

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

Re: Engagement for Healthcare Merger/Acquisition Representation

Dear [Client Contact Name],

This letter confirms that [Law Firm/Consulting Firm Name] ("the Firm") has been retained by [Client Name] ("the Client") to provide legal and advisory representation in connection with the proposed [merger/acquisition/consolidation] involving [Target Company/Partner Name].

1. Scope of Services

The Firm will provide the following services:

- Conducting healthcare-specific legal due diligence (including licensing, Medicare/Medicaid participation, and regulatory standing).
- Reviewing compliance with healthcare laws including Anti-Kickback Statute, Stark Law, and HIPAA.
- Drafting and negotiating the definitive acquisition agreement and ancillary documents.
- Assisting with required regulatory filings and change of ownership (CHOW) notifications.

2. Client Obligations

The Client agrees to provide all necessary financial records, provider contracts, billing data, and compliance audits required to complete the transaction. The Client represents that all information provided is accurate to the best of their knowledge.

3. Fees and Billing

Services will be rendered on the following basis: [Hourly Rate / Fixed Fee / Success Fee]. Expenses including filing fees and travel will be billed at cost. Invoices are payable within [Number] days of receipt.

4. Conflicts of Interest

The Firm has conducted a conflict check and, based on the information provided, no concurrent representation exists that would prevent us from representing the Client in this matter.

5. Confidentiality

All proprietary information exchanged during this transaction shall be kept confidential pursuant to the Non-Disclosure Agreement dated [Date] and applicable professional codes of conduct.

6. Termination

Either party may terminate this representation upon written notice. The Client remains responsible for all fees and costs incurred up to the date of termination.

Please sign and return a copy of this letter to indicate your acceptance of these terms.

Sincerely,

[Your Name]

[Your Title]

[Firm Name]

Accepted and Agreed:

Signature: _____

Printed Name: [Client Authorized Representative]

Date: _____