Health Care Benefits Law. Health Care Law Series

Description: Making sense of the nonstop parade of federal and state legislation, regulation and decisional law governing health care benefits is not an easy task. For professionals in the field, however, it is an essential one. Fortunately, there is a comprehensive and practical guide to this complex, evolving area that clarifies the legal framework, including the most recent developments, and keeps you on top of every important issue. Health Care Benefits Law explains how current laws affect the design and day-to-day administration of health care plans. It also helps you identify—and deal with—hidden areas of liability. You'll find detailed coverage of such topics as: ERISA reporting and disclosure requirements; the Patient Protection and Affordable Care Act (PPACA) and the regulations clarifying its provisions; negotiating ASO (Administrative-Services-Only) contracts; tax treatment of health benefits; auditing utilization review; health and welfare benefit plans and ERISA fiduciary requirements; managed care liability; COBRA (including all the sample notices and forms that an employer needs to comply effectively); Medicare Secondary Payer issues; provision of benefits by professional employer organizations (PEOs); the Americans with Disabilities Act; the Health Maintenance Organization Act; HIPAA; the Family and Medical Leave Act; health care and employee benefit provisions of the 2005 Bankruptcy Act; the Tax Relief and Health Care Act of 2006; and more. You'll get sample forms, checklists, drafting tips, and the perspective you need to cope with any challenge. Whether you are an attorney, health care plan sponsor, employer or multi-employer trustee, insurance company, HMO, or other health care provider, this guide will save you hours of painstaking work and greatly simplify compliance.


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