DEPARTMENT: Legal

POLICY DESCRIPTION: Physician Referral Services

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REPLACES POLICY DATED: 2/11/98, 9/29/98, 3/1/00, 8/1/03, 5/31/04, 8/31/05

EFFECTIVE DATE: May 1, 2007

REFERENCE NUMBER: LL.013

APPROVED BY: Ethics and Compliance Policy Committee

SCOPE: All Company affiliated facilities including, but not limited to, hospitals, ambulatory surgery centers, outpatient imaging centers, home health agencies, physician practices, and all Corporate Departments.

PURPOSE: To provide direction as to the operation of referral services by the Company or by any of its facilities. It is not intended to address direct referrals by physicians or other health care providers, but it is instead intended to apply only to organized physician referral services through dedicated telephone numbers and similar methods.

POLICY: All referral services owned and/or operated by affiliates of the Company must follow the following standards: (1) Referral services may not exclude as a participant any individual or entity who meets the criteria for participation, such participation criteria must be formulated in an objective, non-volume manner [Note: this standard does not prohibit medical staff status as a participation criteria]; (2) any payments for use of the referral service shall be assessed and collected equally, and the amount of such payments shall be based solely on the cost of operating the referral service and shall not be based on the volume or value of referrals or other business generated by either party for the other party; (3) the referral service shall impose no requirements on the manner in which services are rendered to the referred person; (4) in connection with each referral, prior to the making of the referral, the following disclosures shall be made to each person seeking a referral and maintained in a written or electronic record signed and certified on behalf of the referring organization: (a) the manner in which participants are selected; (b) whether a fee has been paid by participants; (c) the manner in which a participant is selected for a particular referral; (d) the nature of the relationship between the referral service and the group of participants from which a referral may be made; and (e) any restrictions that would exclude an individual from continuing as a participant. [Note – (e) is a requirement under the anti-kickback safe harbor].

PROCEDURE: Each facility participating in a referral service must submit to the Legal Department their criteria for physician or health provider participation in the referral service prior to the implementation of such criteria. The Legal Department shall review these criteria, as well as all other aspects of the referral service, and approve the referral service prior to implementation. Prior to implementation, the facility CEO or approved delegate and any physicians participating in the referral service must sign a written agreement documenting the services. No referral services can be provided and no payments for such services can be accepted until such signatures are obtained, unless approved in advance by Operations Counsel. Any subsequent modifications to the referral service must be approved in advance by the Legal Department. The facility’s CEO or designee must periodically review the participation criteria and operation of the referral services to ensure compliance with this policy. These periodic reviews will occur no less frequently than every two years.