

Wheeling Hospital Agrees to \$50M Settlement Concerning Medicare Fraud Claims

NewsWheeling Hospital, Inc. has agreed to pay the United States a total of \$50,000,000 to resolve claims that it violated the False Claims Act by knowingly submitting claims to the Medicare program that resulted from violations of the Physician Self-Referral Law and the Anti-Kickback Statute.

Bayer to Pay \$1.6B to Settle 90% of Essure Injury Claims

News

Bayer will pay about \$1.6 billion to settle nearly all of the U.S. lawsuits that, over several years, have claimed the company's Essure birth control implant caused serious injuries.

Nine Individuals Charged in \$24 Million Paycheck

Protection Program Fraud Scheme

News

In one of the largest COVID-relief fraud cases to date, nine Ohio and Florida individuals are alleged to have conspired to obtain fraudulent PPP loans guaranteed by the CARES Act and to have received kickbacks for filing fraudulent loan applications.

Pharmacy to Pay \$3.5 Million to Resolve U.S. Claims it Helped Teva Pay Kickbacks

News

A Florida-based specialty pharmacy will pay \$3.5 million to resolve allegations it served as a conduit for a Teva Pharmaceutical Industries Ltd subsidiary to pay kickbacks to Medicare patients, the U.S. Justice Department said on Thursday.

Return to Work COVID-19

Testing Considerations

News

As employees increasingly transition back into the physical workplace, employers have begun to grapple with whether and how to deploy COVID-19 diagnostic testing as a return-to-work solution.

New York May Soon Enact Contact Tracing Law

News

A bill regulating the use of contact tracing data has moved its way through both chambers of the New York State legislature.

Employers No Longer Have a Pre-Contract Duty to Bargain Over Disciplinary Decisions

Insights

Recently, the National Labor Relations Board (NLRB), overruling an important Obama-era decision, held that employers do not have a pre first-contract duty to bargain before disciplining employees in a manner consistent with an

existing policy or practice.

Sutter Health's Request to Delay \$575 Million Settlement Is Denied

News

Despite citing the surge in coronavirus cases and economic fallout from the pandemic in California, Sutter Health failed to persuade a state judge on Thursday to delay the \$575 million settlement it reached last December over accusations of price gouging and monopolistic practices.

Florida's Largest Nursing Home Company, Faces Quarter-Billion-Dollar Fraud Judgment

News

Florida's largest nursing home provider is again facing a quarter-billion-dollar judgment for fraud.

Tamiflu Maker Won \$1.4B Contract after Deceiving the FDA about Drug's Pandemic Effectiveness

News

Drug company Hoffmann-La Roche falsified scientific conclusions and mounted a high-powered marketing and lobbying campaign to deceive the government about the effectiveness of Tamiflu for fighting a flu pandemic, according to new filings in a federal False Claims Act lawsuit.

Judge Reinstates \$85M of Previously Tossed \$348M FCA Verdict Against Nursing Home Manager

News

The U.S. Court of Appeals for the Eleventh Circuit this week reinstated part of a False Claims Act (FCA) verdict that was overturned in 2018, issuing a judgment of more than \$255 against multiple companies.

Citing COVID, Sutter Pushes to Revisit \$575M Antitrust Settlement

News

Six months after agreeing to a \$575 million settlement in a closely watched antitrust case filed by California Attorney General Xavier Becerra, Sutter Health has yet to pay a single dollar, and no operational changes have gone into effect.

Court to Consider High-Stakes Tobacco Fight

News

Two decades after Florida reached a landmark legal settlement with tobacco companies, an appeals court is slated to hear arguments Tuesday in a dispute about more than \$100 million in payments.

Court	Enters	Judgment
Totaling	More	Than \$32

Million on Jury's \$10.8 Million Verdict

News

Shortly before COVID-19 halted jury proceedings across the United States, a Mississippi jury sided with the Government to return a \$10.8 million verdict against Stone County Hospital and several affiliates for what the jury found were false Medicare claims submitted in violation of the False Claims Act.

Historic Opioid Agreement Clears Way for Rural Communities to Benefit from Litigation Settlements

News

A landmark agreement between the Texas Attorney General's office and a group of Texas counties and cities impacted by the country's opioid epidemic paves the way for future settlement money to be directed to rural communities battling the crisis.

Limitation of Liability During the Coronavirus Pandemic

News

In response to the COVID-19 pandemic, state and federal authorities have recognized a need for as many trained, experienced, and qualified health care providers as possible.

\$4M Verdict Over Doctor's Failed Attempts to Insert Catheter

News

West Palm Beach attorneys William D. Zoeller and Michael V. Baxter of Schuler Halvorson Weisser Zoeller Overbeck obtained a \$4 million jury verdict for the family of a 72-year-old man who died after his doctor tried to insert a catheter 14 times—for a procedure the plaintiffs alleged could have waited.

“Twisted” Path to New Trial

for Dr. Paulus

News

A 2018 Sixth Circuit panel upheld a jury verdict convicting Dr. Richard Paulus of submitting fraudulent medical claims. That same panel, with 2020 hindsight(!), reversed that conviction.

Former Tulare Hospital Attorney Faces State Bar Complaint

News

Directors of the Tulare Local Health Care District (TLHCD) voted to file a formal complaint against their former attorney with the California State Bar Association.

Department of Justice Uses Travel Act to Prosecute Health Care Fraud

News

In April 2019, a federal jury found seven defendants associated with the Forest Park Medical Center (FPMC) in Dallas, Texas guilty on charges of conspiring to pay or

receive health care bribes.