



## **SUSAN CARNEY LYNCH**

**Partner**

**Washington**

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### **Biography**

Susan is a partner in BCLP's Financial Services Disputes and Investigations Practice Group and focuses her practice on healthcare fraud investigations, False Claims Act litigation, regulatory compliance, and white-collar matters. Susan advises healthcare providers, health plans, and life sciences companies on complex regulatory, compliance, and False Claims Act enforcement matters. Clients turn to Susan when facing significant regulatory risk, government investigations and litigation, or strategic business decisions involving federal healthcare programs. She brings nearly three decades of experience with the Civil Fraud Section of the U.S. Department of Justice, where she served as a Senior Trial Counsel and led high-stakes enforcement matters across the healthcare sector.

Susan has handled more than 200 False Claims Act matters nationwide across the full case lifecycle, including investigations, intervention decisions, settlements, litigation, and trial. She has

tried cases in federal district courts across the country and has extensive experience with healthcare providers, including hospital systems, skilled nursing facilities, home health agencies, hospice providers, managed care providers, medical device manufacturers, physician groups, and academic medical centers. Her work reflects deep knowledge of core False Claims Act enforcement theories, including the Anti-Kickback Statute, Stark Law, Food Drug, and Cosmetic Act, and of data-driven enforcement.

While at the Department of Justice, Susan led the Department's National Nursing Home Initiative, a flagship enforcement effort launched in 2020 to address grossly substandard care and fraud in the long-term care sector. In this role, she oversaw enforcement activity nationwide and led investigations and litigation related to long-term care clinical quality issues, staffing issues and billing concerns in nursing homes, hospices, and home health agencies. She is widely recognized as a subject matter expert in long-term and post-acute care matters.

In addition to her litigation experience, Susan advised senior DOJ officials and other federal agency leaders, including the Department of Health and Human Services, Centers for Medicare and Medicaid Services and the Office of Management and Budget, on long-term care regulatory enforcement and policy. She represented the Justice Department on Interagency Task Forces and worked closely with the U.S. Attorney's Offices, state attorneys general, and federal agencies. Susan brings to her clients a comprehensive understanding of how enforcement decisions are made and coordinated across the government.

During her time at the Department, Susan was recognized for her FCA litigation successes with numerous awards, including the National Director's Award for Superior Performance in a Healthcare Fraud Matter (2021) and the Department's Special Commendation Award for Outstanding Service in the Civil Division (2007).

Susan also offers clients a distinctive perspective informed by her academic and public health training. She holds a Doctor of Public Health in Health Management and Leadership from the Johns Hopkins Bloomberg School of Public Health, where she was inducted into the *Delta Omega* Public Health Honor Society and earned a Gerontology Certificate. This training, combined with her enforcement experience, enables her to integrate legal strategy with clinical realities and policy considerations when advising healthcare clients navigating complex regulatory environments. At this time of heightened healthcare enforcement scrutiny, Susan offers her clients a firsthand understanding of how the government assesses healthcare fraud allegations, evidence, and makes enforcement decisions and she provides practical advice to help her clients identify and manage risk while continuing to innovate and serve their patients and customers.

A recognized thought leader on healthcare fraud matters, Susan regularly speaks on False Claims Act developments, healthcare compliance, and elder justice issues and has presented at national conferences, including programs hosted by the American Health Lawyers Association, Health Care Compliance Association, National Association of Medicaid Fraud Control Units, the National

Consumer Voice for Quality Long-term Care, Center for Healthcare Strategies, and the Institute of Medicine. She has served as a Faculty Member for the National Institute of Trial Advocacy (NITA) and as an Instructor at the Department of Justice's National Advocacy Center on False Claims Act, healthcare fraud and elder justice matters.

She has served as an Adjunct Professor at The George Washington University Law School since 2000 where she has taught upper-level courses in Healthcare Fraud and Abuse and the False Claims Act. In 2016, Susan was recognized as Adjunct Professor of the Year. She has also coached moot court teams to national competition wins in several elder justice moot court competitions.

Susan earned her J.D. from the Indiana University-Bloomington Maurer School of Law where she served as editor-in-chief of the *Indiana Law Journal for Global Legal Studies*, an LL.M. in Advocacy with distinction from Georgetown University Law Center, and a B.A. from Dartmouth College. She is also a nationally registered paramedic and volunteers with the Pleasant Valley Volunteer Community Fire Company in Maryland.

## Professional Affiliations

- Masters Member, Edward Bennett Williams Inn of Court, 2005-present
- Board Member, Children's Friend of Rhode Island, 2023-present
- Advisory Board Member, Carroll County Maryland Land Trust, 2025-present
- Board Member, District of Columbia Council for Court Excellence, 1998-2019
- President, Indiana University-Bloomington Maurer School of Law Alumni Executive Board, 2017-2019
- Baldrige National Quality Award Examiner in the Healthcare Sector, NIST, 2011–2016

## Related Capabilities

- Financial Services
- Financial Institutions

## Experience

### **Managed Care:**

Conducted an investigation of a managed care organization for allegedly systematically avoiding enrolling pregnant women and unhealthy patients in their Medicaid managed care program which resulted in a \$225 million federal civil settlement and the imposition of a Corporate Integrity Agreement.

### **Skilled Nursing:**

Led and supervised numerous investigations, litigations, and a bankruptcy court trial related to skilled nursing facilities for allegedly providing grossly substandard care to their residents which resulted in collective case recoveries of over \$100 million in federal civil False Claims Act settlements and the imposition of Corporate Integrity Agreements.

Led multiple investigations of skilled nursing facilities for alleged RUGS upcoding which resulted in collective case recoveries of over \$50 million in federal civil False Claims Act settlements and the imposition of Corporate Integrity Agreements.

### **Home Health:**

Led multiple investigations of home health agencies for allegedly billing for unnecessary services rendered to patients who were not homebound and for cost report fraud which resulted in collective case recoveries of over \$100 million in federal civil False Claims Act settlements and the imposition of Corporate Integrity Agreements.

### **Medical Device Manufacturers:**

Conducted an investigation of a medical device manufacturer for allegedly billing the government for oxygen equipment that was not delivered and was not medically necessary which resulted in a \$17 million federal civil False Claims Act settlement and the imposition of a Corporate Integrity Agreement.

### **Rehabilitation Services:**

Conducted an investigation of a rehabilitation therapy provider for alleged violations of the Anti-Kickback Statute based on payments to nursing homes for referrals which resulted in a \$30 million federal civil False Claims Act settlement and the imposition of a Corporate Integrity Agreement.

\*This list includes matters worked on prior to joining BCLP

## Related Insights

News

Jun 15, 2026

## **BCLP Adds Senior DOJ Trial Counsel to Boost Healthcare Litigation Capabilities**