

To: Hospitals and Health Systems *and* Fraud and Abuse
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Two New Settlements under Stark Self-Referral Disclosure Protocol

By Jennifer Hutchens and Kelly Koeninger*

The Centers for Medicare & Medicaid Services (CMS) reached two additional settlements in July 2013 under the Voluntary Self-Referral Disclosure Protocol (SRDP).

The first new settlement involved violations of the federal physician self-referral statute (commonly known as the Stark Law) by a general acute care hospital in Ohio (Ohio Hospital). Under the SRDP, the Ohio Hospital disclosed that it violated the Stark Law because some of its arrangements with physicians for electrocardiogram interpretation, medical director services, vice chief of staff services, and hospital services did not satisfy the requirements of any applicable exception under the Stark Law. The Ohio Hospital also disclosed that arrangements with certain physicians and a physician group practice for the donation of electronic health records items and services failed to satisfy the applicable exception. The Ohio Hospital's violations were settled for \$235,565.

The other SRDP settlement concerned a hospital located in Texas (Texas Hospital). Here, the Texas Hospital disclosed that an arrangement for case management advisor services with a physician did not satisfy the requirements of any exception under the Stark Law. The Texas Hospital's violations were settled for \$54,108.

[Access](#) CMS' list of "select" self-disclosures resolved under the SRDP, including these settlements.

**We would like to thank Jennifer C. Hutchens, Esquire, and Kelly A. Koeninger, Esquire (Robinson Bradshaw and Hinson PA, Charlotte, NC), for authoring this email alert. We would also like to thank the Hospitals and Health Systems Practice Group leadership for sharing this alert with the Fraud and Abuse Practice Group.*

[Call for Authors - Diversity Topics](#)

The October 2013 issue of *AHLA Connections* magazine will be devoted to issues of diversity in the health law bar and legal health issues related to diversity. Issues for possible articles include clinical trial participation, genetic background, diagnostic issues, treatment of illegal immigrants, and access to healthcare services. If you have an article (or an idea) you would like to submit for this special issue, contact [Bianca Bishop](#).