

SheppardMullin

Healthcare and Regulatory Capabilities

Presented to

San Joaquin Valley Insurance Authority

December 2025



Healthcare Team

Sheppard Mullin's diverse Healthcare Team is one of the largest and fastest-growing national healthcare practices among firms of our pedigree. *Law360* recently named us as the U.S. Health Law Practice Group of the Year and, with over 230 healthcare lawyers, we are ranked by *Modern Healthcare* as one of the "Largest Healthcare Law Firms." We represent all sectors within the healthcare industry, including start-ups and early-stage healthcare businesses, healthcare finance companies, private equity, hospitals and healthcare facilities, health plans, physician practices, and healthcare technology companies, among others, in finance, transactional, regulatory, litigation, tax, labor and employment, real estate, privacy, information technology, intellectual property, and antitrust matters. This gives us a bird's-eye view of the industry that allows us to help our clients anticipate trends and navigate a highly dynamic and competitive environment.

Services

Mergers, Acquisitions and Joint Ventures	Strategic Planning, Growth Initiatives and Value Creation
Compliance - Fraud and Abuse	Commercial Litigation
False Claims Act Litigation	Appeals, Disputes and Protests Involving Governmental Agencies
Value-Based and Global Risk Arrangements	HIPAA, Data Privacy, and Cybersecurity
Healthcare Real Estate and Finance	FDA
Digital Health and Telemedicine	Artificial Intelligence, Machine Learning, Information Technology
Provider Alignment Transactions	Health Plan Strategic Transactions, Licensing, Contracting and Compliance
Antitrust Counseling and Compliance	Defense of Antitrust Investigations and Federal, State and Private Party Litigation
Medicare Advantage, Medicare Prescription Drug, Medicaid Managed Care and ACA Marketplace Operations and Compliance	
Tax and Employee Benefits	HCC-RAF Contracting Programs and Provider Incentive Programs
Emerging Growth/ Venture Capital	Labor and Employment
Certificate of Need	Capital Markets and IPOs

Accolades

What Our Clients Say

- "Their healthcare team is responsive and solution-oriented, providing excellent client service."
- "Particularly strong in large transactions."
- "Deep bench strength."
- "Strong; capable of serving us in any capacity."
- "Distinguished by its innovative healthcare information technology practice."

How We Rank

Best Lawyers

- Ranked Tier 1 nationally in Healthcare as a "Best Law Firm", **Best Lawyers**, 2026



- Ranked Band 1 National Healthcare: Highly Regarded, **Chambers USA** 2025



- Practice ranks in California, New York, Washington, DC, Illinois and Texas, **Chambers USA**, 2025



- Ranked eighth largest healthcare law firm by **Modern Healthcare**, 2025



- Most recommended Law Firm in Healthcare, **BTI Consulting Report** 2025



- Healthcare Practice group of the Year, **Law360**, 2024 (named four times)



- Nationally ranked in: Healthcare-Service Providers and Healthcare-Insurers, **Legal 500 US**



- National Tier 1 Healthcare Practice by **U.S. News and World Report** with **Best Lawyers**

Practice Group Rankings

GlobeSt.

- Named a 2024 Healthcare Real Estate Influencer by **Globe St.**



- Ranked "Top 10 U.S. Law Firm in Healthcare M&A", **Levin Associates**



- Named Healthcare Firm of the Year, Americas M&A Deal of the Year (Large Deal Category) and USA Private Equity Deal of the Year, **M&A Atlas Awards**

Brussels | Century City | Chicago | Dallas | Houston | London | Los Angeles | New York | Orange County
San Diego (Downtown) | San Diego (Del Mar) | San Francisco | Seoul | Shanghai | Silicon Valley | Washington, D.C.

www.sheppardmullin.com

Healthcare Regulatory and Compliance

Operating in the healthcare industry today means navigating a highly complex and constantly evolving array of federal, state, and local laws and regulations. We provide counsel to healthcare clients in virtually all manner of regulatory compliance and enforcement issues. We routinely advise on physician self-referral laws, fraud and abuse laws, corporate practice of medicine and fee-splitting prohibitions, HIPAA privacy, charitable trust law, private inurement, private benefit and excess benefit restrictions, antitrust, licensure, accreditation, Medicare and Medicaid reimbursement, certificate of need/certificate of exemption laws, and medical staff bylaws issues.

We serve as legal counsel to a wide variety of healthcare organizations involved in the financing and delivery of healthcare. We advise clients on a multitude of regulatory issues associated with mergers and acquisitions, joint ventures, network building and adequacy, acquisition of physician practices, physician contracts, physician practice management arrangements, governmental investigations and audits, whistleblower suits, Medicare and Medicaid coverage and reimbursement requirements, attorney general investigations, corporate governance/ fiduciary duty issues, corporate compliance matters, and medical staff disputes.



Our broad base of experience enables us to provide comprehensive, insightful, and cost-effective legal services to healthcare clients. Likewise, our experience representing providers, payers, and ancillary services vendors uniquely positions us to assist with the development of integrated service entities and navigate the regulatory hurdles that may adversely impact such entities.

Whether you need sophisticated advice to develop a business model that clears regulatory hurdles, or a seasoned veteran to defend an enforcement action or respond to a regulatory challenge, we can help. We provide sophisticated counsel on reimbursement issues arising under Medicare, Medicaid, and other governmental health programs. We assist clients in evaluating appropriate billing and coding practices; pursuing alternative pricing and reimbursement mechanisms; and seeking rate “exceptions” under various pricing methodologies. We also represent providers and suppliers in pre- and post-payment audits and reimbursement appeals. Because today’s enforcement environment for healthcare entities often requires a proactive approach to regulatory operations, our attorneys regularly seek Advisory Opinions on behalf of clients and assist clients in making and resolving voluntary disclosures with federal and state regulatory and enforcement agencies. Our experience includes working both with individual entities and with coalitions of diverse participants seeking broad policy changes.

For most healthcare entities, the federal and state civil and criminal laws governing fraud and abuse pose the single most significant area of legal risk. Our attorneys are familiar with false claims acts, self-referral and anti-kickback limitations, and fee-splitting laws. We work closely with clients to develop compliance programs, structure transactions and other financial relationships, establish pricing and guide business operations consistent with these laws. We consult, as appropriate, with government administrative agency and legislative officials to keep our clients informed of the latest enforcement developments and trends.

We also have extensive experience in the emerging and evolving area of telehealth, including the formation, development, and implementation of telehealth networks and institutional programs, drafting and negotiation of agreements between providers and service vendors, and navigating the unique regulatory obstacles confronting telehealth services on the state and federal level, including cross-border issues.

Health Plan Practice

Sheppard Mullin has one of the most active healthcare practices in the country. *Law360* recently named us as the **U.S. Health Law Practice Group of the Year** and we are ranked by *Modern Healthcare* as one of the **"Largest Healthcare Law Firms."** With over 230 healthcare lawyers, our national healthcare team is the "go-to" law firm for health plans and providers considering convergence transactions that result in successful plan/provider alignment. We have led some of the largest and most complex industry transactions, and are working on multiple multi-billion health plan and provider transactions. Additionally, our representation of publicly traded and privately-held health plans has included obtaining licensure under state HMO and insurance laws including the California Knox-Keene Health Care Service Plan Act, contracts under the Medicare Advantage, Medicare Prescription Drug and state Medicaid managed care programs, and compliance with Medicare Advantage, Medicare Part D, Medicaid managed care, Federal Employees Health Benefits Program and Marketplace requirements, as well as appeals of agency decisions and dispute resolution if necessary. Our lawyers regularly provide education and training to health plan administration, inhouse counsel, and compliance staff on an array of issues including fraud and abuse, risk adjustment, medical loss ratio and other compliance matters.



What We Do

- Represent leading HMOs and insurance companies on projects such as mergers and acquisitions, vendor and provider contracting, joint ventures, risk-based arrangements, physician alignment and population health management initiatives.
- Our Healthcare Antitrust practice has been actively involved in multiple negotiations with federal and state antitrust regulators on some of the most complex and heavily scrutinized transactions and has been at the forefront of structuring innovative relationships for both providers and payors undertaking significant transactions, including mergers, joint ventures, intellectual property licenses, and a variety of other affiliations and collaborations.
- Advise health plans that are federal healthcare program contractors on a broad array of issues related to program participation including application submissions, bidding and rating requirements, benefit design, provider contracting and compensation issues including the federal Physician Incentive Plan regulations, medical loss ratio requirements, risk adjustment payment issues, employer group waiver plans, marketing, internal investigations, and program and inspector general audits.
- Provide strategic advice and counseling to health plans in response to state and federal agency investigations, such as market conduct exams, medical loss ratio audits, Mental Health Parity and Addiction Equity Act compliance, and ACA Section 1557 discrimination complaints.
- Represent health plans in litigation, administrative proceedings, and appeals such as denials of initial and service area expansion applications and the imposition of civil money penalties by the Centers for Medicare and Medicaid Services.
- Active in the development and implementation of health plan vertical integration strategies including the alignment of physician groups and networks with plans that are designed to lower health plan provider-related costs, increase patient care quality and secure member access to providers by stabilizing the plan's provider network.
- Represent full service and specialty health plans (including dental and vision plans) in a wide variety of licensing, regulatory, transactional and litigation matters, such as L.A. Care Health Plan, one of the largest public health plans in the country serving low-income and vulnerable populations in Los Angeles County.
- Provide counseling to health plans in dealing with solvency issues involving their provider networks, working with multiple companies that provide support and outsourcing solutions to health plans, including utilization review, sales and marketing and independent review organizations.

Approach to Current Matter

Our proposed approach to help the San Joaquin Valley Insurance Authority (SJVIA) address the challenges presented by multiple unanticipated high-cost out of network claims for spinal surgeries would include:

- Analysis and advice related to the application of No Surprises Act to spine surgeries performed by contracted physician at separately contracted facility
- Analysis and advice related to SJVIA's existing agreement with Anthem to serve as its Administrative Services Organization (ASO)
- Advice about options to pro-actively manage these claims if No Surprises Act does not apply
 - Via business relationship conversation with Anthem regarding their performance as the ASO
 - Via amendment to the Anthem ASO agreement
- Advice about options to manage these claims if No Surprises Act does apply
 - Via amendment to Anthem ASO agreement
 - Via “initial payment” offered to physician prior to IDR process
 - Via conversation with applicable state regulatory agencies
 - Via consumer/enrollee complaint
- Advice about potential liability exposure (e.g. due to provider litigation and/or regulatory enforcement) for non-payment
- Upon the request of SJVIA, attend one or more SJVIA board meetings to provide updates, discuss options, answer questions, and provide guidance
- Pursue or defend litigation against Anthem or the provider, if authorized by SJVIA.

Sheppard Mullin is uniquely suited to assist SJVIA in this matter because of the combination of our expertise in the No Surprises Act, our deep familiarity and positive working relationships with California's state health insurance regulatory agencies, and our deep experience advising public agencies on strategic business and litigation matters.

Sheppard Mullin Rates for San Joaquin Valley Insurance Authority

We value the opportunity to work with SJVIA and are pleased to offer significantly discounted rates for the duration of our representation. Throughout each stage of our engagement, we will stay in close communication and provide regular updates regarding anticipated legal fees, ensuring that we deliver meaningful value and help you achieve your objectives with clarity and transparency.

Timekeeper	Title	Standard Rate	Discounted Rate
Elizabeth Balfour	Partner	\$1,260	\$992.25
Margia Corner	Partner	\$1,440	\$992.25
Kendall Kohlmeyer	Associate	\$895	\$780

With respect to the 2 initial steps in the scope of work, we expect that each will involve fees of \$7,000 - \$10,000. Once we complete this work, we will be able to assess next steps and we expect the time already invested in understanding these issues will allow us to be efficient in pursuing the next steps to address and resolve the problem.

- Analysis and advice related to the application of No Surprises Act to spine surgeries performed by contracted physician at separately contracted facility (\$7,000 - \$10,000)
- Analysis and advice related to SJVIA's existing agreement with Anthem to serve as its Administrative Services Organization (ASO) (\$7,000 - \$10,000)



→ Margia Corner

Partner

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Margia Corner is a partner in the Governmental Practice in the firm's San Francisco and Washington, D.C. offices and a member of the firm's Healthcare Team.

Areas of Practice

Margia is a trusted advisor and proactive problem-solver who brings together executive-level stakeholders to support clients' innovative approaches to transforming healthcare delivery towards value-based models of care. She has over ten years' experience in Medicare and Medicaid reimbursement and other federal and state health care laws and regulations. She has advised academic and non-profit health systems, federally-qualified health centers, clinical laboratories, pharmacies, and health care professionals as well as pharmaceutical manufacturers, medical device companies and health plans.

Prior to joining the firm, Margia served as Co-Interim Deputy General Counsel for Health Affairs, Privacy & Data Protection in the University of California Office of General Counsel, where she advised on Medicare and Medicaid requirements, state licensing and certification laws, the Stark, Anti-Kickback, and Civil Monetary Penalties laws, the 340B Drug Discount Program, federal and state civil rights laws and regulations, managed care contracts, health care litigation and health care transactions.

Articles

- Medicare Payment Policies in 2026
Chicago Medicine, 11.2025
- "Moving the Needle? Recent CMS Efforts to Advance Health Equity," AHLA Connections Magazine, March 2023
- "Change Remains on the Horizon for Medicare Payment Policies for Organ Acquisition," AHLA Bulletin, November 2022
- "CMS Proposes to Expand Its Authority to Deny or Revoke Provider/Supplier Enrollment," AHLA Bulletin, August 2021
- "Questions and Answers to Consider When Finding and Taking Advantage of a Clerkship or Fellowship at a Health Care Organization," AHLA Connections Magazine, September 2019
- "The Medicare Quality Payment Program: Transforming Health Care Delivery to Paying for Value," AHLA, Health Care Compliance Professional's Manual, 2017

Healthcare Law Blog Posts

- "CMS Finalizes Mandatory Ambulatory Specialty Model for Cardiology and Low-Back Pain," November 21, 2025
- "CMS Announces Application Details for Rural Health Transformation Program," September 26, 2025
- "Major Policy Changes Proposed for Medicare Payment, Accreditation, and Prior Authorization for DME Suppliers," August 20, 2025
- "Proposed Medicare Payment Policies for Hospital Outpatient and Ambulatory Surgery Center Services," August 13, 2025
- "State-Directed Payments, Value-Based Care, and the 'One Big Beautiful' Bill: A Comprehensive Analysis," August 1, 2025
- "Federal District Court Upholds Authority of HHS to Pre-Approve 340B Rebate Programs; HRSA Submits Proposed 340B Rebate Guidance," June 4, 2025
- "Proposed Rule on Medicaid Tax Waivers: CMS Moves to Close a Loophole Shifting Costs to the Federal Government," May 28, 2025
- "CMS Administrator Outlines His Vision for CMS at NFP Healthcare Investors Conference," May 22, 2025
- "CMS Proposes Medicare Payment Policies for Hospital Inpatient Services for Federal Fiscal Year 2026," May 6, 2025
- "Recent Legal and Regulatory Developments Involving Gender-Affirming Care," April 29, 2025
- "CMS to Withdraw Federal Medicaid Match for Workforce, Social Needs, and Infrastructure: What States, Health Care Providers and Community Organizations Need to Know," April 16, 2025

Media Mentions

Hospitals Risk Penalties As Trump Pushes Price Transparency

Law360, 03.04.2025

Speaking Engagements

"Realizing the Value in Value-Based Care," California Society for Healthcare Attorneys Annual Spring Meeting, April 2025

"Institute for Medicare & Medicaid Payment Issues, Health Equity Initiatives in Medicare and Medicaid," American Health Law Association, March 2024

"Advising Providers: Legal Strategies for AMCs, Physicians and Hospitals, Advancing Diversity in Academic Medicine After the Harvard/UNC Cases," American Health Law Association, February 2024

"Fostering a Just Culture to Promote Patient Safety," California Society for Health Care Attorneys, May 2023

"340 Program Compliance," UC Ethics Compliance and Audit Symposium, November 2022

"The Future of Medi-Cal," California Society for Health Care Attorneys, April 2022

"Institute for Medicare & Medicaid Payment Issues, Advancing Accountability and Equity through Payment and Care Delivery," American Health Law Association, March 2022

"Academic Medical Centers and Teaching Hospitals Institute, Advancing Accountability and Equity through Payment and Care Delivery," American Health Law Association, February 2022

"Institute for Medicare & Medicaid Payment Issues, Key Recent CMS Innovation Initiatives: Exploration of Policy and Legal Issues," American Health Law Association, March 2021

"Strategic Legal and Business Considerations Regarding Contract Pharmacy Arrangements," 340B Health Winter Conference 2021, February 2021

"Medicare and Other Value-Based Payment Programs and Compliance Oversight," Health Care Compliance Association, December 2019

"340 Program Compliance," UC Ethics Compliance and Audit Symposium, November 2019

"Institute for Medicare & Medicaid Payment Issues, Innovation in a Nutshell: Key Recent CMS Payment Initiatives, Where They Came From, and What You Should Know," American Health Law Association, March 2019

"MACRA - Compliance Oversight," Health Care Compliance Association, December 2017

Events

Changes to Medicare Reimbursement

Healthcare Insights: Navigating Change Under the New Administration
Webinar Series, 10.15.2025

2025 Women in Healthcare Leadership Collaborative (WHLC) Leadership Summit
October 8 - 9, 2025

Institute on Medicare and Medicaid Payment Issues
Health Equity in Medicare and Medicaid
Baltimore, MD, 03.27.2025

Insights and Pathways: Careers In Health Law (Part 2)
Webinar, 01.28.2025

Memberships

- American Health Law Association (2011-Present)
 - Vice Chair, Education, Academic Medical Center and Teaching Hospital Practice Group (2023-Present)
 - Special Topic Advisor, Regulation, Accreditation and Payment Practice Group Leader (2021-2022)

- Regulation, Accreditation and Payment Practice Group Leadership Development Program (2020-2021)
- Young Professionals Council (2019-2020)
- California Society for Health Care Attorneys (2022-Present)
- American Bar Association, Health Law Section (2022-Present)

Podcasts & Webinars

WHLC Summit - Day Two Recording
10.09.2025

Practices

Governmental

Healthcare

Women in Healthcare Leadership Collaborative

Industries

Education

Education

J.D., University of Michigan Law School, 2010, *magna cum laude*, Order of the Coif

B.A., Stanford University, 2004, with distinction

Clerkships

Law clerk to the Honorable Cormac J. Carney, U.S. District Court for the Central District of California

Admissions

California

District of Columbia

Additional Office

Washington, DC



→ Elizabeth S. Balfour

Partner

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Elizabeth Balfour is a litigator and works out of the firm's Del Mar Heights (Northern San Diego) office.

Areas of Practice**Commercial Litigation**

Elizabeth advises her real estate brokerage clients in relation to breach of fiduciary duty and broker liability claims. She handles franchise disputes related to breach of contract, indemnification, and business transfers. Her securities litigation practice includes shareholder derivative claims, class actions, SEC enforcement actions, and internal investigations. She helps clients navigate corporate governance disputes, violations of buy-sell agreements, and claims arising out of mergers and divestitures. Elizabeth serves as a trusted advisor to her clients, providing guidance on risk management issues such as insurance coverage, conflicts of interest, and record retention.

Healthcare

Elizabeth's healthcare practice includes representing provider and payor clients in proceedings initiated by the Office of the Inspector General, the Department of Health and Human Services Office for Civil Rights and other federal and state regulatory agencies. She advises hospitals, medical groups, health systems, managed care plans, and payors in relation to HIPAA, the Stark Law, anti-fraud and abuse compliance, and mandates arising out of the Affordable Care Act. She also assists clients in the information technology, pharmacy and medical device arenas on healthcare regulatory compliance.

Nonprofit Governance

Elizabeth advises public entities in compliance with the Brown Act and the California Public Records Act. She served as outside general counsel for El Centro Regional Medical Center while it was a municipal hospital and advised on contracting, regulatory investigations, and operational matters. Her nonprofit clients include Start Early, a national early childhood development organization, TrueCare, a Federally Qualified Health Center, and Gary and Mary West Health Institute, which is dedicated to advancing access to healthcare for the elderly and operates Gary and Mary West Program of All-Inclusive Care for the Elderly. Elizabeth undertakes bylaws revisions and addresses Board governance questions. She also provides Board training on conflict of interest, ethics, and fiduciary obligations.

Honors

2023 Distinguished Pro Bono Attorney of the Year, Casa Cornelia Law Center

2022 Bob Gerber Pro Bono Award, *Sheppard Mullin*

2021-2026, Recognized for Commercial Litigation, *Best Lawyers*

2017 Recognized as BTI Client Service All-Star

2016 Recipient of YWCA of San Diego's TWIN (Tribute to Women in Industry) Award

AV® Rated, Martindale-Hubbell®

2014 Rated one of the Top Lawyers in Healthcare by *San Diego Magazine*

Experience

Representative Matters

Franchise and Securities Litigation

- Represented a former officer of a publicly traded pharmaceutical company in relation to the Board of Directors Special Litigation Committee's investigation of allegations in a derivative shareholder suit in Delaware Chancery Court.
- Represented a footwear company in a derivative lawsuit brought by a shareholder alleging breach of fiduciary duty. Obtained a favorable settlement.
- Represented a national bank in an action brought by franchisees of a tax preparation service in which plaintiffs asserted unfair business practices and sought to certify a nationwide class. Obtained a complete dismissal of the action before any discovery had occurred.
- Represented a biologics company in a dispute involving indemnification for a third-party claim. Obtained a favorable resolution after litigation was initiated.
- Represented national franchisor in litigation filed by a franchise group regarding franchise agreement compliance. Obtained complete dismissal of all claims.
- Won a two-week trial on behalf of a home health and hospice franchisee.
- Represented a national weight loss franchisor in a class action lawsuit alleging unfair business practices and misrepresentation. Defeated motion for class certification and negotiated a class-wide settlement involving minimal payments to the two named plaintiffs and a coupon offer for company product to any other putative class-members.

Healthcare

- Represented a healthcare provider in a contractual dispute with its former management services company. Negotiated a resolution that facilitated the sale of the healthcare provider.
- Represented a medical group in an investigation initiated by the Department of Health and Human Services Office for Civil Rights.
- Represented a California municipal hospital in the role of outside General Counsel in relation to contracting, governance, joint ventures and strategic alliances, fraud and abuse and Stark compliance, litigation oversight, HIPAA and state privacy law, public bond financing and Brown Act compliance.

- Representing a California district hospital in relation to state and federal healthcare regulatory matters, HIPAA compliance, and OCR reporting and internal investigations.

Articles

- When Common Provisions in Franchise Agreements Yield Uncommon Results
The Franchise Lawyer, Summer 2025
- To Win our Case, Organization and Delegation were Key
ABA Journal, 12.01.2024
- Revive, reinvigorate document-retention policies in light of CPRA
Daily Journal, 12.10.2021

Corporate & Securities Law Blog Posts

- "SCOTUS (Almost) Weighs in on Attorney-Client Privilege for Dual Purpose Communications: 5 Practical Tips to Protect Privilege," February 9, 2023

Eye on Privacy Blog Posts

- "Sharing PHI Without Consent: An OCR Reminder," November 6, 2017

Healthcare Law Blog Posts

- "Navigating Dual Purpose Communications After SCOTUS (Almost) Weighs in on Attorney-Client Privilege: 5 Practical Tips for Healthcare Attorneys," February 13, 2023
- "Are You Ready for 2023? Here's a Quick Checklist to Reduce Legal Risks in the New Year," January 4, 2023
- "California Issues New Health Facility Breach Reporting Requirements," August 2, 2021
- "Patient Empowerment Through Technology is Focus of ENGAGE Conference," December 7, 2018
- "Blog Series Part 7: CMS Proposed Rule on Policy and Technical Changes to the Medicare Advantage, Medicare Prescription Drug Benefit, Medicaid Fee-For-Service, and Medicaid Managed Care Programs for 2020 and 2021," November 28, 2018

Media Mentions

Member Spotlight: Elizabeth Balfour

Federal Bar Association, San Diego Chapter, 06.12.2024

Trial Call with Elizabeth Balfour

The Trial Call 10, 04.05.2024

Sheppard Mullin Team Receives Litigator of the Week Honor in Falcon Healthcare Case

ALM, 01.12.2024

Sheppard Mullin Helps Afghans Put Down New Roots In Calif.

Law360, 07.07.2023

Sheppard Mullin aids Afghans resettling in the US
Daily Journal, 07.03.2023

Speaking Engagements

"AI and the Future of Legal Practice: Perspectives from In-House and Outside Counsel," The Harvard Law School Association of San Diego, February 20, 2025

"Civility in the Legal Profession: Why Civility Makes Good Business Sense," Lunchtime CLE with the ACC San Diego Chapter, June 6, 2024

"Top 5 Priorities for Getting Your Privacy House in Order in 2022," Association of Corporate Counsel, April 26, 2022

"If Your Clients Don't Have a Document Retention Policy, They Will Need One Under the CPRA," San Diego County Bar Association, August 23, 2021

"Covid & Our Courts: Responses, Challenges, and Access to Justice," YCSD Alumni Perspectives, Virtual Event, December 2, 2020

"COVID-19 and Commercial Contracts – Can we get out of theirs? Can they get out of ours?" Association of Corporate Counsel, San Diego Chapter, April 9, 2020

"Plugging Into the Internet of Things: Demystifying the Regulatory Landscape," Association of Corporate Counsel, San Diego Chapter, March 19, 2019

Memberships

Board of Directors, Center for Employment Opportunities

Advisory Board Member, Genesis International Orphanage Foundation

Advisory Board Member, Girls on the Run San Diego

Served on the Judicial Evaluation Committee of the San Diego County Bar Association (2011-2012)

Vice President and Secretary, Board of Directors of the San Diego County Bar Association (2008 - 2010)

Board Member, Legal Aid Society of San Diego (2008 - 2010)

Co-Chair, Children at Risk Committee of the San Diego County Bar Association (2004 - 2006)

Fundraising Chair, Women's Resource Fair Task Force

Member, American Bar Association

Member, Federal Bar Association

Member, California Women Lawyers

Member, Lawyers Club of San Diego

Podcasts & Webinars

Stress OUT!
04.23.2025

Better Sleep, Better You
05.15.2024

Practices

Litigation
Healthcare
White Collar Defense and Investigations
Securities Litigation
Securities Enforcement
Class Action Defense
Real Estate, Energy, Land Use & Environmental

Industries

Financial Services
Healthcare
Insurance
Nonprofit
Retail, Fashion & Beauty

Education

J.D., Harvard University, 1999, *cum laude*
B.A., Yale University, 1996, *magna cum laude*

Clerkships

Served for one year as Law Clerk to the Honorable Marilyn L. Huff, Chief Judge of the U.S. District Court for the Southern District of California

Admissions

California
United States District Court for the Southern District of California
United States District Court for the Central District of California



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Associate

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Kendall Kohlmeyer is an associate in the Corporate Practice Group in the firm's Century City office and is a member of the firm's Healthcare team.

Areas of Practice

Kendall advises healthcare companies on regulatory and transactional matters. Kendall represents entities including individual providers, IPAs, hospitals, medical groups, ambulatory surgery centers, academic medical centers, pharmacies, digital health companies, hospice and home health agencies, and PACE organizations. Her areas of expertise include: the corporate practice of medicine and fee-splitting laws; facility and practitioner licensing requirements; and issues surrounding physician referrals, including the Stark Law and Anti-Kickback Statute, and similar regulations under the laws of various states.

She enjoys advising clients on compliance issues and serving as a healthcare regulatory specialist for mergers, acquisitions, and joint ventures. Kendall helps sellers and buyers on a variety of transactions to identify, assess, and resolve compliance concerns from the start of the due diligence process through post-closing operations.

During her first year at Sheppard Mullin, Kendall proudly dedicated more than 130 pro bono hours to several immigration matters, including petitioning for a family reunification and successfully obtaining status for an asylum-seeker.

Honors

Private Equity Deal of the Year: Lee Fish's sale to Sole Source Capital, *M&A Advisor*, 2023

Articles

- Tracking the Waivers: Implications of the Wind Down of the COVID-19 Public Health Emergency
03.27.2023

Healthcare Law Blog Posts

- "California Issues Two-Year Freeze on PACE Applications: What Providers Need to Know," December 4, 2025
- "Federal District Court Upholds Authority of HHS to Pre-Approve 340B Rebate Programs; HRSA Submits Proposed 340B Rebate Guidance," June 4, 2025

- "FDA's Semaglutide Shortage Resolution: Legal Implications and Risks for Compounding Pharmacies," March 21, 2025
- "Massachusetts Senate Passes Bill to Increase Oversight of Private Equity Healthcare Transactions," July 25, 2024
- "OHCA Proposes Amendments to its Cost and Market Impact Review Program," June 13, 2024
- "California is Capping Health Care Cost Increases – Starting at 3.5% in 2025," May 7, 2024
- "CMS Issues CY2025 Medicare Advantage and Part D Final Rule," April 15, 2024
- "OIG Sparks Public Excitement about Managed Care and Alludes to Incoming Enforcement Guidance," April 1, 2024
- "OHCA Published Near-Final Draft of Regulations Requiring Notice and Review of Material Healthcare Transactions in 2024," December 6, 2023
- "CMS Promotes Competition, Transparency, Health Equity and More in the CY2025 Medicare Advantage and Part D Proposed Rule," November 13, 2023
- "OHCA's Revised Regulations Following Comments from Industry Stakeholders," October 24, 2023
- "Public Workshop for OHCA's Proposed Regulations Sparks Lively Discussion Among Industry Stakeholders," September 7, 2023
- "Part 3: An Update on the Federal and State E-Roe-sion or P-Roe-tection of Abortion Rights," August 9, 2023
- "HHS OIG Publishes Eagerly-Anticipated Federal Information Blocking Enforcement Final Rule," July 5, 2023
- "OIG 2022 Advisory Opinions: Year in Review," May 8, 2023
- "Key Healthcare Provisions of the Consolidated Appropriations Act, 2023," January 6, 2023

Practices

Corporate

Women in Healthcare Leadership Collaborative

Industries

Healthcare

Life Sciences

Education

J.D., University of California, Hastings, 2022, *cum laude*

B.S., Marquette University, 2019, *cum laude*

Admissions

California