

About Liles Parker

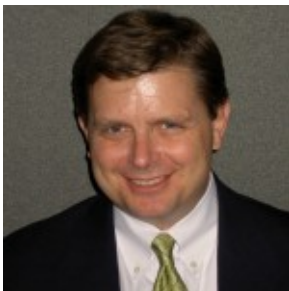


Liles Parker attorneys have the litigation experience, statutory/regulatory understanding, and counseling skills necessary to effectively analyze and appeal complex Medicare ZPIC audit cases. A number of our attorneys have served as Federal and State prosecutors and have the skills needed to represent your interests.

Notably, several of our attorneys have also held significant positions in the U.S. Department of Justice (DOJ), including serving as the first and third **National Health Care Fraud Coordinators** for the Executive Office for U.S. Attorneys. There, our attorneys were instrumental in implementing DOJ's guidance on the use of the False Claims Act (FCA).

We aggressively work to represent your interests and present your case. We strive to provide quality, innovative representation. Martindale-Hubbell has rated our firm as "AV." This honor is "limited to only the most distinguished law practices; those that have achieved the AV rating. The 'A' signifies the highest level of legal ability, while the 'V' denotes 'very high' adherence to professional standards of conduct, ethics, reliability, and diligence."

Meet Our Health Care Attorneys



Robert W. Liles, Esq.

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Robert Liles focuses his practice on Medicare ZPIC audit / overpayment cases, fraud defense matters, internal reviews / investigations, compliance and regulatory matters. Mr. Liles has represented a wide variety of clients in civil and criminal proceedings and complex civil litigation cases. Before entering private practice, Mr. Liles served as Deputy Director for Legal Programs at the United States Department of Justice (DOJ), Executive Office for United States Attorneys (EOUSA). Prior to serving in Washington, D.C., he worked as an Assistant United States Attorney in the Southern District of Texas, Houston office, where he primarily handled False Claims Act matters and cases. In 1997, Mr. Liles was detailed to the EOUSA in Washington, D.C. as its first National Health Care Fraud Coordinator. In this capacity, he advised Assistant United States Attorneys around the country on civil and criminal health fraud statutes, schemes, investigative tools, privacy concerns, and compliance issues. Mr. Liles has taught and lectured at more than 80 national conferences and seminars to DOJ prosecutors, investigators, auditors, and industry representatives on a variety of civil and criminal fraud and regulatory issues. He has served as faculty for the Georgetown University / National Institute of Trial Advocacy. While at DOJ, Mr. Liles received a Director's Award (Executive Office for United States Attorney's highest award). Mr. Liles' management background provides a firm understanding of the real-life operational and regulatory problems faced by corporations.



Michael Cook

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Michael Cook has more than 35 years experience successfully representing a wide variety of health care related clients in regulatory, compliance, reimbursement and business matters. This experience includes managing the health care practices in the Washington, DC offices of several large national law firms. Additionally, Mr. Cook began his career representing the Federal regulators of the Medicare and Medicaid programs as an attorney with the Office of General

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Counsel of the United States Department of Health and Human Services – often on significant matters of the highest profile and sensitivity, and during his tenure at the Department, as a Special United States Attorney for the Northern District of Illinois. He has extensive experience representing clients before the U.S. Department of Health and Human Services and numerous State regulatory agencies. Mr. Cook has lectured extensively to groups on health care related matters, has published extensively on issues of interest to the health care community, currently serves on the Editorial Board of the American Health Lawyers Association Journal of Health and Life Sciences Law, and has served as co-chair of a subgroup of the Health Care Transition Team and as a member of the Long Term Care Work Group for a former Governor of Virginia. He also has counseled candidates for state office on the health care reform legislation. Mr. Cook's biography is listed in Who's Who in American Law and Who's Who in America, and he has attained the highest peer review rating in legal ability and ethical standards from Martindale Hubbell.



Paul Weidenfeld

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Paul Weidenfeld focuses his practice on defending providers and individuals in False Claims Act (or whistleblower) cases, and criminal health care fraud investigations. Prior to joining Liles Parker, Mr. Weidenfeld spent over a decade prosecuting healthcare and procurement fraud cases for the Department of Justice, including two years as the National Health Care Fraud Coordinator for the Executive Office for U.S. Attorneys, and he was also a partner in a prestigious healthcare firm. In addition to his subject matter expertise in healthcare and procurement fraud, Mr. Weidenfeld is a litigator in every sense of the word. He has tried more than 50 cases to verdict, made more than 25 appellate arguments, and appeared before virtually every court in this country – including the United States Supreme Court. Mr. Weidenfeld's rare combination of subject matter expertise and extensive hands-on litigation experience is the perfect combination for managing the defense in complex fraud investigations.

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Jennifer Papapanagiotou

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Jennifer Papapanagiotou focuses her practice on corporate and regulatory matters for healthcare providers. Before joining Liles Parker, Ms. Papapanagiotou was in private practice where she assisted hospitals, physicians and physician groups, skilled nursing facilities, home health agencies, independent diagnostic testing facilities, and health insurers, among others, with a variety of transactions, fraud and abuse analyses, and Medicare and Medicaid program questions. In her work, Ms. Papapanagiotou has conducted analyses of proposed and existing business arrangements for compliance with federal and state fraud and abuse laws, drafted a wide variety of agreements, including employment contracts, professional services and medical director agreements, partnership and joint venture agreements, and real property and equipment leases, and responded to day-to-day issues and legal questions faced by healthcare providers. Further, she has addressed numerous Medicare and Medicaid program coverage and reimbursement issues raised by her clients. In addition to her experience in transactional and regulatory matters, Ms. Papapanagiotou has supplied substantive support for healthcare investigations and litigation. Her work has included representing hospitals, skilled nursing facilities, physicians and others being investigated for potential violations of federal and state healthcare laws. She has also served as the healthcare subject matter expert in representation of clients being sued over alleged violations of contractual relationships.

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Lester "Les" Johnson

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Lester W. Johnson, Jr., "Les," is a partner in the Baton Rouge office of Liles Parker PLLC. Mr. Johnson helps clients navigate the myriad of regulatory, compliance and business issues facing today's health care providers and practitioners. Core areas of Mr. Johnson's practice include handling Medicare & Medicaid appeals; Medicare and Medicaid participation and compliance; Stark and Anti-kickback law compliance, state self-referral prohibitions and any other regulatory issues a client may face. He also assists clients with operational and business issues involving hospital/medical staff relations, practitioner credentialing, health care contracting issues, mergers and acquisitions, antitrust hurdles, joint ventures, and practice formation and restructuring. Les is a frequent presenter on regulatory compliance, fraud & abuse, and business issues facing health care providers and practitioners. He was named a Health Care Hero by *New Orleans City Business Magazine*, and was also recognized by the Gillis Long Poverty Law Center for his work to help open the Lower 9th Ward Health Clinic, a free clinic opened in early 2006 in New Orleans' flood ravaged Lower 9th Ward neighborhood.



David Parker

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David Parker litigates Medicare administrative appeals in post-payment audit, pre-payment review and revocation matters. He also advises health care providers on ZPIC and other enforcement audits, and advises on fraud defense. He also handles business transactions, including private debt and equity financings and the purchase and sale of businesses, with an emphasis on health care organizations. He represents buyers and sellers in the purchase or sale of business

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operations and entities. His equity finance practice includes venture capital and similar early-stage transactions, and many forms of later stage equity capital formation. He also provides advice on general corporate matters. From 1995 until 2006, Mr. Parker was a partner with Dickstein Shapiro LLP in Washington, DC. From 1979 to 1995, Mr. Parker was the general counsel of Allied Capital, a publicly traded Business Development Company headquartered in Washington, DC.



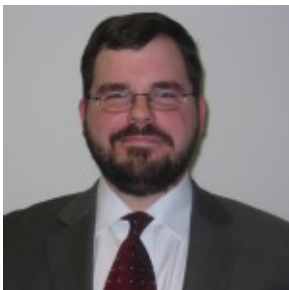
Richard Pecore

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Richard Pecore is a licensed Texas attorney and has worked on a variety of health care related matters and cases over the years. He has extensive civil litigation experience and will be representing Firm clients in “big-box” overpayment cases brought by Recovery Audit Contractors (RACs), Zone Program Integrity Contractors (ZPICs) and Program Safeguard Contractors (PSCs). In recent years, Mr. Pecore has represented virtually hundreds of clients in health care related cases, conducting legal research, handling depositions and representing clients in contentious hearings.



Adam Bird

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Adam Bird is an associate attorney with Liles Parker, where he focuses his practice principally on health law and regulatory compliance. Mr. Bird represents a wide variety of clients- including skilled nursing facilities, home health agencies, durable medical equipment suppliers, and community mental health centers- in Medicare overpayment audits where the amounts in controversy routinely exceed several million dollars. Mr. Bird also works with providers and suppliers to achieve regulatory compliance by designing and implementing effective compliance plans, conducting mock audits, and performing comprehensive risk assessments and gap analyses.

Over the years, we have handled a multitude of health care fraud and Medicare overpayment cases.

Cases handled have involved claims covering:

- Home Health Services.
- DME Supplies.
- Laboratory Claims.
- Evaluation and Management (E/M) Claims.
- Partial Hospitalization Program Services.
- Physical, Occupational and Speech Therapy Services.
- Ambulance Transport Claims.
- Oncology Services and Medications.
- Chiropractic Services.

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- Cardiology Services.
- Podiatry Services.
- Rehabilitation Services.
- Hospital-Based Services and Tests.
- Nurse Practitioner/Physician Assistant Services Billed Under "Incident To" and "Shared/Split Services" Billing Rules.

Our health care practice provides legal assistance in the following types of cases:

- Representing providers in ZPIC audits.
- Representing providers in RAC audits.
- Representing providers in PSC audits.
- We have extensive experience challenging the validity of the statistical sampling methodology utilized by Medicare contractors when extrapolating the alleged damages in a case.
- Handling Medicare administrative appeals, including appeals at the redetermination, reconsideration and Administrative Law Judge (ALJ) and Medicare Appeals Council (MAC) levels of appeal. In selected cases, we can pursue an appeal beyond, to U.S. District Court.
- Representing health care providers in connection with HHS-OIG, DOJ and Grand Jury subpoenas and investigations.
- False Claims Act – Qui Tam litigation.
- Representing Nursing Home/Long Term Care facilities in Overpayment and billing disputes.
- Handling Stark self-referral questions and issues.
- Representing health care providers in connection with Anti-Kickback Statute allegations and cases.

Compliance counseling services provided include:

- Designing and implementing an effective regulatory Compliance Program.
- Counseling health care organizations, their officers and directors in connection with government enforcement measures.

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- Handling Medicare overpayments.
- Representing health care providers in connection with "Voluntary Disclosure" issues and concerns.
- Providing compliance training to professional and support staff.
- Serving as outside compliance counsel for a health care practice or organization.
- Responding to complaints filed by an employee or patient against a health care provider.

Over the years, our attorneys have represented a wide variety of specialty health care providers in a wide variety of the areas. We look forward to answering any questions that you have regarding our services. Please give us a call at 1 (800) 475-1906 for a complimentary consultation.