

Colleen M. Faddick

HEALTH CARE OPERATIONS CO-CHAIR

she / her / hers

Denver, CO | 303.583.8201

cfaddick@polsinelli.com



Colleen Faddick serves as co-chair of the firm's Health Care Operations practice - a role devoted to enhancing the firm's national practice and depth of expertise to serve our clients.

Colleen's practice focuses on Medicare, Medicaid and other payer reimbursement and regulatory issues. Colleen understands that government and private reimbursement is unnecessarily complicated but of paramount importance for health care providers to promote clinical excellence and prosper. Colleen strives to master the regulatory nuances that impact the structure of relationships among, and the operations of, health care providers.

Colleen's reimbursement practice focuses on:

- Medicare and Medicaid coverage and payment issues:
 - Billing compliance
 - Potential overpayment analyses
 - Cost reporting issues and administrative/federal appeals (DSH, bad debt, quality reporting payment reductions, GME/IME, etc.)
 - Provider-based compliance and payment
 - Medicare secondary payer and coordination of benefits issues
- Provider and supplier state licensure and appeals
- Provider and supplier survey, certification and enrollment issues, including appeals
- Fraud and abuse and self-referral law issues

Colleen works with hospitals, large physician groups, dialysis suppliers, medical device companies, pharmacies, clinical laboratories, DME companies, and other health care entities.

Education

- University of Houston Law Center (J.D., *cum laude*, 1995)
- University of Colorado Boulder (B.A., 1989)

Capabilities

- 340B Drug Pricing Program
- Academic Medical Centers
- Health Care Compliance
- Health Care
- Reimbursement Audits & Disputes
- Health Care Reimbursement
- Licensure, Enrollment & Certification

Bar Admissions

- Colorado
- Texas

Court Admissions

- U.S. District Court, Western District of Texas
- U.S. District Court, District of North Dakota
- U.S. Court of Appeals, Fifth Circuit
- U.S. Court of Appeals, Eighth Circuit

Memberships

- American Health Law Association
- American Bar Association
- Health Care Compliance Association
- Texas Bar Association
- Healthcare Financial Management Association, Colorado Chapter

Recognition

- Named to *5280 Magazine's* "Denver's Top Lawyers" list for Health Law, 2021, 2024-2026
- Selected for inclusion in *Best Lawyers in America*® for Health Care Law, 2010-2026
- Barrister's Best People's Choice Award for "Best Health Care Lawyer," 2014
- Outstanding Young Healthcare Lawyers, *Nightingale's Healthcare News*, 2005

Matters

- Establishing COVID-19 testing platforms from licensure, CLIA certification and enrollment to billing and contracting.
- Establishing COVID-19 vaccination programs with respect to immunization authority under state law, vaccine storage and reporting and enrollment and billing.
- Advising health care providers (including specialty testing and vaccine programs) regarding Provider Relief Funds and PREP Act issues.
- Advising health care providers with respect to Medicare and Medicaid reimbursement issues, including the highly specialized issues for hospitals, dialysis facilities, clinical laboratories, and pharmacies.
- Analyzing the fundamental coverage, billing and payment issues in the context of potential overpayment issues and audits, successfully determining no or reduced overpayments in most cases.
- Advising various health care provider entities and physician groups in structuring business arrangements in conformity with reimbursement requirements and fraud and abuse laws.
- Representing hospitals in Medicare reimbursement appeals before the Provider Reimbursement Review Board (PRRB) and federal courts.
- Developing provider-based strategies and compliance assessments.
- Assisting dialysis companies with complex Medicare reimbursement, enrollment, CHOW, and other issues.
- Representing medical device manufacturers and other health care providers in

connection with criminal and civil investigations under federal fraud and abuse laws and regulations.

- Assisting various health care provider entities and medical device manufacturers and suppliers in development and implementation of corporation compliance plans including plan design, risk assessments, internal reviews, self-audits, voluntary disclosures, and repayments to governmental and private health programs.

Publications

February 4, 2026

Mandatory Provider-Based Attestations Make a Comeback

January 20, 2026

2026 Health Care Reimbursement Newsletter

October 23, 2025

CMS Suspends Most Medicare Certification Activity During Government Shutdown

April 1, 2025

In Landmark Ruling, Eastern District of Texas Strikes Down FDA's Final Rule Regulating Laboratory Developed Tests

February 2025

2025 Health Care Reimbursement Newsletter

July 2024

Healthcare industry disclosure considerations: The Corporate Transparency Act
Co-Author, COSMOS

January 4, 2024

Reimbursement End-of-Year Highlights

November 2, 2023

What the Health Care Industry Needs to Know About the Corporate Transparency Act

March 1, 2023

Health Care Reimbursement and Payor Dispute Update

September 15, 2022

Health Care Reimbursement and Payor Dispute Update