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Amy Hargreaves

LATHAM & WATKINS
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With a deep understanding of health care laws and regulations, compliance-related matters and False Claims Act litigation, Amy Hargreaves assists clients in navigating complex enforcement environments. She has developed expertise in the regulatory and enforcement regimes surrounding the FCA, Stark Law and Anti-Kickback Statute, which has proven valuable to a wide range of health care clients. She is known for effectively managing complex investigations from start to finish and building strong client relationships.

Hargreaves played a key role in representing Tenet Healthcare and its subsidiary, United Surgical Partners, International (USPI), in a False Claims Act qui tam litigation matter. The case involved numerous allegations of Stark Law and federal Anti-Kickback Statute violations at the Oklahoma Center for Orthopaedic & Multispecialty Surgery (OCOM). Despite the complexities surrounding Medicare billing rules and changing guidance, Hargreaves and her team negotiated a \$72 million settlement with the Department of Justice, resolving the investigation and federal litigation.

Additionally, Hargreaves represented Tenet Healthcare and Detroit Medical Center in an investigation by the Department of Justice regarding midlevel provider services to hospital inpatients. Hargreaves led a team that reached a settlement in principle with the DOJ to resolve this matter for \$29.8 million, which remains subject to the negotiation of a final settlement agreement.

“Due to the complicated billing rules surrounding midlevel providers’ services under Medicare (Part A, Part B, split/shared services, etc.), the investigation involved complex legal and factual issues and was subject to developing guidance from different arms of the government,” Hargreaves said. “We had to keep pace with changing guidance, as well as educate the prosecuting attorneys about some of the more nuanced complexities in the midlevel provider services space. Luckily, we were working with a forthcoming client and a DOJ team willing to engage with us on substantive legal and regulatory issues, and eventually reached a negotiated settlement that was very favorable to the client.”

Looking to the future, Hargreaves said she is interested in the long-term impact of a history of minimal (or subminimal) investment in traditional health care — under-reimbursed primary care services, underfunded rural and disproportionate share hospitals, insufficient gerontology and internal medicine physicians to care for an aging population — and how the law (not to mention reimbursement structures and financial markets) may shift to provide creative solutions to these problems.

“Poor, underserved rural patients and senior citizens are not going to be heavy users of health tech, no matter how much money flows into those devices and services — and some of our nation’s largest hospital systems and provider groups are being forced to make incredibly difficult decisions to stop providing care to certain populations because reimbursement has not kept pace with costs. How the U.S. decides to address these challenges could have huge implications for the social safety net, politics and the overall health and safety of the nation,” Hargreaves said.

Hargreaves is also committed to improving the representation of women and other underrepresented groups at Latham, having founded a local women’s lawyers group and leading initiatives focused on the recruitment, retention and progression of women lawyers within the firm. She also contributes to her local community through her involvement in organizations like Athena and the San Diego Chamber of Commerce’s health care subcommittee.