

Thomas Beimers

Partner

Minneapolis

Washington, D.C.

Biography

Health care and life sciences industry clients with challenging regulatory compliance problems, especially False Claims Act (FCA) investigations, turn to Tom Beimers. Tom's service with the Department of Health and Human Services Office of Inspector General (HHS OIG), combined with extensive private practice litigation and investigations experience, helps clients navigate all phases of complex regulatory matters.

Tom enjoys advising health care and life sciences clients on regulatory compliance and health care fraud and abuse matters. He regularly provides strategic analysis regarding business arrangements and proposed transactions, including customer contracts, discount and rebate arrangements, business courtesies, consulting agreements, marketing programs, aggregate spend reporting, and charitable programs. Tom's experience with OIG and as an advisor to multiple life sciences and health care companies allows him to benchmark against industry standard practices and agency perspectives. This broad vantage point helps ensure that clients are simultaneously able to meet legal requirements and engage in competitive business arrangements.

Tom had a distinguished career in government before joining his previous international law firm. He served as senior counsel for HHS OIG, where he helped resolve major FCA cases involving Anti-Kickback Statute violations, off-label marketing, drug pricing, and



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Languages

English

Practices

Health

Medical Device and Technology
Regulatory

Pharmaceuticals and Biotechnology
Regulatory

Investigations, White Collar, and
Fraud

Industries

Life Sciences and Health Care

Medicaid and Medicare reimbursement, and served as a monitor for manufacturers and providers operating under Corporate Integrity Agreements. He was also a Special Assistant U.S. Attorney, serving as a prosecutor for the Department of Justice's Medicare Fraud Strike Force in Detroit, Michigan. In that role, he oversaw all phases of investigations into violations of criminal health care fraud laws, including jury trials.

Tom is a frequent national speaker and author on topics related to health care fraud and abuse, white collar criminal defense, and compliance matters.

Representative experience

Lead defense counsel on numerous False Claims Act matters involving allegations of Anti-Kickback Statute and fraud violations in medical device industry.

Routinely handles internal investigations involving matters such as fraud allegations, Anti-Kickback Statute compliance, marketing and promotion practices, drug pricing, and reimbursement issues.

Served as interim chief compliance officer for global medical device manufacturer.

Advise clients on compliance with aggregate spend reporting required under CMS Open Payments Law (Physician Payments Sunshine Act).

Advise manufacturer and provider clients on negotiation and implementation of Corporate Integrity Agreements.

Former prosecutor with joint DOJ/HHS Medicare Fraud Strike Force.

While at OIG, served as government monitor for several pharmaceutical industry and provider Corporate Integrity Agreements.

Latest thinking and events

■ News

- Providers & payers sign U.S. pledge to develop AI responsibly, as HHS finalizes Health IT rule

Areas of focus

False Claims Act and Qui Tam

Education and admissions

Education

J.D., University of Minnesota Law School, magna cum laude, 1998

B.A., Macalester College, Phi Beta Kappa, 1991

Memberships

American Health Law Association

Health Care Compliance Association

Federal Bar Association

Bar admissions and qualifications

Minnesota

District of Columbia

Court admissions

U.S. Supreme Court

U.S. Court of Appeals, District of Columbia Circuit

U.S. Court of Appeals, Eighth Circuit

U.S. Court of Appeals, Fifth Circuit

U.S. Court of Appeals, Fourth Circuit

U.S. Court of Appeals, Ninth Circuit

- News
 - OIG's first-ever General Compliance Program
Guidance covering all health care parties released
- News
 - Supreme Court's Schutte decision: the meaning of knowledge remains elusive
- News
 - CMS Proposes Significant Changes to Medicaid Drug Rebate Program
- News
 - Oral arguments suggest hesitancy from SCOTUS to agree with the Seventh Circuit on SuperValu FCA case
- News
 - Sixth Circuit weighs in on meaning of causation, remuneration for False Claims based on alleged kickbacks