



David S. Greenberg

PARTNER

David advises the health care industry on managed care, reimbursement, regulatory and compliance matters, disputes, and government investigations.



Industries

Health Care

- Government Investigations
- Home Health, Hospice & Palliative Care
- Hospitals & Health Systems
- Provider-Payor, Health Plan & Managed Care Disputes

Nonprofits & Associations

Practices

- Government Enforcement & White Collar
- False Claims Act Investigations & Litigation
- Investigations

Education

University of Maryland School of Law, JD
Colgate University, BA, with honors

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Washington, DC

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David delivers cutting-edge legal advice and practical business solutions to health care providers facing challenges with their governmental and commercial reimbursement and revenue cycle management. He is an expert in the nuances of complicated managed care negotiations and contracting, payment disputes, audits, payer investigations, and litigation. David is a seasoned advocate representing providers in high-stakes disputes with managed care companies, health insurers, third-party administrators, FEHB plans, Medicare Advantage plans, Medicaid managed care plans, TRICARE, and state and local governmental plans.

David also focuses on regulatory and compliance matters involving the Affordable Care Act, the Anti-Kickback Statute, the No Surprises Act, the Stark Laws, managed care laws, state licensure, self-disclosures, reimbursement and payment, and participation in Medicare, Medicaid, and other government health care programs. He conducts internal investigations and represents health care companies in state and federal audits, enforcement actions, False Claims Act investigations, and litigation.

David regularly speaks and writes on legal issues impacting the health care industry. He is editor-in-chief of *Health Care Counsel*, which provides industry executives with practical information for complying with and succeeding within the myriad of federal and state laws impacting the provision of health care. Additionally, he is the lead editor of the Practising Law Institute treatise *Health Care Litigation and Risk Management Answer Book* and is a contributing author to the Bloomberg Law treatise: *Health Care Fraud and Abuse: Practical Perspectives*.

Client Work

David represents integrated health care companies, dialysis providers, clinical laboratories, hospital systems, home health providers, urgent care clinics, ambulatory surgery centers, pharmaceutical companies, hospices, long-term care providers, pharmacies, physician practice management companies, and physicians.

His recent work has included:

- Representing hundreds of health care providers in reimbursement litigation against the Defense

- Health Agency and the TRICARE program with hundreds of millions of dollars in dispute.
- Defending multiple pharmacies in a \$25 million PBM audit.
 - Advising a physician practice management company on the No Surprises Act and a \$10 million reimbursement dispute with an insurer regarding a managed care contract.
 - Drafting value-based managed care contracts for a disease management company.
 - Representing a dialysis company in a multi-million-dollar audit initiated by a PBM regarding pharmaceuticals.
 - Representing a national urgent care provider in a credentialing and reimbursement dispute with an insurer.
 - Defending a clinical laboratory in a multi-million-dollar reimbursement dispute against a Medicare Advantage plan.
 - Counseling a national physician practice company on fraud and abuse and compliance matters.
 - Developing and implementing the overhaul of the compliance program for a health care and social services agency.
 - Defending a medical device company in a special investigation unit (SIU) payer investigation and parallel US Department of Justice (DOJ) investigation.
 - Counseling a national home health company on regulatory, reimbursement, and compliance matters related to its participation in state Medicaid programs.
 - Conducting internal investigations on behalf of multiple skilled nursing facility chains concerning compliance with Medicare program billing and payment rules.
 - Acting as outside general counsel for a nonprofit community health and social service organization.
 - Acting as outside general counsel to a startup, health care technology company.

Previous Work

Prior to joining ArentFox Schiff, David worked in the DC office of a leading national law firm where he specialized in antitrust and health care litigation. While at that firm, he litigated complex cases in state and federal court involving health insurers, innovator pharmaceutical companies, generic pharmaceutical companies, and pharmacy benefit managers.

Upon completion of law school, David worked as an attorney for the Civil Division of the DOJ. While at DOJ, he was a member of the small team of lawyers responsible for administering the federal September 11, 2001, Victim Compensation Fund.

Professional Activities

David is a member of the American Health Lawyers Association.

Publications, Presentations, and Recognitions

David was rated among the *Best Lawyers in America* for Employee Benefits (ERISA) Law 2027.

David speaks and publishes frequently on issues pertaining to the health care industry, particularly revenue cycle management, managed care contracting and disputes, audits and investigations, the False Claims Act, and health care litigation.

His speeches and presentations include:

- “Overpayment Recoveries by Health Insurers: Bringing and Defending Claims, Evaluating Merits, Scope of Recovery,” BARBRI CLE webinar, October 1, 2025
- “Overpayment Recoveries by Health Insurers: Bringing and Defending Claims, Evaluating Merits, Scope of Recovery,” Strafford CLE webinar, October 6, 2022
- “Overcoming Out-of-Network Reimbursement Challenges: Assignment of Benefits, Improper

Denials and Underpayments,” Strafford CLE webinar, January 12, 2022

- “Overpayment Recoveries by Health Insurers: Bringing and Defending Claims, Evaluating Merits, Scope of Recovery,” Strafford CLE webinar, August 5, 2021
- “HIPAA and Virginia Law Regarding Security and Privacy,” VA AAHAM 2019 Annual Meeting & Conference, December 5, 2019
- “Fraud and Abuse Initiatives by Health Insurers against Providers: Perspectives from Both Sides,” American Health Lawyers Association (AHLA) 2018 Fraud and Compliance Forum, September 26, 2018
- “Dealing with Problem Payors – Legal Solutions for Providers in Reimbursement Disputes,” Healthcare Financial Management Association (HFMA) Virginia-DC Fall Education Conference, September 21, 2018
- “Health Law Roundtable Discussion with Senior Government Attorneys from CMS, DOJ, and OIG,” ABA/ArentFox Schiff LLP Event, July 19, 2018
- “Emerging Risk Management and Litigation Issues for Health Care Organizations: What Keeps Us Up at Night?,” PLI Webcast, October 8, 2015
- “Moving to Outcome-Oriented Care: Regulatory and Enforcement Challenges,” American Health Lawyers Association Fraud and Compliance Forum, September 27, 2015
- “Navigating Reverse False Claims and Medicare Overpayments Amid Strict Enforcement of the 60-Day Rule,” Strafford Webinars, December 17, 2014
- “Working with the C-Suite and Outside Counsel,” George Washington University Healthcare Corporate Compliance Program Capstone Presentation, September 30, 2014

Life Beyond the Law

When David is not working, he likes to escape DC for the mountains and lakes of northern New Hampshire with his wife and two kids. He also maintains an unhealthy allegiance to DC’s long-suffering sports teams (although the Capitals and Nationals have offered him a bit of relief in past years).

Bar Admissions

[District of Columbia](#)

[Maryland](#)