

Health Care Law

Kerr Russell's experience in the field of health care law spans more than 70 years. In that time, and in representing a multitude of health care professionals and providers, our attorneys have developed uncommon insight into the relationships among physicians, insurers, health facilities and patients.

This experience is particularly valuable to clients who are competing in today's evolving, volatile, and highly-regulated health care marketplace. Our attorneys counsel physicians, hospitals and other health care providers, managed care interests, durable medical equipment providers, major groups in organized medicine, and medical staffs. We also counsel assisted living centers, nursing homes and homes for the aged. Our representation of health care clients also includes administrative proceedings, and licensure and litigation services. Additionally, a particular strength of our practice concerns the formation and representation of alternative risk transfer entities for health care clients, including captive insurance companies, risk retention groups and other alternative insurance structures.

Since health care matters for clients often extend beyond purely health care issues, we draw upon resources across the firm in areas such as corporate, litigation, taxation, and real estate law to deliver complete solutions for our clients.

Our legal services include:

- Antitrust counseling in health care mergers, acquisitions and joint ventures
- Certificate of Need
- Compliance with anti-kickback, fraud and abuse, self-disclosure, Stark HIPAA, and other health care compliance statutes
- Compliance plans
- Contracting with insurers, medical/dental plans, managed care plans and Accountable Care Organizations
- Corporate Integrity Agreements
- Corporate practice of medicine, including corporate and retail medical clinic formation
- Emergency Medical Treatment and Active Labor Act (EMTALA)
- Financing transactions
- Health care facility and professional license and accreditation matters
- Hospital and medical staff matters
- Licensing and disciplinary matters
- Litigation
- Long-term care facility matters
- Management Service Organizations (MSO) for health care providers
- Medical staff matters

- Medicare and Medicaid provider and supplier enrollment, certification and compliance
- Merger and acquisition transactions
- Reimbursement, billing and claims, and third-party payor and payment matters
- Risk retention groups, captive insurance companies and other alternative risk transfer entities
- Physician Organizations and Physician Hospital Organizations
- Post payment audits
- Professional, facility and institutional liability and risk management
- Peer review
- Skilled nursing facility certification and survey compliance
- Michigan Medical Records Act