulations
- State licensing requirements
- Payment methodologies
- Operational issues, including patient relations, privacy, grievance rights, and consent to treatment

From attorneys to providers to lenders, anyone who needs to understand the intricacies and complexities of hospitals and health systems will consider this book an indispensable resource.

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Ambulatory Surgery Centers: Legal and Regulatory Issues

SIXTH EDITION

Scott Becker, Erin E. Dine, LauraLee R. Lawley, Lauren M. Ramos, Bradley A. Ridlehoover, Helen H. Suh, Melissa Szabad, Anna M. Timmerman, Gretchen Heinze Townshend, Kerri A. Zelensek, Authors

There are over 6,000 Ambulatory Surgery Centers (ASCs) operating in the United States, as the shift to outpatient surgery continues. Operators and owners of ASCs include hospitals, physicians, developers, management companies, financial sponsors, and others. Attorneys advising these owners need to keep pace with changing developments. Ambulatory Surgery Centers: Legal and Regulatory Issues, Sixth Edition supplies the information and guidance you need. The authors not only cover the historical background behind the development of ASCs, but most importantly focus on current issues facing ASCs, offering practical and useful guidance for those giving legal advice to developers and owners.

In this edition of this popular work, the authors provide an expert overview of the growth, trends, benefits, legal issues, and tensions associated with ASCs, followed by a comprehensive analysis of the issues particular to ASCs, emphasizing:

- Physical and organizational differences from other providers, whether they are owned by a hospital, a physician practice, or other entity
- Key trends and tensions facing ASCs, such as the conflicts that often arise between ASCs, hospitals, and physicians
- The benefits of joint ventures between hospitals and physicians
- Federal fraud and abuse concerns
- State self-referral laws and their impact on ASCs

This edition includes an all new chapter describing how to develop and assess an effective ASC compliance program. Downloadable materials include a revised and updated sample compliance plan, a sample operating agreement, and a sample policy for antitrust compliance.

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344 pages, softbound, Pub. #26900, © 2019
$149 Member | ISBN 9781522177500 | $144 Member | eBook, eISBN 9781522177524
The Fundamentals of Behavioral Health Care Law
FIRST EDITION
Peter J. Domas and Russell A. Kolsrud, Editors
Gerald "Jud" E. Deloss, Jena M. Grady, Alexandra A. Hall, Russell A. Kolsrud, Gregory W. Moore, Paige M. Steffen, Serene K. Zeni, Authors

This title covers a broad range of issues for health care institutions, social services providers, and the lawyers who represent them. Gain insight to a range of issues likely to impact your representation, including:

- Legal duty owed by behavioral health providers to others
- Criteria for when someone can be subjected to involuntary psychiatric treatment
- The impact of patient’s illness on the rules that govern treatment records
- Integration of behavioral health with physical medical issues

Available in print and eBook formats
274 pages, softbound, Pub. #30098, © 2016
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The ACO Handbook: A Guide to Accountable Care Organizations
SECOND EDITION
Peter A. Pavarini, Charlene L. McGinty, Michael F. Schaff, Executive Editors
Mark L. Mattioli, Coordinating Editor
with numerous Contributing Authors

The ACO Handbook is a critical work, whether you’re advising a hospital or health system establishing an ACO model, or counseling organizations operating within the delivery structure.

The authors analyze various components of an optimized delivery system, and examine issues ranging from the financial aspects of ACOs to the unique nature of academic medical center, pediatric, and commercial ACOs. Coverage includes:

- Medicare, Medicaid, and commercial ACOs
- Compliance plans, best practices, and payer perspectives
- Implications of integration and coordination models
- Examinations of cost containment, metrics, and compensation
- Application of the Stark Law, the Anti-Kickback Statute, and certain provisions of the Civil Monetary Penalty Law
- In-depth discussions of health information technology, antitrust, financing, and risk-sharing issues

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325 pages, softbound, Pub. #28190, © 2015
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Post–Acute Care Handbook: Regulatory, Risk, and Compliance Issues
FIRST EDITION
Ari J. Markenson, Editor in Chief
Caroline Berdzik, Joseph A. Donchess, Alan C. Horowitz, James F. Miles, Barbara L. Miltenberger, Michelle Peterson, Kelly A. Priegnitz, Christopher C. Puri, Lawrence W. Vernaglia, Editors
with numerous Contributing Authors

The authors and editors of this invaluable guide provide an important view into the evolving compliance and regulatory issues governing this area. In-depth coverage includes:

- Residents’ rights and facility practices
- The importance of nursing facility agreements
- Compliance issues, including federal and state reimbursement requirements
- Fraud and abuse issues that affect the industry
- Development of new systems and relationships that respond to incentives under the Affordable Care Act

Available in print and eBook formats
560 pages, softbound with CD-ROM, Pub. #28293, © 2015
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Institutional Review Boards: A Primer

THIRD EDITION

Gary W. Eiland, Richard G. Korman, Janet M. Lis, Teresa A. Williams, Editors

The Third Edition explains the changes under the revised 2018 Common Rule requirements, providing solutions for both new and common problems faced by Institutional Review Boards (IRBs). Compliance with the revised Common Rule requires a close examination of IRB, facility, and research practices, and this publication contains full explanations of important changes, including:

- Changes in applicability and exemptions
- Privacy Rule requirements for use/disclosure of protected health information (PHI)
- Collection, use, and storage of private information and bio specimens
- Use of broad consent

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Life Sciences
Pharmaceutical and Medical Device Compliance Manual
SECOND EDITION
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Ela Bochenek, Carl H. Coleman, Amy Matey, Editors
Marc Adler, Joseph S. Calarco, Brett A. Campbell, Colleen A. Conry, Scott Cunningham, Scott D. Danzis, Sujata Dayal,
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Bruce A. Levy, Veronica Lopez, Joseph W. Metro, Gregg Shapiro, Brian P. Sharkey, Anna Spencer, Robert E. Wanerman,
Constance A. Wilkinson, Christopher D. Zalesky, Authors

This edition synthesizes what can be an overwhelming quantity of authority into understandable analysis and practical action. The authors are among the leading experts in life sciences compliance. In these pages, they share their valuable perspectives on creating, managing, and monitoring an effective compliance program in today’s complex enforcement and business environment.

Study of this Manual will enable compliance professionals and lawyers to understand the government’s expectations of an effective compliance program and ethical business practices, as well as how the government discovers potential enforcement actions, its approach to pursuing such actions, and what behaviors can constitute mitigating factors for a company in the event of a legal violation.

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Health Information

The Law of Digital Health
FIRST EDITION
Bernadette M. Broccolo, Lisa Schmitz Mazur, Editors in Chief and Authors
Ryan B. Marcus, Anisa Mohanty, Amy C. Pimentel, Michael W. Ryan, Dale C. Van Demark, Christine M. Wahr,
Scott A. Weinstein, Authors

Digital health is a highly dynamic ecosystem of technological innovation with profound effects on all facets of health care. The key components of today’s digital health are:

- Electronic health records and other health information technology
- Mobile personal engagement tools
- Big data and data analytics
- Telemedicine

This book explains how, taken together, these developments transform the provider-patient relationship, change the way research is conducted, trigger privacy and security concerns, alter relationships with health plans, and give rise to a new generation of innovation. Digital health participants face an outdated and ambiguous legal and regulatory framework and enforcement by state and federal regulatory agencies, including:

- State attorneys general
- Department of Health and Human Services Offices of Civil Rights, Human Research Protection, and Inspector General, among others
- State licensure and accreditation agencies
- Food and Drug Administration
- Federal Trade Commission
- Federal Communications Commission

This book provides both the fundamental understanding and tactical foresight you need to develop a comprehensive digital health strategy.

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20 AHLA PUBLICATIONS CATALOG 2020 | 2021
Telehealth Law Handbook: A Practical Guide to Virtual Care

FIRST EDITION
Jennifer R. Breuer, Editor
Soleil Teubner Boughton, Andrea Frey, Jennifer Hansen, Nathaniel Lacktman, Vivek J.Rao, Emily Wein, Christine Burke Worthen, Yanyan Zhou, Authors

Telehealth Law Handbook: A Practical Guide to Virtual Care will help you navigate the highly dynamic and state law-dependent practice of telehealth. Telehealth is changing relationships not only between physicians and patients, but also among providers, and between providers and payers. This guide contains information on:

- Telemedicine licensure requirements in all 50 states
- Types of state licensure, exceptions, and how licensure laws apply in particular practice situations
- Telehealth regulatory requirements
- Telehealth practice and communication models
- Payment and reimbursement considerations, including telehealth payment and reimbursement rules under Medicare and Medicaid programs
- Telehealth commercial insurance and payment parity statutes
- Medical staff credentialing
- Ethics and liability issues
- Fraud and abuse compliance
- Corporate practice of medicine prohibitions
- Privacy and security issues
- Mobile health technology

This book is useful in developing your understanding of the complex rules surrounding this method of health care delivery.

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Available in print and eBook formats
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$139 Member | ISBN 9781632813459 | $134 Member | eBook, eISBN 9781632813749
**HIPAA/HITECH Resource Guide**  
**FIRST EDITION WITH CD-ROM**  
Patricia D. King, Editor  

With informed editorial oversight and authorship, this title provides guidance for understanding the protection of patients’ personal information. Coverage includes:  
- The original HIPAA regulations  
- HITECH Act privacy provisions and rulemaking  
- Early modifications to HIPAA Privacy, Security, and Enforcement rules  
- Valuable practice tools such as sample business associate agreements, sample privacy practice notices, authorizations, policies, and training materials  
- State-by-state survey of health care privacy laws  

*HIPAA/HITECH Resource Guide* provides not only the history of the development of the rules and standards, but also an introduction to ensuring compliance.  

Available in print and eBook formats  
344 pages, softbound with CD-ROM, Pub. #28271, © 2014  
$136 Member | ISBN 9780769876931 | $131 Member | eBook, eISBN 9780769876948  

**Data Breach Notification Laws: A Fifty State Survey**  
**SECOND EDITION**  
Jonathan M. Joseph, Author  

Data breaches can occur in the best-run organizations, and when they do, you must be prepared to react quickly. When your operation or customer base spans state lines, knowing how to respond in multiple jurisdictions becomes critical. With breaches occurring at the state level with more and more frequency, legislatures are enacting an ever-increasing array of notification laws that you must consider. In addition to providing a survey that includes all states, the book enables you to:  
- Tap into a collection of state-specific reporting forms for CA, MA, NY, NC, OR, VT, and VA  
- Understand the timing and content of notification to those affected  
- Determine which states require notification of a breach to specific state agencies or attorneys general  

Available in print and eBook formats  
174 pages, softbound, Pub. #28156, © 2015  
Health Insurance and Government Reimbursement

SEVENTH EDITION
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False Claims Act & the Health Care Industry: Counseling & Litigation
2020 Cumulative Supplement
Robert S. Salcido

False Claims Act & the Health Care Industry: Counseling & Litigation
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