



Thanks to the extraordinary commitment and expertise of AHLA leaders, the American Health Lawyers Association continues to thrive and serve as the essential health law resource in the nation. The Association's strong foundation reflects a history that is vibrant, meaningful and worth sharing. Finding a way to preserve AHLA's history was especially relevant in light of the Association's 50th Anniversary, which was celebrated throughout 2017.

This transcript reflects a conversation between AHLA leaders that was conducted via audio interview as part of the Association's History Project. More than 60 of AHLA's Fellows and Past Presidents were interviewed. A video documentary was also prepared and debuted on June 26 during AHLA's 2017 Annual Meeting in San Francisco, CA.

March 7, 2017

Gary Scott Davis interviewing JD Epstein:

Gary: This is Gary Scott Davis. It is most definitely my pleasure to be interviewing JD Epstein, both an icon and a legend in the Health Law Bar in conjunction with the AHLA's 50th anniversary oral history initiative.

JD thank you very much for taking the time to speak with us today. And I'd like to start with a simple question. How did you first get into healthcare law?

JD: Well I was mustered out of the army in the fall of 1969, and I was running a bar in Chicago at night and walking the streets looking for a job during the day. I was offered positions about the same time, tax department of Arthur Andersen, trust department of Harris Bank, Blue Cross of Chicago and Blue Cross Association.

I chose the offer from Blue Cross Association because it was \$50 a month more than the other three. For a grand total \$700 a month. I went to work for Blue Cross, who was looking for an attorney with an accounting background who could come in and somehow manage to understand and explain this new Medicare law that they had just become the prime intermediary for all hospitals in the United States, to administer the Medicare program.

Gary: And I would imagine, with Medicare law being the focus back in the beginning of healthcare law that the type of lawyers that did healthcare work originally, like you said you were an accountant, you were a bartender, are very different than, not that the people are different, but the nature of the practice is different and the lawyers specialization is different to day in healthcare law.

Can you talk a little bit about the evolution of who was a healthcare lawyer and how the practice has evolved over the decades?

JD: I think when, before Medicare there was basically a health lawyer[inaudible 00:03:02] as we known them. People who represented hospitals or nursing homes etcetera, were typically attorneys who were on the boards and mainly non-profit tax exempt boards of hospitals, nursing homes et cetera. And for the most part, those attorneys did the work whether it be a contract review or something of that sort, they did it on a pro bono basis. The same thing could be said about the accounting work. The accountants who were typically doing their work sat on

American Health Lawyers Association

1620 Eye Street, NW, 6th Floor • Washington, DC 20006-4010
(202) 833-1100 • Fax (202) 833-1105 • www.healthlawyers.org

the board of a hospital, they're tax exempt and they provided some routine accounting services other than audits on a, basically a pro bono basis and no one really worried about legal issues at hospitals with the exception of medical malpractice or other types of liability issues which were farmed out to local litigators in the community.

And that was what the scene was when Medicare came about.

Gary: I'm sorry please continue.

JD: And those guys, for the most part, didn't want to get into this new Medicare law and this new government intrusion into the life of the hospitals or the nursing homes and therefore when something came up that dealt with these sort of regulations or the new statute or the new payments or what, that type of thing, they had to farm it out to someone who was a specialist. If they could find them in this new regulatory environment.

Gary: Speaking of finding a specialist, I believe it was in 1972 that you joined with Jack Wood and Tom Lucksinger to form what is clearly one of the most iconic healthcare law firms that existed from the beginning of this practice.

Can you talk a little bit about your association with Jack and with Tom and what you envisioned together for Wood, Lucksinger and Epstein. What it started as and how it grew over the years.

JD: Well Jack Wood was general counsel for the Sisters of Charity of the Incarnate Word in Houston, Texas. He had taken a job in 1965 when he was a young associate at a firm called Hopkins and Sutter in Chicago, Illinois. And the senior partner in that firm who was Catholic named Tom Mulroy decided that the Sisters of Charity of the Incarnate Word in Houston, which was running 16 or 17 hospitals at the time which had no corporate structure, and they were running all out of patronage funds of the order, actually donated Jack to them to see if he could help them get established. He stayed there, was their general counsel. In 1971 one of their hospitals, St. Frances Cabrini of Alexandria Louisiana had a dispute with Blue Cross Louisiana over some cost that they felt should be allowable and Blue Cross Louisiana said it wasn't allowable and they filed an appeal with what was then the Blue Cross provider appeals board.

I was the counsel to the Blue Cross provider appeals board as one of my jobs as in house counsel at Blue Cross, associate in house counsel at Blue Cross. Jack appeared in Chicago in front of the board of five non-attorneys. We sat around for a few minutes before the hearing actually started talking about the issue. I concluded that Blue Cross Louisiana probably hadn't interpreted the regulations or the manual instruction as well as they could have and Jack and I decided that we could settle this thing short of a hearing.

We settled that in 1971 and Jack went back to Houston and I continued as counsel for Blue Cross Association. In 1972 Jack was, I believe maybe Program, in charge of the program at the Broadmoor, the American [inaudible 00:07:48] Hospital Attorneys annual meeting at the Broadmoor, 1972.

There was a case called Coral Gables which had just been handed down by the court of US Court of Claims basically saying that the government should have a process for dealing with payment disputes between providers and at that time, the social security administration, the bureau of health insurance. So Jack felt it would be good to have panel discussion about the Coral Gable case and what the government was going to do about it. And so Jack invited Tom Tierney who

was at that time, the Director of the Bureau of Health Insurance. Of course which was the predecessor to the Healthcare Finance Administration and now the CMS.

And he was the Director of the Bureau of Health Insurance and he, so Jack invited Tom Tierney and invited me as the counsel for the Blue Cross [inaudible 00:08:49] appeals board to be on this panel, three person panel with Jack, Tom and me to discuss Coral Gables and the aftermath.

Well Tom Tierney didn't believe that Coral Gables demanded that the H.I. do anything and when Jack become sort of vociferous as Jack Wood could become, then saying well that's not the way I read Coral Gables. Tom Tierney got up and walked off the stage leaving Jack and I to discuss Coral Gables and the aftermath.

That was in 1972. 1973, January 9th, I remember it 'cause it was both Jack Wood's birthday and my anniversary. Jack had invited us to come to Houston to talk about putting a law firm together. And based upon our previous discussions about the fact that he was in house and had to do this hearing and I was at Blue Cross Association, no one else really was knowing much about it, he felt this would be a great opportunity. So I, Beth and I went to visit Jack and on January 9th 1973 we came to an agreement of putting a law firm together and I was to arrive later that year.

As I went back to Blue Cross Association, Tom Tierney had left and the Bureau of Health Insurance realized that what Coral Gables said was, you've got to put together a judicial review process, or due process, hearing et cetera in the government to handle payment disputes. And so they reached out to Blue, they being the Bureau of Health Insurance, reached out to Blue Cross Association because we had that, such a process and they asked Blue Cross Association to help them draft a statute and eventually regulations that created the Provider Reimbursement Review Board in 1974.

The general counsel of Blue Cross Association tasked me with doing that. I said but I'm leaving, he said I'm asking you to stay for six months. So at his request, and honoring that commitment I stayed on for another six months at Blue Cross Association basically taking the Blue Cross provider appeals committee board of procedures and operations et cetera, converting it into language that eventually created the Provider Reimbursement Review Board.

Having completed that and told Jack I had to commit for six months, Jack said okay, I want to get started, you'll join us when you finish your project and I said okay. So Jack began the law firm in 1973, I came down in 1974 upon finishing the PRRB work for the government and for Blue Cross Association obviously with the prime intermediary, fiscal intermediary at the time, and Jack and I, basically Jack had the Sisters of Charity of Incarnate Word, and their 16 hospitals and a couple other small Catholic orders that he was doing some work for on the side when we started what would become Wood, Lucksinger and Epstein.

I clearly had zero clients not knowing what would happen when I left Blue Cross Association and joined Jack Wood. And my wife didn't know. All she knew was that we were taking a big chance leaving Chicago, Illinois going to Houston and starting a law firm with two guys, of course, that she didn't know and I knew barely Jack. And Tom Lucksinger was a tax attorney, had been working at Deloitte, Haskins and Sells is actually I think, Haskins and Sells at the time it was pre-Deloitte. And because there were no Medicare cases and because it was so new I had been using at Blue Cross Association and doing provider appeal work, I had been looking at tax law at

sort of the basis of what I thought allowable costs would be for Medicare since they were the base of the same as what was deductible expenses under the tax law.

And so Tom was sort of a natural of someone to look to because of the way Jack and I talked about Medicare payments sort of based loosely on tax deductibility issues. So we started the firm basically with Sisters of Charity, Jack had a contract with them after he left, and that was it. Not knowing what was next.

Gary: You mentioned when you were talking about your history with Jack and the evolution of Wood, Lucksinger, the American Society of Hospital Attorneys which eventually morphed into the American Academy of Healthcare Attorneys. Can you talk about the place of those organizations in the development of healthcare law generally?

JD: I think that 1967, there was a number of people who were interested in getting an attorney organization started. This was the year after Medicare went into effect and I believe Art Bernstein was there and others were trying to get something started. And they got the American Society of Hospital Attorneys which was a personal membership society patterned after the other membership societies of the American Hospital Association because the American Hospital Association had things like the Society of Risk Managers and Society of whatever, and in order to start an organization like that, they had to convince AHA to create the society. Which they did and AHA created the American Society of Hospital Attorneys.

Now membership in that was limited to individuals who were either employees of, or contractors to hospitals that were members of the American Hospital Association. Interesting enough in 1967, Blue Cross Association trademarked. And the Blue Cross was still owned by the American Hospital Association and our offices were co-located with the American Hospital Association.

The organization started and it's interesting that I could not, I was not eligible to be a member of it, even though I was working at Blue Cross Association whose trademarked was owned by the American Hospital Association because I didn't, wasn't employed by or contracted to a hospital that was a member of the American Hospital Association.

So it wasn't until after I joined Jack at Wood, Lucksinger and Epstein that I became eligible for membership in the American Society of Hospital Attorneys. Now Jack was and was one of the founders of the American Society of Hospital Attorneys, along with Art Bernstein, Karl Holderle and Don Bierle and a few other people along the way. I think maybe even Dennis Purtell and Ross Stromberg and Nathan Hershey, some of the other, the older guys were there.

The American Society began and like I said in '67 and started having its annual meeting I believe first in Chicago, or maybe even in New, maybe the first meeting in New York, I can't remember now. The first meeting I recall attending was 1972.

The importance of the American Society of Hospital Attorneys and again, remember that most of these guys that became members were the types of attorneys I discussed earlier. They were on the board of a tax exempt, non-profit hospital providing services and typically on a pro bono basis. And so that's how it began. There were some exceptions, there were people, many of them originally in the American Society for Hospital Attorneys also not only were counsel to hospital they were also counsel to a state hospital association and some even were counsel to both the state hospital association and the state Blue Cross plan. For instance Alvin Moore who I

remember very well from Chattanooga, Tennessee, was counsel not only to the hospital, major hospital in Chattanooga but counsel to the Tennessee Hospital Association and to Blue Cross plan located there in Chattanooga which was the large plan in Tennessee.

So there were guys like that and of course Jim Ludlum in California was counsel to both as well, to the California Hospital Association at least to the Southern California, now there was a north California and maybe Blue Cross of Southern California.

But many of those people on the boards and when things came up, specifically work whether it be now Medicare payment disputes or major medical staff disputes, they sought referrals and being a member of the American Society of Hospital Attorneys became sort of a referral organization to both Jack and I and guys like Dennis Purtell and others from our fellow members who were basically general lawyers on hospital boards. And so when they had a Medicare dispute they looked and that's where I got many of my initial referrals as did Jack, as Dennis Purtell and the medical staff bylaw area along with others. That's where most of our referrals, not most of them but many of our referrals came from, fellow members of the American Society of Hospital Attorneys.

Gary: My understanding is that in addition to the American Society of Hospital Attorneys, another organization, Aspen Health Systems, was very instrumental in both the evolution and development of Wood, Lucksinger and the practice of health law generally.

Can you talk a little bit about Aspen?

JD: Aspen was a publishing company based in Rockville, Maryland. And the early to mid 70's they decided to broaden their scope from just publishing to doing seminars in healthcare. They were a healthcare publishing company. And they contracted with Jack in 1974 maybe, or '75 somewhere in there. And Jack, and eventually it became Jack and I for two things. One, to do seminars on Medicare payment and other types of Medicare regulatory issues. And to begin writing a series of publications called topics in health law.

It was a yellow and white paperback publication and I wrote two different publications. One on I think Medicare, a general one on Medicare, right reimbursement and one on controversies and appeals. I don't know that Jack ever wrote one. But anyway, Aspen, then they began a series of seminars on different topics healthcare law. And Jack and I basically were given the franchise for doing Medicare payments. So we did Medicare controversies and appeals and we did physician contracting and we did all kinds of different seminars throughout the US, four or five times a year.

We were paid our expenses, and I think maybe \$1,500 a year, something like that. But obviously we were marketing these seminars, Aspen was marketing seminars to CEO's of hospitals, CFO's of hospitals, hospital attorneys not practicing typically in the specialties, but through that Aspen health law system seminars and then they branched out. They didn't, [inaudible 00:22:15] Dennis Purtell and Nathan Hershey did for many, many years medical staff bylaws and appeals. That was another group of series that Aspen did and for a different audience.

But clearly Aspen and the American Society of Hospital Attorneys programs and relationships were instrumental in the development of Wood, Lucksinger and Epstein and its growth from three lawyers to over a hundred and seventy five lawyers with offices in eight different cities.

Much thanks to the marketing efforts through that as well as I would say, in addition to Aspen there were two other organizations that became important to Jack and I.

Once was the Hospital, or the Healthcare Financial Management Association, HFMA as it was known. Both Jack and I joined that organization in Houston, in the Houston chapter, and through the years we spoke hundreds of times at HFMA meetings throughout the country. Not only the state of Texas but throughout the country as well as multiple states societies of CPA's. Those organizations became a further marketing part of our strategy, our marketing strategy I guess you'd say.

You'd just speak to those various state. I spoke to the Pennsylvania Society of CPA's for 27 consecutive years. In Hershey, Pennsylvania. I probably, who knows how many clients I got out of it but that wasn't even important. I was always the keynote speaker, every morning they started the conference, I was the keynote speaker and I did it for 27 years. Several of Mississippi Society of CPA's and Texas Society, Texas Society of CPA's, a guy name Ed Langford who was the director of reimbursement for Blue Cross of Texas and I would close every Texas Society of CPA meetings for 20 years. He would do a half hour at 3:30 and I would do the last hour at 4 based on responding to him and talking about how we take these reimbursement appeals.

Gary: We've talked a couple of times now about the American Society of Hospital Attorneys which eventually became the American Academy of Healthcare Attorneys which then entered into a merger transaction with the National Health Lawyers Association creating the American Health Lawyers Association. One common bond between each of those groups is David Greenberg. Can you talk a little bit about David's involvement with both of those organizations and what you perceived as David's contribution to the development of the healthcare law bar?

JD: Well probably Art Bernstein would know and does know much more than I do about David but, my recollection is that David was the first director of the American Society of Hospital Attorneys and I believe they started in Washington, DC and I think David was based in Washington, DC and he was their first director and David, when the American Society decided to move its offices to Chicago, David decided not to go to Chicago. And he stayed in DC and I believe before David had been sort of, argued that we should expand the American Society to include members who were not either employees or contractors to hospitals. He felt that was a niche that wasn't being filled. And so when they offices of the American Society of Hospital Attorneys moved to Chicago, David stayed in DC and began to form, and basically formed what we know as the National Health Lawyers Association. Becoming its founder and its first Executive Director.

So that's the relationship David has to both of the predecessor organizations, the American Society and the National Health Lawyers Association.

David made a major contribution obviously to both and also it's interesting because, I believe David along with, I don't remember who was at the Society at the time, but came together. I know David was looking for revenue, David always was looking for revenue, and [inaudible 00:27:15] deciding, pretty doing okay, in fact the only thing his problems with revenue was it was, American Hospital Association would oftentimes take some of its money they thought, the Society thought should be left in the Society and ended up in someplace else.

But David and the Society Director at the time decided to do a joint venture called Medicare and Medicaid Institute. A Medicaid and Medicare conference and they'd do it adjoined and therefore they had to have, they both chose chairs, co-chairs. And basically at the time I was,

sort of the, the guy at the American Society of Hospital Attorneys, you know one on the board at the time, who was best known already for reimbursement matters, and payment matters. And Len Homer was at the National Health Lawyers and was doing similar work that I was doing at the time. And so they appointed Len as the NHLA did and the American Society appointed me as the co-chairs of what became and still is, I suppose probably the most profitable and largest program of the American Health Lawyers Association but at the time was clearly the most profitable program for both the American Society of Hospital Attorneys and the National Health Lawyers Association.

And Len and I co-chaired that program for, I believe, 21 years.

Gary: Wow. You've talked about Len. You've talked a little bit about Nate Hershey, Jim Ludlum. Obviously there's a very special group of early founders if you will, of the healthcare law bar.

Can you talk about your peer group? You know Sherwin, Carl Weissburg, others that you grew up practicing with and that were really the cornerstones of healthcare law as we know it today?

JD: Well it's interesting because of the health law bar in the mid '70's which is really the beginning of it. The early to mid '70's you had Firms forum in California and Wood, Lucksinger and Epstein in Texas and then you had Len, when he left Ballard, Philadelphia and went down to Ober Kaler and joined George Tyler.

George Tyler was, I think it was George Tyler at Ober Kaler, was doing some health law work. But it was really sort of the tricoastal. The west coast, the east coast and our firm in Houston. And on the west coast you had Sherwin remember, who was really I would think what I would call the Medicare, really became the sort of the guy who knew most about Medicare regulations and the statutes.

And in fact, I believe that Sherwin was an early member of what was called Hi-Back, the Health Insurers Bureau Advisory Committee. He was the only one of the attorneys on that committee to my recollection. It lasted a few years. It was an advisory committee [inaudible 00:30:39] the old Bureau of Health Insurance which was a part of the Social Security Administration when Medicare started.

But Sherwin really is where everything started in terms of the Medicare and regulatory practice in California. Jim Ludlum who is generally viewed as really the pioneer of health law didn't really get into that type of, Jim was in the medical staff and medical staff by-laws and contracts and more of the general practitioner in health law. And then off shoots of Sherwin were, Carl Weissburg, Bob Klein, Peter Aronson and then they formed Weissburg and Aronson, then it became Memel Jacobs and Gersch. Bob Gersch was part of that and really off of those, basically law firms was the California practice of the [inaudible 00:31:40] That's where the Hooper and Lundy came out of there. Most of it, Michael Tichon who actually Michael Tichon who was at Blue Cross working for me in 1972, he was doing, he got involved in the HMO, when the HMO [inaudible 00:32:04] I think was '72, came out and Michael sort of, I designated him to do that type of work as I stayed with the provider appeals committee and board.

And then Michael went out and I think joined Sherwin at some point in his career prior to his death. And then Homer on the east coast and George Tyler at Ober Kale, that was basically competition. Most of the early PRRB cases and decisions probably rested in those three or four law firms for the most part.

I remember I think I handled the first group of PO. I think it was, PRRB decision number seven, I think. I think Len and I went back and forth, maybe Len and I handled the first PRRB, or had the first PRRB I can't remember all of these things. But that was the practitioners. Len on the east coast, Weissburg and Aronson and Sherwin on the west coast and us in Houston.

Later in the '70's I think a couple firms started coming up in Chicago. I can't remember when for instance Katten Muchin started or some of those in Chicago but they were early on and I think probably some time after the coastal firms.

Gary: So as you've been talking about the history of healthcare law, you've talked obviously about the tremendous influence that Medicare had. The influence that the PRRB had. What other event or events would you consider to be critical moments in the evolution of healthcare law.

JD: Well I think when they, one night in '76, '77 when they created the Office of Inspector General. And congress increased the penalty for [inaudible 00:34:20] kickback from a misdemeanor to a felony. Those two acts occurred about the same time along with the breaking apart of HEW into the departments of education and health and human services.

So we now we had HHS dedicated to health, you go Office of Inspector General and you had a felony [inaudible 00:34:44] kick backs. Then subsequent to that I think was '83 when the anti physician, anti referral law better known as Stark was passed. I think those became the next big things in terms of the practice of health law.

They clearly changed some of what had been payment disputes under the PRB and criminalized some of these payment disputes. So that now, in the old days one might say, well let's just claim the cost all they can do is just disallow it, now if you claim the cost and some government official or intermediary thought that was fraudulent what you did, and now became subject to a fraud case and a fraud charge carrying with it substantial penalties of both criminal penalties as well as major fines. And of course the Stark law later on, all this created a whole, I think, group of health law practitioners dealing with, what one might call, white collar criminal law or just a matter of negotiations between the government now, but no negotiations with the government having a huge hammer. A hammer being the potential of a criminal act and a potential exclusion from the Medicare Medicaid programs.

That I think increased the practice of health law and created a position shortly thereafter in almost every major healthcare provider of a corporate compliance officer. Corporate compliance officer position was non-existent until these three functions, these three things really happened. If there was compliance being done, many times it was either internal auditor or human resources.

Gary: So looking back on your storied career and in healthcare law, what would consider to be the biggest surprise that you encountered?

JD: I guess the biggest surprise was at the beginning. Because Jack and I truly rolled the dice. We didn't know if we'd ever get a client other than ones that Jack had. The success of Wood, Lucksinger and Epstein, the marketing acumen of Jack helped by me. Interesting relationships that we developed. A Jewish guy, a Catholic guy, Tom Schlesinger, a Calvinist in Jack Wood, and we represented more Catholic probably hospitals than anyone ever thought possible. The Catholic Health Association we didn't mention that. But the Catholic Health Association also became a very important part of our practice.

I was on the board of Catholic Health Association, I was outside counsel for certain matters for the Catholic Health Association and Jack worked closely with them for years. In those days there were almost a 1,000 catholic hospitals. And they were a major component of our practice and I suppose of our success, which was a surprise that we were able to be so successful so quickly and I think that's the biggest surprise that I had is that you know, not really knowing where our first piece of business would come from and all of a sudden, we had a national practice in a matter of a couple years.

Gary: What would you like for people to remember most about your contribution to the evolution and growth of healthcare law?

JD: Well as you know I taught at the university of Houston for almost 25 years. A course in health law, finance and policy. 1981 until 2003 or 4 or so. And so I had many students come through there and you know that for the most part I was the managing partner of Wood, Lucksinger and Epstein and then became the head of the healthcare group at Vinson and Elkins and who knows how many mentees, protegees, whatever, people who I influenced. I think that is my legacy is, I remember a couple years ago I was looking at the program for the Texas health law annual program. And there were 33 faculty members in that program of which 17 either had been my students or had somehow come through Wood, Lucksinger and Epstein or Vinson Elkins.

And I think that's probably, you know, what's best to be remembered for, is the good people like a Dennis Barry and a Gary [inaudible 00:40:02] and a Gary Davis. Nancy Legrow, Scott McBride and you know, Greg Etsel and I can go on and on and on. Those are the people.

Gary: Well on a personal note, I just want to thank you for truly being such a great mentor. I tell people all the time, I don't think I would have had the career path that I did have but for my good fortune to get my first job out of law school with Wood, Lucksinger and Epstein.

As we're getting closer to the end of our time, you had told me a story a while ago about the great debate at the university of Illinois?

Can you take a moment and share with the audience what happened in that incident?

JD: Yeah this is 1964. I'm a junior at the university of Illinois. I'm on the student senate and I was chairman of a, what they called a great debate series. And we would have various types of politicians and service people, whatever, come and debate on a particular topic.

I didn't come with, someone came up with, you know that Congress is talking about some form of health care for the elderly. And wouldn't it be great if we could find a couple guys that would talk about that? And so we put our heads together and came up with a guy who was at that time, Representative Thompson from New Jersey who was a very liberal, 100% ADA rated guy and Senator Tower who was leading certainly the charge in the senate against a program of health care for the elderly.

And so we invited them to come and debate whether or not the congress should pass a law for health care for the elderly and poor.

So I assigned myself to going and getting Senator Tower and someone else went to get Representative Thompson. And I drove out to the airport in Champaign, Illinois at that time the

only provider serving that airport was Ozark Airlines. So I drove out there and waited to pick up. And at the appropriate time the plane arrived and waiting the senator to show up.

Well I of course expected a Texas, a true Texan, a big guy with a 10 gallon hat to come strolling down the ramp from the airplane. And, much to my surprise came a little guy in about a two gallon hat named John Tower. And that, without knowing anything at all about health law or medicare or what would become medicare, that was my first experience with the now, some 55 years or so, of health law.

Gary: You were truly a man ahead of your time. So before we conclude.

We've talked a lot about what you've done over the past 55 years. Can we take a moment and talk about what you're doing these days?

JD: I'm of counsel to a firm called Greer, Hersch and Adams in Galveston, Texas. One of my best friends is the senior partner, Buddy Hersch. And they represent probably one of the wealthiest families in Texas. Family is the Moody's. Insurance and banking primarily. But they have through one of the family trusts, they operate 12 nursing homes and through another family entity they operate a traumatic brain injury center called TLC.

I represent now, those, basically I am general outside counsel to both those organizations to 12 long term care facilities and to a traumatic brain injury center both located, two centers one in Galveston and one in Lubbock, Texas.

I thought I had retired when I left Vinson and Elkins in Houston, Texas in 2008 and hadn't done much and still aren't doing a lot but between that and just having completed the draft of the article for the American Journal of Health Law, some 8,000 word article that I just finished and it's in copy editor now, that pretty much what occupies my practice of health law today.

Gary: Well you know, I, for the past, I guess I've been doing this now, oh I'm going to make you feel old JD, 35 years. For the past 35 years you've been a friend, you've been a mentor, you've been a colleague. And I personally cannot thank you enough for myself and on behalf of the American Health Lawyers Association for having taken this time to share with everybody who will be listening to this interview in years to come, some of the very special moments about the history and evolution and development of health care law I will give you the opportunity to have the last word.

Is there anything else that you'd like to say for posterity if you will?

JD: No I think that it's been very, I enjoyed it very much. And I hope that this project is as successful as it can be. And it's important I think for those who are coming after us to understand what this practice was in 1966 before it became the American Health Lawyers Association and its predecessor organizations.