

Exhibit 1

Medical Licensure

Oklahoma
California
Nevada
Arkansas

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Law Licensure

District of Columbia
Nevada

July 27, 2015

Mr. Andrew Slavitt, Acting Administrator
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Certified Mail: 7014 0150 0000 4267 8294

RE: Freedom of Information Act Request and Requested Explanations

Dear Mr. Slavitt,

StrategicHealthSolutiions, LLC and perhaps others as contractors and representatives of the Centers for Medicare and Medicaid have requested that diagnostic radiologists submit the following information on each claim request made by StrategicHealthSolutiions, LLC. StrategicHealthSolutiions, LLC specifically has requested the following information to look into medical record reviews of selected Part A and Part B claims where there has been a significant increase in billing and payment for high cost diagnostic radiology claims where there has been good cause for reopening the claim:

- Copy of the claim bill
- History & Physical or physician progress note to support service in question
- Physician's orders from the attending/treating physician - the diagnostic radiology provider is responsible for obtaining medical records documentation from the treating physician to support the item(s) billed. The physician is required by Medicare to provide such information upon request.
- Radiology report
- All related diagnostic tests and results
- Signatures/credentials of professionals providing services, including signature log or attestation for medical record entries that are not signed or do not contain legible signatures
- Copies of any patient notices given (e.g., Advance Beneficiary Notice of Noncoverage)
- Any abbreviation keys or acronym keys used
- All documentation to support medical necessity and substantiate the provider's intent for the procedure must be included

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Based on this information and pursuant to the Freedom of Information Act (FOIA), 5 U.S.C. § 552, the undersigned hereby requests that the Centers for Medicare and Medicaid produce the following within twenty (20) business days:

The record of the number of diagnostic radiologists and diagnostic radiology groups, broken down as to the record of the number of individual diagnostic radiologist and diagnostic radiology groups per each state of the United States for 2009, 2010, 2011, 2012, 2013, 2014 and 2015 to the date of this request, subjected to medical record reviews of selected Part A and Part B claims where there has been a significant increase in billing and payment for high cost diagnostic radiology claims where there has been good cause for reopening the claim with the number of diagnostic radiologists and diagnostic radiology groups further broken down into the number of diagnostic radiologists and diagnostic radiology groups that resulted in payment adjustments and the number of diagnostic radiologists and diagnostic radiology groups that resulted in no payment adjustments.

If any responsive record or portion thereof is claimed to be exempt from production under FOIA, please provide sufficient identifying information with respect to each allegedly exempt record or portion thereof to allow the undersigned to assess the propriety of the claimed exemption. *Vaughn v. Rosen*, 484 F.2d 820 (D.C. Cir. 1973), cert. denied, 415 U.S. 977 (1974). In addition, any reasonably segregable portion of a responsive record must be provided, after redaction of any allegedly exempt material. 5 U.S.C. § 552(b).

In addition, if records are not produced within twenty (20) business days, the undersigned is entitled to a complete waiver of search and duplication fees under Section 6(b) of the OPEN Government Act of 2007, which amended FOIA at 5 U.S.C. § (a)(4)(A)(viii).

In an effort to facilitate record production within the statutory time limit, the undersigned is willing to accept documents in electronic format (e.g. e-mail, .pdfs). If you do not understand this request or any portion thereof, or if you feel you require clarification of this request or any portion thereof, please contact the undersigned immediately. I look forward to receiving the requested documents and a waiver of both search and duplication costs within twenty (20) business days. Thank you for your cooperation.

If there is contention that there is no legal authority to comply with this request please advise immediately so litigation can be filed and that issue resolved.

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Some of the information requested by your agents is under the control and accessibility of the diagnostic radiologist; some is not. Please explain the basis for request of information that is not under the control or accessibility of diagnostic radiologists or diagnostic imaging groups. If you do not agree on each of the items below please advise and provide the basis of the disagreement.

A diagnostic radiologist can provide a **"copy of the claim bill"**.

A diagnostic radiologist does not perform or do a **"History & Physical or a physician progress note to support service in question"** and therefore that request is inappropriate. CMS will not compensate a diagnostic radiologist to perform or do a History & physical or a physician progress note on patients. Why then is CMS requesting this information from diagnostic radiologists?

A diagnostic radiologist can provide **the "Physician's orders from the attending/treating physician"**.

A diagnostic radiologist can provide a **"Radiology report"**.

A diagnostic radiologist is not in the position to determine what **"All related diagnostic tests and results"** are for the patient. That is something that must come from the treating and ordering physician and therefore that request is inappropriate and cannot be furnished. CMS will not compensate a diagnostic radiologist research the medical record and make decisions as to what may or may not constitute **"All related diagnostic tests and results"** Why then is CMS requesting this information from diagnostic radiologists?

A diagnostic radiologist does not have access to or know **what "Signatures/credentials of professionals providing services, including signature log or attestation for medical record entries that are not signed or do not contain legible signatures"** That request is inappropriate. Why then is CMS requesting this information from diagnostic radiologists?

A diagnostic radiologist can only provide **"Copies of any patient notices given"** that the diagnostic radiologist has provided to the patient. **"Copies of any patient notices given"** copies and notices given by third parties are not know and cannot be provided by the diagnostic radiologist and therefore that request is inappropriate and cannot be furnished other than notices that the diagnostic radiologist has given to the patient. Why then is CMS requesting this information from diagnostic radiologists?

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A diagnostic radiologist can provide **"All documentation to support medical necessity"** which should be in the order for the imaging study but the diagnostic radiologist cannot provide any information to **"substantiate the provider's intent for the procedure"** Such information can only come from the provider. Why then is CMS requesting this information from diagnostic radiologists?

Diagnostic radiologists can provide the information that they produce or have control of. The other information requested that the diagnostic radiologist do not produced or have control of requires activity and work which needs to be compensated and the diagnostic radiologist may or may not be successful in gaining that information from other parties. For that reason, agreement needs to be established as to the compensation paid for the time and effort needed to obtain that additional information that has to be retrieved from third parties that is not produced or under the control of diagnostic radiologists or diagnostic imaging groups. StrategicHealthSolutiions, LLC and others should request the information that diagnostic radiologists and diagnostic imaging groups do not have directly from the third parties if StrategicHealthSolutiions, LLC if they want that information or compensate the diagnostic radiologists for the work necessary to meet the demands.

Furthermore, how can there be any opening of a claim for cases involving "Advanced Beneficiary Notice of Noncoverage" if there has never been a claim for payment? What payment made by Medicare can be adjusted if there has been no payment by Medicare in the first place? Please explain.

Is CMS willing to negotiate with diagnostic radiologists for the amount of compensation that will be paid for that work that has to be performed to acquire from third parties information not under the control of the diagnostic radiologist? Top attorneys charge \$250.00 to \$500.00 per hour for their work. Something similar would be appropriate for diagnostic radiologists.

Sincerely,

John Hamlin

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\$6.74

Sent To Andrew Slavitt, Acting Administrator
Street, Apt. or PO Box Centers for Medicare and Medicaid Services
 7500 Security Boulevard
City, State, Baltimore, MD 21244

PS Form 3800, August 2006 See Reverse for Instructions

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