



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 50<sup>th</sup> 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.

**October 10, 2017**

**Tom Hyatt interviewing Jerry Bell:**

Tom: Hello, Jerry?

Jerry: Yeah, hey Tom.

Tom: Jerry, how are you?

Jerry: Good.

Tom: Great. Well, good afternoon everyone. This is Tom Hyatt. I'm a partner at the law firm of Dentons in the Washington, DC office. It's my great pleasure to interview today for the AHLA oral history project my old friend and long-time colleague Jerry Bell.

Jerry, welcome.

Jerry: Thanks Tom.

Tom: We're going to have a conversation for those of us that maybe need to remember events because I don't remember them so much anymore, and for the young ones coming after us to know a bit about the early years of AHLA and the early years of health law. Very glad to have you on board.

Jerry, when I think about our early years, you're a partner now at Norton Rose Fulbright, but of course we're part and proud of that Fulbright & Jaworski, and really a partner in the hotbed if you will of the healthcare law in Texas in the early years. Tell us a little bit about what it was like to be a health lawyer in Texas in the early years.

Jerry: I was thinking about that. To say these things, just all it does is remind me how old I am.

Tom: Yeah

Jerry: To go down the list, I founded the Austin Health Lawyers Group in 1987. I attended the organizational meeting of the health law section of the state bar of Texas in 1986. I was with the group that formed and did the health law certification for the state bar in the late '90s. I was the chair of the very first health law conference in Texas that the University of Texas did and then

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was chair for 25 years. The very first year was 1988 and then I was the very first health law adjunct professor at the University of Texas law school, and I'm still doing that. It's well over 20 years.

Tom: Sure.

Jerry: I feel like a Founding Father of health law. Somebody told me the other day, they said, "You're not the father of health law, you're the grandfather of health law."

Tom: Yeah, the truth hurts Jerry.

Jerry: I didn't know if that was a compliment or not.

Tom: I think that's exactly right. Well now, that really tells a tale, doesn't it? Certainly, obviously a Wood Lucksinger or Epstein out of Houston and others, a lot of our colleagues in the early-

Jerry: Right.

Tom: Years in the Academy in AHLA were Texas health lawyers. How did you come into it in the first place, Jerry? What made health law of interest to you in that time?

Jerry: The way I got into health law was we had a Certificate of Need law in Texas and-

Tom: Yeah.

Jerry: When I was right out of law school the firm I went to had a good Certificate of Need practice, so I got involved doing that work. Through that work, I got into the healthcare industry. Interestingly, in 1985 the Texas legislature abolished the Certificate of Need law. It's viewed as socialistic or something. We were an early Tea Party state. In any event, everything I had been doing up until that point got wiped off in one legislative act.

Tom: Right.

Jerry: I really liked the healthcare industry. Fortunately for me there wasn't really much of a healthcare bar then ... as I mentioned there wasn't even a health law section of the state bar at that point.

Tom: Yeah.

Jerry: I was able to take my knowledge of the healthcare industry, and doing one thing after another started writing a lot for health law publications and speaking and went through a long period of my professional career where I was completely dedicated to doing that, and just basically made myself a health lawyer. I saw it as a good opportunity, and I just made it happen.

Tom: Why do you think Texas was such a focal point for the early years, as I mentioned Wood Lucksinger and others. Why do you think health law took off so much there, and continues to?

Jerry: That's a good question, because Wood Lucksinger really was one of the ... they might have been the first healthcare boutique, at least one of them, maybe-

Tom: Right.

Jerry: With some others that are probably ... I'm not sure anybody's still around. I mean they've all merged ... they were really good firms and-

Tom: Yeah.

Jerry: J. D. Epstein and Jack Wood had a real vision, I think. I think that what made health law in Texas was the fact that we've got so many great healthcare institutions and organizations here, and particularly in Houston with the Texas Medical Center.

Tom: Sure.

Jerry: It created a lot of professional ... you know as an ancillary matter, a lot of professional opportunities for the lawyers who represented the institutions. I have lived in Austin, and graduated from UT law school and worked in Austin, then had a chance to represent a number of the institutions in the medical center. We moved ... our family moved to Houston in 1991, and we ended up being in Houston for 17 years. For me, that was a real pivotal thing in my career, to be in Houston where the Texas Medical Center is located, and having a chance to work with a lot of those institutions and work with a lot of really good healthcare lawyers who represented the same institutions.

Tom: Now, Jerry, staying with the Texas theme, one of the things that Texas has done that has not perhaps grown as much as some would thought, but is also apparent in Florida in other places, I believe, is certification in health laws, a legal specialization for health lawyers, and Texas very much on the forefront of that. What's your experience with that been like?

Jerry: That's a good question. I really resisted that. I was chair of the healthcare section of the state bar.

Tom: Yep.

Jerry: That was before we had the certification. The issue I had with it was that healthcare is so diverse. There's so many facets of it and subspecialties, how could you have a test that could measure that for a health lawyer? Other people felt strongly that we should have it. We ended up ... I guess the section of the state bar voted to do it.

Actually, what I ended up doing was ... because my question was well if I ... 'cause I was asked to be an examiner on it, and I said, "Well, I'm glad to be an examiner if that means I will become automatically a member of the certified." They said, "No, it doesn't work that way." So I said, "Well, I'm not going to spend all this time working on this and not be certified." So I was with the very first group that got certified. We took the test and passed. I kept saying "Boy, this would pretty embarrassing to fail this test."

Then I later become an examiner. I was an examiner for probably, I don't know, 6 or 7 years, where I gave the test and graded the test. It's really become pretty popular. There're lots of people that are certified now. I think it's really been a good thing for the health law in the state to have that as an opportunity.

- Tom: About 15 years it looks like, give or take, out from when you first started with that, Jerry. Just to your last point, do you it's been helpful for clients and for other counsel as a way of distinguishing truly experienced healthcare lawyers from those perhaps that just dabble?
- Jerry: I don't know, Tom. That is a great question, because I don't know how many states have it. I know Florida did.
- Tom: It's the only one I know of, yeah.
- Jerry: I can say this. I don't think I've ever had one person ask me about it, or make a comment about it, or say that it made a difference. I really-
- Tom: Interesting.
- Jerry: Don't know, you know?
- Tom: Yeah.
- Jerry: It's just a ... I do know this. I think it was valuable to take the test, and I think it was valuable to prepare for the test. I think in that regard, it's probably been a good thing because it's made a lot of the people who ultimately took and passed the test better health care lawyers because they've had to learn a lot of things that they wouldn't necessarily have done on their own.
- Tom: Sure. Makes good sense. Hey, listen. Let's go back in time for a minute because you and I both came to what is now the American Health Lawyers Association from different directions. You were active and on the board of the American Academy of Hospital Attorneys. I was active on the board of the National Health Lawyers Association. We were there when those two organizations combined and become AHLA. What's your recollection of those two organizations' experiences and what that time was like, Jerry?
- Jerry: I was thinking about that the other day, 'cause I was a member of the American Academy of ...
- Tom: Right.
- Jerry: First we were American Academy of Hospital Attorneys and then we became the American Academy of Healthcare Attorneys, and you were on the board of the National Health Lawyers Association-
- Tom: That's right.
- Jerry: I think. It was such a fortuitous and really good fit, I thought, in retrospect, because what we had ... what AAHA had, we had a blue chip membership. We had a lot ... our membership was, of course 100 percent, or close to 100 percent, hospitals and health systems.
- Tom: Yep. Right.
- Jerry: We had a lot of very prestigious systems that were members or lawyers affiliated with those hospital systems, both in house and outside counsel. We had a lot of loyalty to the organization. Our organization, I think, meant a lot to the people in it. We had a really good strong board. We had very good leadership. What we didn't have, we didn't have really a good infrastructure. We

didn't have a ... we did have, I thought, and everybody else thought, kind of an odd relationship with the American Hospital Association.

I think from a timing point of view, it was right about ... because the merger happened like '97, '98, I think.

Tom: I think that's right, yeah.

Jerry: The hospital ... our clients, the hospitals and health systems, were becoming more integrated. They were becoming more than just hospitals. They were hiring doctors, and they were acquiring HMOs and insurance companies. They were becoming fully integrated systems, more than just hospitals. The timing was good. When we looked over at the NHLA, your board, we saw, number one a really good board, and we saw a lot of lawyers that we knew personally.

Tom: Sure, you bet.

Jerry: And professionally that we liked, that we had a high opinion of. We saw a really good infrastructure that we didn't have, I mean a really good administrative talent. We saw a more diverse organization than what we had, 'cause we were really just hospitals, and we saw NHLA as being much broader than that. That really kind of fit into the timing of what hospitals were saying-

Tom: Right. Yep.

Jerry: We also had the healthcare industries becoming more diverse. We also saw, probably a more entrepreneurial organization than we were. We kind of had been doing the same old thing. It had been successful and we had a lot of loyalty, but I think we all worried what the next decade would be like.

I think one of the good things was we each had particularly strong leaders who really took control of the process. I think on our side it was Glenn Reed-

Tom: Right.

Jerry: And a couple of other people who were very smart talented people. I think on NHLA's side might have been Doug Hastings or Eugene Tillman. There were some really good people. Later in life as I've worked on lots more mergers and consolidations and deals, it's become apparent to me that you really have to have the people at the top who have that kind of talent, and also who have a good ability to get along with the leadership on the other side.

Tom: Sure.

Jerry: I think that's what, to me, made it happen. I think we all felt instantaneously that it was a good match. I think from day one on our side we felt like we had really done the right thing. I think history's proven that we did the right thing because the organization's just flourished. I don't think our organization would have, could have ever done anything close to what AHLA has accomplished.

Tom: I'm with you there, Jerry. I think it's clearly the total is greater than the sum of the parts. It really has turned out to be a magnificent organization.

- Jerry: And Tom, one of the real benefits was getting to know you.
- Tom: Well.
- Jerry: I mean that.
- Tom: It was a pleasure, wasn't it? We got to work together on the board and have fun.
- Jerry: Yeah.
- Tom: You know, you being in Texas and me being in DC, our paths might not have otherwise have crossed all that-
- Jerry: Exactly right.
- Tom: Much, so it was great for that. That was very much one of the things that made AHLA so dear to all of us, I think. One thing, Jerry, and gosh you and I can go on forever so I hate to cut this off so quickly it seems, but I did want to ask you one other question, because it's important for all those listening as well. Any advice you might have for new healthcare lawyers, folks that are looking at practitioners, thinking should I specialize, is this an area I should get into, is it plateauing, is it the wrong time? You know. What are your thoughts about what the landscape looks like for new healthcare lawyers?
- Jerry: I think it's a great landscape. I tell the students I teach at UT law school ... I teach A health law course there and I'm very bullish on healthcare law. I think it's got a great future. I think that it's obviously an industry that is going to be here forever and I think it's an industry that's going to be good for lawyers. It's a highly regulated industry. I think that ... I've always said this, one of the things I love about the industry is that the people who are in healthcare are nice people, usually. Their mission is to help other people.
- Tom: Right.
- Jerry: It's not like it's a bunch of real estate developers just trying to flip a piece of property and make a buck. To me, it's just a totally different culture. The people are nice. I found the lawyers are nice, and 99 times out of 100 really good to deal with and easy to deal with. I think for the young lawyer to get involved in the organization and just be willing to work, and work on publications and articles, and be willing to speak. I just think the benefits that come out of that, the networking and the people you get to know and meet, and the develop you'll ... I just think that's the way to go. That's what I did. I look around and I see a lot of healthcare lawyers that are successful, that's exactly what they did.
- Tom: I think that's right, isn't it? The association for all of us has really overarched our entire tenure, and continues to be such a collegial place, really certainly in the association, but throughout the bar I've never met anyone who wasn't willing to share and give you their insights. No one ever worried about giving away the store or not showing their cards. It was very much how can I help and-
- Jerry: Right.
- Tom: It made it a very fun place to practice law.

Jerry: Absolutely. That ... I really loved that about my whole AHLA experience, is all the great people that I got to meet from all over the country. I really treasure that.

Tom: You bet. Well, Jerry Bell thanks for offering your-

Jerry: Okay, Tom.

Tom: Thoughts and recollections for the History Project, and I look forward to seeing you at the next meeting.

Jerry: Yeah, me too, Tom. Good talk to you.

Tom: You too. Bye now.