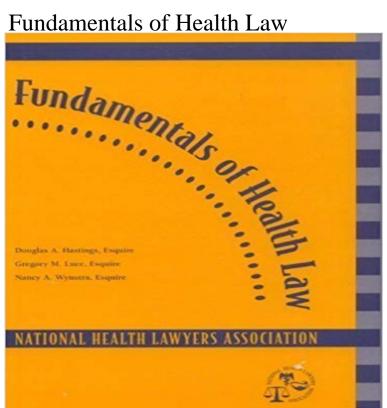
Fundamentals of Health Law



principles within the healthcare marketplace and gives particular attention to the interaction between providers and federal and statutory provisions governing those providers. It also provides cogent explanation of the legal constraints in hospital transactional matters, including antitrust laws, Medicare anti-fraud and abuse rules, and tax issues regarding exemption or for-profit status. Chapter II discusses legal issues related to the operation of a hospital that also correspond to the legal issues faced in other organizational healthcare settings such as HMOs, home care settings, and nursing homes. In particular, the chapter elucidates the relationships between the patient and the hospital; the hospital and the medical staff; the physician, patient, hospital, and hospital employees; and the hospital and its employees. Chapter III defines the fundamental principles of Medicare and Medicaid reimbursement, the two major federal programs which designate the types of health services to be financed and the persons elgible to receive coverage. It also provides essential information about todays managed care arrangements and the myriad of legal issues that accompany the delivery and payment mechanisms associated with those

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