This is your new

Health Care Litigation and Risk Management Answer Book 2015

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PLI’s new Health Care Litigation and Risk Management Answer Book 2015 is designed to provide health care industry leaders and attorneys with a comprehensive and easy-to-use reference guide risk management and litigation in the health care sector. The book covers government regulation, including the False Claims Act, the Stark law, the Anti-Kickback Statute, and EMTALA, as well as major areas of private litigation risk, such as employment litigation and insurer/provider disputes. The book also provides discussion of compliance strategies to avoid investigations, fines, and litigation, and litigation strategies should the need arise.

This Answer Book not only provides clear and concise information in a Q & A format, but also includes extensive appendices of reference material, such as key statutes, compliance guidance from the DOJ, FTC, and OIG, and a sample corporate integrity agreement.

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About the Editors

David S. Greenberg is a partner in Arent Fox LLP’s Health Care practice group. He advises the health care industry, with a particular focus on health care providers and suppliers, helping them navigate through an exceedingly complex and volatile regulatory and enforcement environment.

David focuses his practice on counseling health care clients on regulatory and compliance issues related to the Affordable Care Act, the False Claims Act, the Anti-Kickback Act, the Stark Law, state licensure, self-disclosures, reimbursement and payment, and participation in Medicare, Medicaid, and other government health care programs.

He is experienced in conducting internal investigations and representing health care companies in state and federal audits, enforcement actions, False Claims Act investigations, arbitration, and litigation.

Additionally, David represents health care providers and suppliers embroiled in significant reimbursement and coverage disputes and litigation with managed care companies, health insurers, third-party administrators,
FEHB plans, Medicare Advantage plans, and employer-sponsored health plans concerning compliance with ERISA, COBRA, the Medicare Secondary Payer Act, the FEHB Act, the Medicare Advantage program, and state insurance laws.

David regularly speaks and writes on legal issues impacting the health care industry. He is also a member of the Arent Fox Health Care Counsel blog editorial team.

**Brian D. Schneider** is an attorney in Arent Fox LLP’s Health Care and Complex Litigation practice groups. As a former management consultant, he approaches every engagement with an emphasis on business strategy. Brian coordinates clients’ responses to government investigations and civil actions stemming from False Claims Act, Anti-Kickback, Stark, and antitrust matters, with an emphasis on cost management and risk mitigation. He also works with his health care clients to develop compliance programs and to craft business strategies that align with the fraud and abuse laws. Brian is as an experienced litigator and collaborates with clients to balance dispute resolution with the attendant costs. He is adept at managing all aspects of government investigations, including Civil Investigative Demands, subpoenas, and informal requests. He has successfully negotiated with federal and state enforcement personnel to reduce the cost and risk for health care clients in all sectors, and he routinely litigates disputes involving complex federal and state regulatory schemes, reimbursement disputes with Medicare and commercial payers, class actions, and international arbitrations.

Brian’s representations include: Defending pharmaceutical companies in multi-jurisdictional false claims litigation; assisting medical device manufacturers respond to federal subpoenas involving the False Claims Act and Anti-Kickback Statute; representing DME suppliers in Medicare disputes and government investigations; defending a hospital system against False Claims Act and Stark claims; advising drug and device companies on fraud and abuse compliance strategies and tactics; and managing a portfolio of managed care disputes (administrative and litigation) for a multi-state health care provider.