Managed Care

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Providing sophisticated legal and regulatory counsel for the managed care and health insurance industry.

As federal and state regulation of HMOs and other managed care organizations becomes more intertwined in a fluid marketplace, our Managed Care team of attorneys works with companies to strategically develop and implement cost-effective ways to meet their business objectives. We counsel health, dental and vision plans of all sizes as well as administrative services organizations providing services for self-funded employers. We have extensive experience advising insurance company clients on federal laws and regulations governing managed care organizations and the regulatory framework in each state. Teaming with lawyers and other professionals across our Insurance Regulatory practice, we have in-depth knowledge and experience in mergers and acquisitions, holding company transactions, licensing, financial and market conduct examinations and financial solvency issues.

Our Managed Care attorneys have comprehensive experience in Medicare and Medicaid, as well as health insurance marketplace and other commercial products. We understand the annual CMS clock for Medicare Advantage and work with companies, often on a significant multistate scale, to enter new markets under tight time pressures. We have deep knowledge of both the CMS contractual and regulatory issues along with the state law regulatory issues facing such plans. When working with clients on Medicaid related matters, we understand the significant variances by state and have assisted clients through matters involving both state insurance departments and state Medicaid agencies.

As the health insurance marketplaces, both federal and state-based, continue to evolve in the commercial health insurance market, we help clients navigate marketplace issues across states. With some focus in the commercial market turning toward level-funded and other self-funded plans, combined with stop loss coverage in the group market, we assist clients with creating products for this ERISA-regulated environment.

HIGHLIGHTS

- Sophisticated team from diverse backgrounds which includes senior regulators and in-house counsel from national and regional health care companies
- Specialized knowledge of Medicare Advantage and managed Medicaid plans
- Extensive experience navigating federal and state regulatory environments
- Deep relationship with state regulators on managed care products

CAPABILITIES

- Corporate structuring
- Network participation contracts
- Regulatory and transactional matters
- Licensing approvals
- Compliance and operations guidance
- Managed care contract negotiations

- Regulatory compliance
- Affordable Care Act (ACA) regulations, evolving compliance and implementation, and strategic opportunities
- Development of strategic alliances
- Payor-provider joint ventures
- Level-funded plans and other products merging self-funded plans with stop loss coverage in an ERISA environment
- Fraud and abuse
- HIPAA and state law privacy and security matters
- State HMO and insurance laws
- Medicaid managed care
- Medicare Advantage/Medicare Part D
- Mental health parity
- Peer review and credentialing
- Specialty/excepted benefit health plans
- Discount programs
- Disease management
- Utilization review and medical bill review
- Workers' compensation
- Self-funded
- MEWAs and association health plans
- Premium tax and related issues
- Prescription Drug Plans – Medicare Part D

In addition, we focus on our professional relationships with state regulators across the country and regularly attend the NAIC and trade organization meetings that concentrate on managed care.