



John H. Lawrence

Partner

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OVERVIEW

John Lawrence primarily counsels health care clients nationwide in responding to civil and criminal governmental investigations and defending False Claims Act lawsuits. He frequently represents hospitals, hospital systems, academic medical centers, health care corporations, laboratories, pharmaceutical companies, durable medical equipment companies, and individuals in health care fraud investigations involving the U.S. Department of Justice, U.S. Attorneys' Offices, and other federal and state agencies. His background also includes significant experience handling complex civil litigation inside and outside of health care. In addition to his litigation practice, John advises clients on health care regulatory matters, including those involving the Stark Law and Anti-Kickback Statute.

PROFESSIONAL BACKGROUND

Prior to joining the firm, John was an associate at law firms in Nashville and Chattanooga, Tennessee where he concentrated his practice on health care fraud and abuse, compliance and government investigations, and commercial litigation.

ACHIEVEMENTS

- Best Lawyers in America, *Ones to Watch* – Health Care (2023)
- Selected to North Carolina Rising Stars – Health Care (2020-2022)
- Selected to Mid-South Rising Stars – Business Litigation (2015-2018)

PROFESSIONAL / CIVIC ACTIVITIES

- American Health Lawyers Association
- North Carolina Bar Association
- Tennessee Bar Association

- Council Member, North Carolina Bar Association Health Law Section (2018-2020)

SPEAKING ENGAGEMENTS

- “Government Investigations – Lessons Learned,” Association of Corporate Counsel – Tennessee, September 29, 2022
- “The Telemedicine Explosion: Policy Considerations and Practical Realities,” North Carolina Bar Association – Health Law Section, April 22, 2022
- “Speaker, Risk Adjustment Compliance – Best Practices For Avoiding Legal Action,” November 9 2021
- “Investigation Hydras: Navigating Complex Issues in Internal Investigations,” AHLA Fraud & Compliance Forum, October 1, 2021
- “False Claims Act Healthcare Year-in-Review,” Health Ethics Trust: Compliance Certification Intensive Course, August 11, 2021
- “False Claims Act Healthcare Year-in-Review,” Health Ethics Trust: Washington Executive Certification Course for Healthcare Compliance Executives, May 5, 2021
- “Reevaluating the Government’s Dismissal Authority Pursuant to the FCA,” American Conference Institute (ACI) - 8th Annual Advanced Forum on False Claims Act and *Qui Tam* Enforcement, March 25, 2021
- “Fiscal Year 2020 - False Claims Act Healthcare Year-in-Review,” Health Ethics Trust Webinar, February 25, 2021
- “Fiscal Year 2020 - False Claims Act Healthcare Year-in-Review,” The Florida Department of Health Webinar, February 18, 2021
- “CARES Act Provider Relief Funding: Key Compliance Obligations and Guidance, Best Practices and Potential Liability,” Louisiana Bar Association’s 11th Annual “J. Barrett Benton” Health Law CLE, December 4, 2020
- “Provider Relief Funding and Government Enforcement,” Health Ethics Trust Webinar, December 2, 2020
- “COVID-19 Government Enforcement Update,” Medtrade Virtual Conference, November 5, 2020
- “CARES Act Provider Relief Funding: Key Compliance Obligations and Guidance, Best Practices and Potential Liability,” Health Ethics Trust Webinar, October 19, 2020.
- “Anticipating Criminal Investigations of Long-Term Care and Senior Care Providers Relative to the COVID-19 Pandemic,” American Conference Institute (ACI) - COVID-19 Liability for Long-Term Care and Senior Care Providers, August 18, 2020
- “Traversing Borders - Coordinating National and International Investigations Initiated Internally and Externally by U.S./International Law Enforcement,” Under the Wire, February 13, 2020

- “Government Perspectives: Emerging Trends and Priorities in Health Care Fraud & Abuse,” North Carolina Health Care Fraud and Abuse Conference, October 17, 2019
- “Ethical Considerations in Health Care Fraud Investigations,” AHLA Fraud & Compliance Forum, September 26, 2019
- “Internal and External Healthcare Fraud Investigations,” Healthcare Council of Western Pennsylvania Compliance Committee, September 13, 2018
- “The Ethics of a Healthcare Fraud Investigation,” South Carolina Bar Association Conference - False Claims Act/Qui Tam Whistleblower Litigation Involving Health Care Providers, April 13, 2018
- “Overview of Fraud & Abuse Laws,” Tennessee Bar Association 17th Annual Health Law Primer, October 4, 2017

EDUCATION

- J.D., University of North Carolina at Chapel Hill School of Law, 2012 (*Editor-in-Chief, First Amendment Law Review*)
- M.Div., Wake Forest University, 2009
- B.A., Duke University, 2004

ADMISSIONS

- Bar of North Carolina
- Bar of Tennessee
- United States Court of Appeals for the Eleventh Circuit
- United States Court of Appeals for the Sixth Circuit
- United States District Court for the Eastern District of North Carolina
- United States District Court for the Eastern District of Tennessee
- United States District Court for the Middle District of North Carolina
- United States District Court for the Middle District of Tennessee

THOUGHT LEADERSHIP POWERED BY HUB

- 29 February 2024, US Department of Justice Announces US\$2.68 Billion in Fiscal Year 2023 False Claims Act Recoveries
- 1 February 2024, Twelfth Annual "Under the Wire" CLE Webinar

- 5 July 2023, Supreme Court Affirms Government's Broad Dismissal Authority in False Claims Act Suits
- 8 June 2023, Supreme Court Issues Decision Regarding False Claims Act's Scienter Element
- 28 April 2023, The False Claims Act and Health Care: 2022 Recoveries and 2023 Outlook
- 22 April 2022, Medical Laboratories Under the Microscope
- 7 April 2022, The False Claims Act and Health Care: 2021 Recoveries and 2022 Outlook
- 9 August 2021, Cybersecurity Risk in the Health Care Industry
- 25 February 2021, Qui Tam Quarterly - Risky Business: Health Care Investments Pose Acute False Claims Act Risk for Private Equity
- 22 February 2021, The False Claims Act and Health Care: 2020 Recoveries and 2021 Outlook
- 18 December 2020, HHS OGC Weighs in on Sub-Regulatory Guidance in Advisory Opinion: What It Might Mean for False Claims Act Cases After Azar v. Allina Health Services
- 9 December 2020, HHS Creates a Working Group to Increase Collaboration with DOJ
- 30 November 2020, HHS OIG Highlights "Inherent Fraud and Abuse Risks" of Company-Sponsored Speaker Programs in Rare Special Fraud Alert
- 20 November 2020, COVID-19: CARES Act Provider Relief Fund Compliance and Potential FCA Enforcement
- 3 November 2020, Qui Tam Quarterly - Uncertain Relief: Navigating CARES Act Provider Relief Fund Guidance and False Claims Act Risks
- 15 October 2020, COVID-19: New DOJ Guidance on Inability-to-Pay Claims: What Companies Affected by COVID-19 Need to Know When Seeking Reduced Civil and Criminal Penalties from DOJ
- 25 June 2020, COVID-19: PPP Loan Borrowers - Your Information May Now Be Public
- 9 June 2020, COVID-19: K&L Gates Triage: Responding to the Unimaginable: Legal Challenges for Nursing Homes & Long-Term Care Facilities in a COVID-19 Enforcement Environment
- 1 May 2020, COVID-19: Labs Beware! – EKRA Expands DOJ's Enforcement Arsenal in the COVID-19 Fraud Battle
- 9 April 2020, COVID-19: Looming False Claims Act Liability for Paycheck Protection Program Loans
- 7 April 2020, COVID-19: CARES Act Overview: Relevant Health Care Provisions
- 25 March 2020, COVID-19: Government Enforcement in the Time of a Pandemic
- 27 February 2020, The False Claims Act & Health Care: 2019 Recoveries and 2020 Outlook
- March 2019, Qui Tam Quarterly - Health Care's New Wilderness: The Intersection of Telehealth & Ancillary Services

- 20 February 2019, The False Claims Act & Health Care: 2018 Recoveries and 2019 Outlook
- 26 November 2018, K&L Gates Triage: Internal & External Health Care Investigations Part 3
- 26 November 2018, K&L Gates Triage: Internal & External Health Care Investigations Part 2
- 16 November 2018, The New Kickback Prohibition for Substance Use Disorder Treatment Facilities, Clinical Laboratories and Recovery Homes
- 9 November 2018, CMS Issues Final Medicare PFS Rule for CY 2019
- 25 October 2018, K&L Gates Triage: Internal & External Health Care Investigations
- 6 August 2018, CMS Issues Proposed Medicare PFS Rule for CY 2019
- 19 July 2018, K&L Gates Triage: 2018 Health Care Fraud Takedown

OTHER PUBLICATIONS

- “The Causation Conundrum: The Growing Circuit Split Surrounding Causation and Kickback-Premised False Claims Act Cases,” *American Health Law Association*, 13 February 2024

NEWS & EVENTS

- 12 October 2023, Health Law Boot Camp, Hosted by North Carolina Bar Association
- 21 September 2023, Annual Meeting and Convention—Supreme Court Decides Two Significant False Claims Act Cases: A Review of Polansky and SuperValu and Their Implications, Hosted by Federal Bar Association
- 21 September 2023, Supreme Court Decides Two Significant False Claims Act Cases: A Review of Polansky and SuperValu, Hosted by Federal Bar Association
- 3 March 2023, K&L Gates Health Care Fraud Group Hosts Inaugural Southeastern Health Care Fraud Symposium
- 23 February 2023, Southeastern Health Care Fraud Symposium
- 18 August 2022, More Than 350 K&L Gates Lawyers Named Among 2023 Best Lawyers in America, Ones to Watch
- 22 April 2022, Change Can Happen Fast — Bring an Umbrella (2022 Health Law Section Program), Hosted by North Carolina Bar Association
- 9 November 2021, Risk Adjustment Compliance - Best Practices For Avoiding Legal Action, hosted Health Fidelity
- 5-7 May 2021, Washington Executive Certification Course for Healthcare Compliance Executives, hosted by Health Ethics Trust
- 24-25 March 2021, ACI False Claims Act and Qui Tam Enforcement Conference

- 24 August 2020, K&L Gates Hosts Town Hall Featuring DOJ's Fraud Initiatives as a Result of COVID-19 and How Health Care Providers Should Prepare
- 24 February 2020, K&L Gates Names 41 New Partners Across Global Platform

MEDIA MENTIONS

- Quoted, "The Litigation Jolting Health & Life Sciences In 2023's 2nd Half" *Law360*, 21 July 2023
- Quoted, "After Self-Disclosing During Investigation, Provider Settles FCA Case," *COSMOS*, 5 June 2023
- Quoted, "In Updated DOJ Compliance Guidance, Compensation Is a Lever; One-Word Change 'Slapped Me in the Face,'" *COSMOS*, 13 March 2023
- Mentioned, "SCOTUS Considers DOJ's Ability To Dismiss FCA Qui Tam Suits," *WestLaw*, 8 December 2022
- Quoted, "Supreme Court Seems To Support Government's Later Dismissal Of False Claims Act Cases," *Pink Sheet*, 6 December 2022

AREAS OF FOCUS

- Health Care and FDA
- Commercial Disputes
- Federal, State, and Local False Claims Act
- Health Care Fraud and Abuse (U.S.)
- Internal Investigations
- White Collar Defense and Investigations

REPRESENTATIVE EXPERIENCE

- Served as lead counsel in securing dismissal of False Claims Act lawsuit on the merits and with prejudice for an independent diagnostic testing facility in the Federal District Court for the Southern District of Florida.
- Served as lead counsel in securing dismissal of all False Claims Act counts against a managed care organization in the Federal District Court for the Western District of Virginia, including dismissal of relator's FCA retaliation claim after successful oral arguments.
- Served as lead counsel in securing declination and dismissal of False Claim Act claims against a hospital system in the Federal District Court for the Eastern District of North Carolina.
- Served as lead counsel in securing government declination and dismissal of False Claims Act lawsuit against an academic medical center wherein relator alleged fraudulent pharmacy-related billing practices.

- Served as co-lead counsel in securing dismissal of False Claim Act lawsuit against a durable medical equipment company in the Federal District Court for the Middle District of Tennessee.
- Served as co-lead counsel in securing dismissal of all False Claims Act counts against a laboratory in the Federal District Court for the Western District of Pennsylvania wherein relator alleged improper COVID-19 testing and billing.
- Representation of pharmaceutical company in False Claims Act investigation premised on alleged Anti-Kickback Statute violations surrounding provider-related speaker programs.
- Representation of pharmaceutical company in False Claims Act investigation premised on alleged Anti-Kickback Statute violations surrounding prior authorization issues and sales representative provider relationships.
- Represented academic medical center in qui tam lawsuit filed under the False Claim Act for alleged fraudulent pharmacy-related billing practices. Following the Government's declination, the lawsuit was dismissed. Represented academic medical center in connection with outpatient pharmacy's redesign of copay waiver process to ensure effective compliance with the Anti-Kickback Statute and applicable regulations.
- Represented pain management clinic in qui tam lawsuit filed under the False Claim Act alleging fraudulent urinalysis billing practices. Representation resulted in declination from Government and successful settlement negotiation with relator resulting in dismissal of the matter.
- Represented large hospice provider in intervened False Claims Act lawsuit alleging the provision of medically unnecessary hospice services.
- Represented physician practice in connection with state criminal investigation into alleged insurance and billing fraud. Following internal investigation into the allegations and communications with state agency, the state agency elected to no longer pursue the matter.
- Represented large regional hospital system in connection with an internal investigation related to alleged improper billing practices at hospital-based clinics and compensation arrangements with physicians raising potential Stark Law and Anti-Kickback Statute issues.
- Represented university-affiliated hospital in connection with Stark Law Self-Referral Disclosure Protocol ("SRDP") filing.
- Represented laboratory in connection with federal criminal health care fraud investigation into contractual relationships with lead generation and telemedicine companies.
- Represented multiple chief executive officers and principals of health care corporations in multiple jurisdictions in connection with federal criminal health care fraud investigation into telemedicine-related arrangements.
- Represented specialty pharmacy in connection with an internal investigation surrounding potential kickbacks to physicians and Stark Law violations based on non-monetary compensation practices.

- Represented multiple durable medical equipment companies in internal investigations into contractual relationships with lead generation and telemedicine companies.