

## **Troy Barsky Partner Crowell & Moring LLP**

Troy Barsky is a partner in Crowell & Moring's Washington, D.C. office and a member of the firm's Health Care Group, where he focuses on health care fraud and abuse, and Medicare and Medicaid law and policy. Troy counsels all types of health care entities, including hospitals, group practices, and health plans on the physician self-referral law (Stark Law) and the Anti-Kickback Statute, innovative healthcare delivery models, such as Accountable Care Organizations (ACOs), and Medicare & Medicaid payment and coverage policy. He also defends clients seeking resolution of government health care program overpayment issues or fraud and abuse matters through self-disclosures and negotiated settlements with the U.S. Department of Justice, U.S. Health & Human Services Office of the Inspector General and the Centers for Medicare & Medicaid Services (CMS).

Troy has extensive healthcare government experience, serving at the U.S. Department of Health & Human Services (HHS) for 11 years, from 2002-2013. Prior to joining the firm, Troy was the Director of the Division of Technical Payment Policy at CMS from 2009 to 2013 where he was responsible for Stark law policy and other Medicare payment issues. He implemented important sections of the Affordable Care Act, including the creation, development, and operation of the CMS Voluntary Self-Referral Disclosure Protocol (SRDP). Troy was also a key team member in the development of

the Medicare Shared Savings Program and Medicare ACOs including the issuance of fraud and abuse waivers associated with this program. Additionally, he advised the Center for Medicare & Medicaid Innovation (CMMI) in the development and testing of new demonstrations and models. Prior to joining CMS, Troy served in the HHS Office of the General Counsel, CMS Division, Program Integrity Group from 2002-2009. In that role, he focused on Medicare and Medicaid fraud and abuse. Specifically, Troy was the program integrity senior litigation attorney, where he focused on pharmaceutical and medical device False Claims Act matters as well as Medicare and Medicaid overpayment collection.