Neil M. Sullivan

Of Counsel

Roseland

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- Advises healthcare systems and insurers on integrated payer-provider strategies and the complex negotiation and drafting of contracts
- Seasoned counsel on regulatory compliance filings and financial structures for life insurance and healthcare delivery, including Medicare Advantage, managed Medicaid, ACOs, ODSs, MEWAs, and health system equity participation in insurance entities
- Career defining regulatory leadership as Assistant Commissioner at the NJ DOBI lends significant authority and expertise to his work on behalf of providers and payers

Neil's healthcare and insurance law practice has a particular emphasis on the intersection of healthcare finance and healthcare delivery systems. He has significant experience assisting both healthcare providers and insurance companies in the negotiation and drafting of provider-payer contracting agreements, including participation in commercial, Medicare Advantage and managed Medicaid networks, and provides representation in insurer compensation disputes.

He regularly represents and counsels health plans and healthcare providers in regulatory compliance and filings, and alternative financial models for healthcare delivery, including Medicare Advantage (Part C) and managed Medicaid plans, Organized Delivery Systems (ODS), Accountable Care Organizations (ACO), Multiple Employer Welfare Arrangements (MEWA), and health system equity ownership or participation in insurance organizations. He has provided his expertise in complex regulatory requirements in conjunction with multiple lawsuits.

Neil served as Assistant Commissioner of the New Jersey Department of Banking and Insurance (NJ DOBI) from 2010-2014, a period of fundamental change in both the healthcare and insurance sectors. This encompassed the implementation of the Affordable Care Act (ACA) and the Dodd-Frank Wall Street Reform and Consumer Protection Act, the emergence of alternative financial models for health care delivery, and the transition to electronic health records and implementation of the ICD-10 mandate.

In his role, he had overall responsibility for the implementation of insurance reforms under the ACA, including the establishment of a high-risk pool and feasibility study of health insurance exchanges, and rationalizing conflicting points of state and federal law. He served as the DOBI Commissioner's designee on the NJ Individual Health Coverage (IHC) and Small Employer Health (SEH) program boards, the Mandated Health Benefits Advisory Commission, and the NAIC Regulatory Framework Task Force and Senior Issues Committee and acted as liaison with the Centers for Medicare & Medicaid Services (CMS) over ACA implementation.

Areas of Focus

Practice Areas

- Healthcare
- Healthcare Private Equity
- Healthcare Regulatory & Compliance
- Healthcare Transactions
- Managed Care Contracting & Dispute Resolution
- Federal False Claims Act & Insurance Fraud
- Regulatory Appeals
- Business & Corporate
- Business Counseling
- Business Transactions

Industries

- Healthcare

Credentials

Bar Admissions

- New Jersey, 1993

Education

- Rutgers University School of Law-Newark, J.D., 1993
- Rutgers Business School, M.B.A., 1986

- Rutgers University School of Arts and Sciences-Newark, B.A., 1980

Recognition

- Listed in *The Best Lawyers in America* (a trademark of Woodward/White, Inc.) in the Health Care Law practice area (2024)
- Ranked among the top 15 professionals on the *NJBIZ* (a publication of Bridge Tower Media) annual "Power 50 in Healthcare" list (2012-2014)

Other Experience

- New Jersey Department of Banking and Insurance: Individual and Small Employer Health Coverage Program Boards (2010 - 2014); Legal Committee (former member)
- As Assistant General Counsel at Horizon Blue Cross Blue Shield of New Jersey, represented the company before state and federal regulators for new product development, changes and proposed changes to regulations, and market conduct matters.
- Served as General Counsel for a community hospital, and as Director of Group Contracts for New Jersey's largest life insurer.

Experience

Representative Matters

- Representing two New Jersey health systems in high-stakes litigation against multiple Medicare Advantage plans seeking recovery of approximately $5 million in underpaid 340B drug reimbursements, following a U.S. Supreme Court decision invalidating the Center for Medicare and Medicaid Services' reimbursement reductions; matters are proceeding toward mediation and arbitration.
- Advising a local government agency on the formation of a compliant "friendly P.C." structure for the operation of New Jersey's largest psychiatric hospital, including drafting and negotiating all transactional and governance documents under New Jersey healthcare law.

Affiliations

Memberships

- New Jersey State Bar Association: Insurance Benefits Committee (past Chair)
- New Jersey Life & Health Insurance Guaranty Association (Board of Directors, (former Director)

Insights & More

Announcements

2027 Edition of Best Lawyers Recognizes 50 Attorneys in 38 Practice Areas
8.20.26

2026 Edition of Best Lawyers Recognizes 54 Attorneys in 41 Practice Areas: Eight Greenbaum Lawyers Recognized on “Ones to Watch” List
8.21.25

2025 Edition of Best Lawyers Recognizes 56 Attorneys in 39 Practice Areas: Ten Greenbaum Lawyers Recognized on "Ones to Watch" List; Three Selected for "Lawyer of the Year" Recognition
8.14.24

2024 Edition of Best Lawyers Recognizes 59 Attorneys in 38 Practice Areas: Twelve Greenbaum Lawyers Recognized on "Ones to Watch" List; Five Selected for "Lawyer of the Year" Recognition
8.16.23

Client Alerts

Texas Court Sides with Challengers to Independent Dispute Resolution Process Under No Surprises Act
3.29.22

Federal "No Surprises Act" Brings National Oversight of Unexpected Billing for Healthcare Services
3.02.21

COVID-19 and Medicare Alternate Payment Programs
7.07.20

Governor Murphy Announces Recommendations of Report of New Jersey's Long-Term Care Industry
6.11.20

Title III of the CARES Act: Supporting America's Health Care System in the Fight Against the Coronavirus
3.31.20

Healthcare Perspectives Blog

Tips for Addressing Dispute Resolution in Payer-Provider Contracts
2.07.23

Publications

The CMS Managed Care Final Rule: Access Standards, Consumer Surveys, Payment Standards and More for Managed Medicaid and CHIP
12.18.24

Federal "No Surprises Act" Brings National Oversight of Unexpected Billing for Healthcare Services
Spring 2021

Seminars & Events

Managed Care Contracts: Medicare and Medicaid Considerations for Providers
5.17.23

What ALL Business Owners Who Received Pandemic Relief Funds Need to Know about the Government's Crackdown on PPP Loan Fraud
6.28.22

Managed Care Contracts: Medicare and Medicaid Considerations for Providers
3.01.22

Integrating Health Care Financing and Delivery: New Paradigms for the 21st Century
11.19.20

Insurance Coverage Issues and Defending Your Rights in the Age of COVID-19
6.30.20