

A professional headshot of James Robertson, a middle-aged man with short grey hair and glasses, wearing a dark blue shirt and a grey plaid blazer. He is smiling slightly and looking towards the camera. The background is a soft, out-of-focus light blue and white.

**James
Robertson**

Partner
Practice Leader | Healthcare

 Roseland

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- Recognized thought leadership and expertise across the spectrum of healthcare-related transactional, regulatory, and compliance issues and litigation
- National and statewide reputation in navigating and litigating Medicare, Medicaid, charity care, disproportionate share hospital reimbursement and managed care matters
- Transactional, regulatory compliance and litigation support for hospital systems, integrated delivery networks, physician practices, healthcare private equity firms, pharmaceutical manufacturers, and other healthcare entities

Jim serves as trusted counsel to the entire healthcare sector. His practice spans the full spectrum of legal, regulatory, and corporate challenges facing healthcare entities.

With a deep technical command of reimbursement and payer strategy, Jim regularly represents hospital systems and providers in high-stakes Medicare, Medicaid, and charity care subsidy matters. He possesses particular expertise in navigating disproportionate share hospital (DSH) and graduate medical education (GME) issues before state agencies and the federal Provider Reimbursement Review Board (PRRB). Jim further ensures the long-term sustainability of provider-payer relationships by negotiating complex Medicare Advantage and Managed Medicaid risk-sharing arrangements.

In the transactional arena, Jim provides comprehensive representation for mergers, acquisitions, joint ventures, and divestitures. He serves a diverse array of industry leaders, including for-profit and nonprofit hospital systems, academic medical centers, pharmaceutical companies, integrated delivery networks (IDNs), physician practices, and healthcare private equity funds. Jim is instrumental in the structural development of Clinically Integrated Networks (CINs), Accountable Care Organizations (ACOs), and Multiple Employer Welfare Arrangements (MEWAs), frequently securing necessary certifications from the New Jersey Department of Banking and Insurance (DOBI). His work encompasses the establishment and sale of individual and group practices, ambulatory surgery centers, nursing homes, and assisted living facilities, as well as the negotiation of executive contracts, recruitment initiatives, medical directorships, hospital department management, and office or equipment leases.

To mitigate operational risk, Jim guides clients through the development of robust corporate compliance programs and manages internal audits, government inquiries, and voluntary self-disclosures. His counsel ensures that provider arrangements satisfy the Stark Law, the federal Anti-Kickback Statute (AKS), and New Jersey's Codey Law. He assists clients in seeking advisory opinions, obtaining Certificates of Need, and securing transaction approvals from the New Jersey Department of Health and the Attorney General under the Community Healthcare Asset Protection Act (CHAPA). His counsel ensures compliance with the Corporate Practice of Medicine (CPOM) doctrine and federal mandates including HIPAA, HITECH, the ACA, and Emergency Medical Treatment and Labor Act (EMTALA)—from drafting Business Associate Agreements (BAAs) to managing medical record retention and the physical or electronic storage of medical records.

Jim's advocacy extends to medical staff matters, where he designs state-of-the-art bylaws and provides guidance on fair hearing requirements and strategic initiatives. Finally, he represents healthcare entities in business-critical litigation, including provider-payor disputes, restrictive covenant matters, and medical staff privileging hearings. By combining this granular knowledge of reimbursement and regulatory compliance with a veteran litigator's perspective, Jim provides the strategic foresight necessary to navigate the administrative and operational hurdles of the modern healthcare landscape.

Areas of Focus

Practice Areas

- Healthcare
- Healthcare Private Equity
- Healthcare Regulatory & Compliance
- Healthcare Transactions
- Managed Care Contracting & Dispute Resolution
- Litigation
- Healthcare Litigation
- Federal False Claims Act & Insurance Fraud

- Hospital & Physician Reimbursement
- Regulatory Appeals
- Business & Corporate
- Business Counseling
- Business Transactions
- Employment Issues
- Insurance Coverage

Industries

- Healthcare

Credentials

Bar Admissions

- New Jersey, 1990
- Pennsylvania, 1990
- U.S. District Court, District of New Jersey, 1990
- U.S. Court of Appeals, Third Circuit, 1997
- U.S. Supreme Court, 2001

Education

- Villanova University School of Law, J.D., 1990
- Rutgers University, Cook College, B.S., 1987

Experience

Representative Matters

- The firm's team represented a coalition of New Jersey hospitals in a \$300 million constitutional challenge to the State of New Jersey's charity care and Medicaid reimbursement regime, defending the hospitals' takings claims through summary judgment, Appellate Division review, and New Jersey Supreme Court proceedings, resulting in published decisions affirming dismissal of the claims. The hospitals filed a petition for certiorari with the Supreme Court of the United States, which was denied.
- Represented a New Jersey healthcare system and its Chair of Surgery in litigation brought by a trauma surgeon challenging a summary suspension of medical staff privileges. Following reinstatement through internal proceedings, the firm continued to defend the client in this \$2.4 million action, which settled before trial.
- Representing 170 hospitals nationwide before the Medicare PRRB in challenges to CMS' historical calculation of IPPS rates dating to federal fiscal year 1986. The matter, valued in the hundreds of millions of dollars, seeks

correction of longstanding reimbursement underpayments and remains pending before the PRRB.

- Representing over 300 hospitals nationwide in Medicare PRRB and federal court litigation challenging CMS' application of the rural floor budget neutrality factor affecting federal fiscal year 2024 wage indices. The firm's team secured expedited judicial review and filed suit in the U.S. District Court for the District of Columbia seeking declaratory relief and damages.
- Representing 173 hospitals nationwide in Medicare PRRB proceedings challenging CMS' exclusion of Section 401 hospital wage data from rural floor reimbursement calculations. This Medicare reimbursement matter, valued in the hundreds of millions of dollars, remains pending before the PRRB.
- Representing a New Jersey healthcare system and its leadership in litigation arising from termination of a surgeon's staff privileges, defending claims for alleged wrongful suspension and lost income.
- Advised a medical practice in a Chapter 11 bankruptcy proceeding involving competing claims from a private equity sponsor, an acquisition lender, and the practice's physician owners. The matter addressed disputes arising from the dissolution of the practice, restrictive covenant issues, and claims exceeding \$35 million. The firm guided the parties to a global settlement and confirmation of a Chapter 11 plan of liquidation, resolving all claims.
- Represented a New Jersey healthcare system in defense of antitrust and tort claims brought by a pediatric surgeon following revocation of privileges, securing a negotiated resolution.
- Represented a New Jersey healthcare system in defense of fraud, breach of contract, age discrimination, and CEPA retaliation claims brought by three physicians and their surgical group seeking more than \$9 million.
- Represented a leading senior care provider in dozens of guardianship proceedings for residents lacking family decision-makers, coordinating with the New Jersey Office of the Public Guardian to secure medical authority and Medicaid eligibility.
- Represented a real estate company as healthcare and regulatory counsel in developing assisted living facilities in Scotch Plains, East Brunswick, and Old Tappan in transactions exceeding \$10 million.
- 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 CMS' 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.
- Advising a ABA therapy organization in responding to a New Jersey MFD audit. This matter includes counseling the client on the MFD interview process, assisting in providing relevant documentation responsive to the audit, and advising the client on compliance with follow-up requests from the MFD in anticipation of an eventual resolution of the audit, including any repayment demands.
- Represented a client in a New Jersey Appellate Division appeal arising from Medicaid reimbursement and eligibility determinations, authoring the appellate brief and securing affirmance of the agency's decision.

- Represented a defendant in a New Jersey Superior Court matter, securing dismissal of claims based on the Entire Controversy Doctrine in a published Law Division decision.

Published Cases

- In *Rahway Hospital v. Horizon Blue Cross Blue Shield* (2005), argued on behalf of *amicus curiae* New Jersey Hospital Association before the New Jersey Appellate Division, supporting reversal of an administrative ruling concerning healthcare reimbursement, resulting in a published decision overturning the agency's interpretation.
- In *United States ex rel. Quinn v. Omnicare, Inc.* (2004), represented Omnicare in a False Claims Act *qui tam* action in the U.S. Court of Appeals for the Third Circuit alleging fraudulent billing and reimbursement practices, securing affirmance of summary judgment and dismissal of all claims.

Affiliations

Memberships

- Healthcare Financial Management Association, New Jersey Chapter: Chair, Communications Committee; Editor, *Garden State FOCUS Magazine*
- American Health Law Association: Hospitals and Health Systems Practice Group

Insights & More

Announcements

Chambers USA 2026 Recognizes Greenbaum, Rowe, Smith & Davis Across 10 Practice Areas and 18 Individuals
6.04.26

36 Greenbaum Attorneys Selected for Inclusion in 2026 Edition of New Jersey Super Lawyers
3.20.26

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 Chambers USA Guide Ranks Greenbaum, Rowe, Smith & Davis in Key Practice Areas and Recognizes 18 Attorneys as Leading Individuals
6.04.25

Thirty-Five Attorneys from Greenbaum, Rowe, Smith & Davis Selected for Inclusion in 2025 Edition of New Jersey Super Lawyers
3.19.25

James A. Robertson Recognized by Healthcare Financial Management Association New Jersey Chapter
10.13.24

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 Chambers USA Guide Ranks Greenbaum, Rowe, Smith & Davis in Key Practice Areas and Recognizes 20 Attorneys as Leading Individuals

6.05.24

Thirty-Four Attorneys from Greenbaum, Rowe, Smith & Davis Selected for Inclusion in 2024 Edition of New Jersey Super Lawyers

3.25.24

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

2023 Edition of Best Lawyers Recognizes 51 Attorneys in 36 Practice Areas: Nine Greenbaum Lawyers Recognized on "Ones to Watch" List; Seven Selected for "Lawyer of the Year" Recognition

8.17.22

Client Alerts

One Big Beautiful Bill Act: An Overview of Key Healthcare Provisions & Impacts

9.04.25

A Primer on Medicare Graduate Medical Education Payments

11.29.22

Governor Murphy Signs Executive Order Setting COVID-19 Vaccination and Booster Shot Requirements for New Jersey Healthcare Workers

1.26.22

U.S. Supreme Court Upholds CMS Enforcement of COVID-19 Vaccine Mandate for Healthcare Facilities that Receive Medicare or Medicaid Funding

1.18.22

FTC's Final Rule Expands the Safeguards Rule for Financial Institutions to Address Cybersecurity Risks and the Privacy of Consumer Data

11.17.21

Federal Court Ruling in Rutgers Vaccine Mandate Challenge Is Likely the Tip of the Iceberg

10.14.21

HHS Clarifies That Inquiries About COVID-19 Vaccination Status Are Not a Violation of Privacy Rights Under HIPAA

10.07.21

The New Jersey Economic Recovery Act of 2020: An Overview of the New Jersey Community-Anchored Development Program

3.04.21

New Jersey Enacts Legislation Imposing Annual Community Service Contributions on Nonprofit Hospitals

3.01.21

Governor Murphy Signs Executive Order 152, Setting Forth Guidelines for Indoor and Outdoor Gatherings

6.12.20

Governor Murphy Signs Executive Order 113 Authorizing the Taking of Private Property to Combat the COVID-19 Crisis

4.06.20

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

3.31.20

An Overview of Several Recent Executive Orders from Governor Murphy

3.25.20

"Stay at Home": An Overview of Governor Murphy's Executive Order 107

3.23.20

Healthcare Perspectives Blog

New Compliance Requirements for Off-Campus Hospital Outpatient Departments – Next Steps for Hospitals and Health Systems

3.30.26

ACA Marketplace Enrollment Declines in 2026: Coverage Shifts and Implications for Providers

3.24.26

Medicaid Financing Changes Under the OBBBA: Provider Tax Waiver Final Rule and Caps on Medicaid Manager Care SDPs

3.19.26

CMS Distributes \$10B in Rural Health Transformation Funding; \$147M for New Jersey

3.13.26

From the Big Beautiful Bill to the Great Healthcare Plan: President Trump and Congressional Republicans' Proposal to Reform the American Healthcare System

3.06.26

The Do's and Don'ts of Structuring Physician-MSO Arrangements to Comply with the New Jersey Corporate Practice of Medicine Doctrine

3.07.23

Published Articles

New Compliance Requirements for Off-Campus Hospital Outpatient Departments – Next Steps for Hospitals and Health Systems

3.30.26

ACA Marketplace Enrollment Declines in 2026: Coverage Shifts and Implications for Providers

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CMS Distributes \$10B in Rural Health Transformation Funding; \$147M for New Jersey

3.13.26

From the Big Beautiful Bill to the Great Healthcare Plan: President Trump and Congressional Republicans' Proposal to Reform the American Healthcare System

3.06.26

New Jersey Supreme Court Finds the Take All Comers Statute is Not an Unconstitutional Taking of Hospital Private Property: Next Stop...SCOTUS

Fall 2025

One Big Beautiful Bill Act: Key Healthcare Provisions & Effects

Fall 2025

The Life and Death of Chevron Deference and the Future of Administrative Law

Fall 2024

The Do's and Don'ts of Structuring Physician-MSO Arrangements to Comply with the New Jersey Corporate Practice of Medicine Doctrine

3.07.23

Federal Efforts to Mandate COVID-19 Vaccinations, Testing and Masking: Overview and Status Update on Challenges in the Courts

Spring 2022

A Primer on Medicare Graduate Medical Education Payments: What Hospitals Should Know About How the Government Calculates GME Reimbursement

Winter 2022

The New Jersey Economic Recovery Act of 2020: An Overview of the New Jersey Community-Anchored Development Program

Spring 2021

Navigation COVID-19's Impact: Advice for Healthcare Clients

March 2021

Safeguarding Healthcare Clients: Facing the Financial Impact of the COVID-19 Pandemic

10.20

COVID-19: When Mandatory Isolation and Quarantine Become Necessary

3.24.20

A Flurry of Reimbursement Wins for Hospitals – Decisive or Pyrrhic Victories? (Part I)

Winter 2019-20202

Seminars & Events

Withum's Healthcare Symposium 2025

12.09.25

A Discussion of the New Jersey Supreme Court's Decision in Englewood Hospital & Medical Center v. State of New Jersey

10.30.25

Withum's Healthcare Symposium 2024

12.09.24

Is this the End of Agency Deference? The New Landscape of Administrative Law and the Impact on Healthcare Providers

10.09.24

The Federal Government is Taking Aim at PPP Loan and COVID Relief Payment Fraud: What ALL Healthcare Businesses That Received Pandemic Relief Funds Need to Know

10.26.22

Religious Exemptions and the Status of Court Challenges to Vaccine Mandates

2.15.22

Withum's Healthcare Symposium 2021

12.07.21

The Bioethical Principle of Justice and Inequities/Disparities in Connection with COVID-19 in New Jersey

5.11.21

A Range of Perspectives on Advising and Implementing Decisions Involved with Advance Directives and POLST

5.03.21

The Legal Foundation for Advance Directives and POLST in Light of Bioethical Principles

4.26.21

Healthcare Providers and Hospitals in the Age of COVID-19: A Look at Bankruptcy & Creditors' Rights Issues and Strategies

11.30.20

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

11.19.20

Executive Compensation in the Healthcare Industry: Managing the Process Against the Backdrop of a Pandemic

11.16.20

Healthcare, Real Estate & COVID-19: Impacts, Challenges and Opportunities

11.09.20

Bioethical Issues and End-of-Life Options in New Jersey in the Time of COVID-19

10.05.20

The Business of Healthcare in the Pandemic Age: Six Months Into the New World of COVID-19

9.28.20

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

6.30.20

The Impact of COVID-19 on Healthcare Industry Employers and Next Steps

6.23.20

Delivering Healthcare in a COVID-19 World: What Providers Should Know to Adjust and Adapt to the Pandemic

6.16.20