



Alissa D. Fleming

Shareholder

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Health care providers call upon Alissa Fleming for her unique perspective as a former nurse to help them navigate matters involving regulatory compliance and litigation.

As both an attorney and a registered nurse, Ms. Fleming uses her first-hand experience to understand and strategically address her clients' most significant challenges.

Ms. Fleming is the leader of Baker Donelson's Health Care Regulatory team. She represents large hospital systems, skilled nursing facilities, clinical laboratories, home health agencies, hospice providers, behavioral health providers, assisted living facilities, physicians, and health care professionals. She focuses her practice on regulatory compliance; operations and risk management; Medicare and Medicaid reimbursement; Medicare and Medicaid audits and appeals; payor disputes and litigation; post-payment reviews; voluntary repayments; investigations and disclosures under the Centers for Medicare & Medicaid Services (CMS) and Office of Inspector General (OIG) self-disclosure protocols involving potential violations of the False Claims Act (FCA), Anti-Kickback Statute, and Stark Law; internal investigations involving allegations of health care fraud and retaliation under the FCA; medical staff matters; disciplinary proceedings and peer review; confidentiality of medical information; facility licensing; provider based regulations; 340B; scope of practice; professional licensing, and other health care issues involving state and federal law.

When clients need assistance with litigation, Ms. Fleming offers counsel at the trial and appellate levels, including jury and non-jury trials and hearings, such as administrative proceedings and appeals, in claims ranging from disciplinary proceedings, payor-provider disputes, and qui tam whistleblower actions. With respect to payor disputes, she has represented hospitals, health systems, behavioral health providers, home health providers, and hospice providers in payment disputes against payors including commercial health insurers and managed care organizations, Medicare managed care organizations, Medicaid managed care organizations, Medicare, and Medicaid.

Representative Matters

- Represented a large health system in a dispute adverse to a national Medicare Advantage Organization (MAO) involving improperly downgraded claims and denials of inpatient admission, resulting in a favorable settlement for the health system.
- Represented national for-profit hospital system in disputes adverse to national MAO involving improperly downgraded claims and denials of inpatient admission.
- Represented a multi-state hospital system in 340B underpayments.
- Represented a large academic medical center in a payor dispute adverse to a national MCO for non-payment/underpayment for inpatient behavioral health services.
- Represented a large academic medical center in a dispute adverse to a national MAO and MCO involving numerous improper reimbursement and contractual practices, including underpayments.
- Represented a behavioral health provider in alleged overpayments arising from post-payment review adverse to a national Medicaid managed care company, resulting in a complete reversal of the overpayments and contract amendments.
- Represented a regional home health provider in arbitration adverse to a national MAO involving improper denial of claims based on coding, timely filing, medical necessity, and additional issues, resulting in favorable settlement for the provider.

- Represented a national hospice provider in a Medicaid overpayment appeal, resulting in a favorable settlement for the provider.
- Represented a national hospice provider in a Zone Program Integrity Contractor (ZPIC) audit, resulting in a seven-figure overpayment and appeals to the Administrative Law Judge (ALJ) and Medicare Appeals Council (MAC).
- Represented large, multi-state skilled nursing facilities before the Provider Reimbursement Review Board (PRRB) to challenge Medicare Quality Reporting Program (QRP) Annual Payment Update (APU) reductions.
- Represented a large, multi-state rehabilitation hospital before the Administrative Law Judge to challenge Medicare hospital price transparency penalties.



Professional Honors & Activities

- Listed in *Chambers USA* as a leading Healthcare lawyer in South Carolina (2025)
- Listed in *Charleston Business Magazine's* Legal Elite for Healthcare and Labor & Employment (2020 – present); Employment – Defendant (2023)
- Listed as a South Carolina Rising Star in Health Care and General Litigation (2013 – 2015)
- AV® Preeminent™ Peer Review Rated by Martindale-Hubbell
- Member – American Health Lawyers Association (AHLA)
- Member – Charleston County Bar
- Council Member – South Carolina Bar, Health Care Law Section
- Member – American Association of Nurse Attorneys
- Member – TASIS Foundation Board of Directors



Publications

- "Important Issues for 340B Providers in the OPPS Final Rule" (December 2025)
- "HRSA Announces 340B Rebate Pilot Program" (August 2025)
- "EKRA's Application to Marketing Arrangements: Laboratories and Other Providers" (August 2025)
- "Health Care Employers Get Ready: Virginia Mandates New Workplace Violence Incidents Reporting System Obligations" (May 2025)
- "Proposed Rule for Nursing Homes: Key Updates for FY 2026" (May 2025)
- "HHS Previews Guidance Addressing Implementation of 340B Rebate System" (May 2025)
- "Trump's Executive Order Targets 340B Drug Pricing Program" (April 2025)
- "Federal Court Vacates LDT Final Rule" (April 2025)
- "HHS and HRSA Defend 340B Discount Model Against Pharma Rebate Plan" (April 2025)
- "Looking Back at 2024: Key Health Care Regulatory Legal Developments in Fraud and Abuse, Compliance, and Enforcement" (March 2025)
- "CMS Enacts New CLIA Regulations Effective January 2025" (March 2025)
- "2025 Medicare Physician Fee Schedule: Payment and Overpayment Policies" (December 2024)
- "Temporary Regulatory Relief for South Carolina Health Care Providers Responding to Hurricane Helene" (October 2024)
- "Significant Changes Affecting Hospitals in CMS's FY 2025 IPPS Final Rule," *Payment Matters* (September 2024)
- "CMS Proposes Significant Changes to the Medicare Shared Savings Program and 60-Day Rule," *Payment Matters* (August 2024)
- "CMS Proposes Extending COVID-Era Telehealth and Supervision Flexibilities through CY 2025" (July 2024)
- "Fundamentals of Medicare Laboratory Billing: Avoiding the Pitfalls of Certain Test Ordering Policies," *Laboratory Economics Compliance & Policy Report* (June 2024)

- ""Let's Stay Together"
Managing The Changing Relationships Between Hospitals and Skilled Nursing Facilities" (April 2024)
- "Recent \$345 Million Settlement Underscores Critical Importance of Appropriate Physician Compensation" (January 2024)
- "2024 Medicare Physician Fee Schedule Final Rule Extends COVID-19 Telehealth Policies and Includes Bonus Extension," *Payment Matters* (November 2023)
- "Significant 2024 Medicare Physician Fee Schedule Rule Proposals: E/M, Social Determinants of Health, and Behavioral Health," *Payment Matters* (August 2023)
- "CY 2024 Medicare Physician Fee Schedule: Extending Telehealth Flexibilities and Seeking Future Policy Input," *Payment Matters*, republished August 23, 2023, in *Law360* (July 2023)
- "FY 2024 Hospice Payment Rate Updated Proposed Rule" (May 2023)
- Co-author – "Long-Term Care: Regulatory Issues, Enforcement, and Liability," Chapter by Alissa D. Fleming, Catherine F. Wrenn, and Katherine Denney, *HEALTH LAW HANDBOOK*, WestGroup, a Thomson Company (2023 Edition)
- "Tips for Long Term Care Providers' Prevention of and Defending Against Quality of Care Allegations" (March 2023)
- "CMS Proposes Amendment to 60-Day Overpayment Rule that Would Remove "Reasonable Diligence" Standard and Replace with False Claims Act's "Actual Knowledge" Standard," *Payment Matters*, republished March 15, 2023, in *Westlaw Today* (February 2023)
- "Baker's Dozen – Negotiated Risk Agreements in the Assisted Living Community Setting" (September 2022)



Speaking Engagements

- "Navigating Medical Staff Issues: Challenges Involving Medical Necessity," AHLA Advising Providers: Legal Strategies for AMCs, Physicians, and Hospitals Conference (February 2025)
- "Navigating the 340B Maze: Payment Implications and Strategies for Providers Related to Medicare Advantage," South Carolina Hospital Association Webinar (January 2025)
- "Case Studies and Medicare Advantage Disputes: Practical Implications and Strategies for Providers," South Carolina HFMA 2024 Annual Conference (May 2024)
- "To Disclose or Not to Disclose? Navigating a Compliance Complaint from A-Z with General Counsel," HCCA Annual Compliance Institute (April 2024)
- "Improving Revenue Cycle from the Legal Eye View," 2024 HFMA South Eastern Summit (February 2024)
- "Hot Topics in Provider Repayments," AHLA's Speaking of Health Law Podcast (February 2024)
- "2024 Medicare Advantage and Part D Final Rule: Helpful Points for Providers," South Carolina Healthcare Financial Management Association (October 2023)
- "Navigating the TPE Process and Updates to the OIG Work Plan: What Hospice Providers Need to Know to Prepare and Respond," South Carolina Home Health and Hospice Association Conference (September 2023)
- "Navigating Payor Disputes," South Carolina Healthcare Financial Management Association Annual Institute (May 2023)
- "Emerging from the Emergency: Legal and Regulatory Challenges in the Post-PHE Era," Association For Home & Hospice Care's (AHHHC) 51st Annual Convention & Exposition (April 2023)
- Moderator – "Regulatory Pressure Points in a New World: A Post-Pandemic Preview," 2022 Baker Donelson Long Term Care Symposium (November 2022)
- "The Post-Emergency Horizon: Navigating Through The Termination Of Covid-19 Public Health Emergency (PHE) And Other Emergency Declarations," South Carolina Primary Care Association (October 2022)
- "Quality of Care/Resident Abuse & Neglect in Long Term Care," North Carolina Health Care Facilities Association (NCHCFA) (October 2022)

- "Liability and Long-Term Care," AHLA Annual Meeting 2022 (June 2022)
- "No Surprises Act and Good Faith Estimates," Association Of South Carolina Oncology Managers (ASCOM) (May 2022)
- "Update on CARES Act Provider Relief Fund," ASCOM (May 2021)
- "The Use of Telemedicine in Home Health and Hospice," South Carolina Home Care and Hospice Association (SCHCHA) webinar (December 2020)
- "Enhanced Enforcement Actions Against Long-Term Care Facilities, State Survey, and Recent Interim Final Rule Making," Health Care Compliance Association (HCCA) webinar (September 2020)
- "Telehealth Services, Fraud, and Abuse – Emerging Issues," Palmetto Care Connections (February 2020)
- "Legal Issues Impacting Home Care & Hospice Professionals," SCHCHA 2019 Annual Conference and Expo (December 2019)
- "Employers Beware: A Speed Round of Trending Topics," South Carolina Chapter of the Association of Corporate Counsel (ACC) CLE Seminar (June 2019)
- "Legal Quick Hit: Compliance, Ethics & Government — A Healthcare Perspective: The Role of Outside Counsel in Internal Investigations and Considerations Toward Protecting the Attorney Client Privilege," ACC webinar (June 2018)
- "Risk Management," South Carolina Department of Mental Health (SCDMH) panel (2013)
- "HIPAA Uses and Disclosures," Trident Technical College: Medical Law & Ethics Course (2010)



Webinars

- Navigating Risks & Implications of CMS's SNF Probe & Educate Review (June 2023)



Education

- University of Miami School of Law, J.D., 2005
- University of Virginia, B.S.N., 2000, with distinction



Admissions

- South Carolina, 2005
- District of Columbia, 2017
- Virginia, 2017
- U.S. District Court of Appeals, Fourth Circuit
- U.S. District Court, South Carolina