

HEALTHCARE INSOLVENCY & BANKRUPTCY



Clients confronting healthcare bankruptcy or insolvency need guidance they can trust from experienced partners. Husch Blackwell counsels distressed healthcare providers on their options for bankruptcy proceedings or nonbankruptcy restructurings. We then guide debtors through the process step by step, including any litigation, regulatory, or M&A work that may be entailed.

Our Healthcare Insolvency & Bankruptcy team also advises other parties of interest, including secured lenders and creditors, landlords, lessors, and vendors, on matters such as foreclosing mortgages and recovery of collateral. We counsel debtors and creditors on all aspects of healthcare workouts, including refinancing, out-of-court restructuring agreements, forbearance agreements, corporate restructurings, and purchase of assets from troubled businesses.

Our guidance to clients in the healthcare insolvency and bankruptcy sector includes:

Bankruptcy

Commercial dispute resolution

Creditors' rights and extraordinary remedies

Litigation

Workouts and out-of-court restructurings

We can always count on the team at Husch Blackwell to help us with business and operational challenges so that we can focus on caring for our patients and being innovative.

— Mark Baker, CEO,
Jack Hughston
Memorial Hospital
and The Hughston
Clinic —

Contact Information

Bruce G. Arnold
414.978.5501
bruce.arnold@
huschblackwell.com

Mark T. Benedict
816.283.4677
mark.benedict@
huschblackwell.com

Lynn Hamilton Butler
512.479.9758
lynn.butler@
huschblackwell.com

Representative Experience

Acted as lead debtor counsel in more than seven hospital bankruptcies, including four Chapter 9 municipal hospital bankruptcies.

Represented individual doctors, practice groups, home healthcare agencies and nursing homes in bankruptcy and debtor/creditor disputes, including disputes involving Medicare and Medicaid.

Represented PatientFirst Healthcare and affiliates in Chapter 11 bankruptcy. The group of companies included a surgical specialty hospital, ASC, and physician practices. All debtors emerged in a true reorganization without a sale or shutdown of the companies.

Reorganized HMC/CAH Consolidated and 12 operating affiliates in Chapter 11 bankruptcy. Completed the restructure in 15 months. These rural critical-access hospitals emerged in a true reorganization without a sale or shutdown of hospitals.

Advised rural hospital on reorganizing under bankruptcy laws based on new taxing district formation.

Counseled rural hospital on orderly liquidation and sale after patient census dropped and tax district failed.

Represented rural hospital in converting from hospital to ambulance-triage service to fit community's needs and taxing district's revenues.

Represented rural hospital in sale of assets and transfer of regulatory agreements through a bankruptcy process.

Advised asset-based lenders on financing the acquisition of surgical specialty hospitals.

Represented lessors of high-dollar medical equipment in Chapter 11 proceedings.

Counseled physician groups in sales of practice and internal financial and corporate restructuring.

Represented religious institution with investment in surgical specialty hospitals and the restructuring of an affiliate entity.

Represented large rural hospital in the first case addressing the treatment of Medicare recoupment issues.

Represented largest unsecured creditor in restructuring of insolvent staff model health maintenance insurance corporation.