



Shannon Carroll Member

Healthcare Law, Litigation

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Shannon Carroll's practice focuses on healthcare litigation, complex commercial litigation, compliance, and healthcare fraud. She represents clients from the outset of their matters through trial and appeal.

Shannon represents doctors and other healthcare providers in civil and administrative actions involving fraud allegations, reimbursement issues, and state licensing matters. She also represents healthcare clients in disputes involving contracts, restrictive covenants, shareholder oppression, and unfair competition.

Shannon counsels healthcare providers, hospitals, ambulatory surgery centers and medical staffs on peer review, fair hearing, credentialing and privileging matters.

Shannon also counsels providers and facilities on state and federal regulatory issues. Her practice includes assisting clients with conducting and responding to investigations, appeals of overpayment demands and commercial carrier audits.

Finally, she counsels individuals and licensed facilities on guardianship and special medical guardianship matters.

Previously, Shannon served as the law clerk for the Hon. Peter E. Doyne, A.J.S.C. While in law school, she interned for the Hon. Joseph S. Conte, J.S.C. and served as a graduate assistant for the Summer Institute for Pre-Legal Studies.

INDUSTRIES

- Healthcare

EDUCATION

- Seton Hall University School of Law, J.D., Member, *Seton Hall Legislative Journal*
- The College of New Jersey, B.A., *cum laude*

BAR AND COURT ADMISSIONS

- New Jersey
- New York
- New York Supreme Court, Appellate Division
- Supreme Court of the State of New Jersey
- U.S. District Court, District of New Jersey
- U.S. District Court, Eastern District of New York
- U.S. District Court, Southern District of New York
- U.S. Court of Appeals, Second Circuit

REPRESENTATIVE MATTERS

Each matter handled by Shannon depends on its unique facts and particular legal circumstances. The following are a list of results obtained by Shannon on behalf of her clients:

- Represented a chiropractic practice against an insurance company alleging that the referrals made by the chiropractor to acupuncturists were fraudulent as a matter of law based on the plain language of a relevant statute. Based on our firm’s opposition papers and argument, the Court denied the insurance company’s motion finding that defendants did not unlawfully refer for treatment.
- Defended a surgery center and its owners against claims of insurance fraud where the insurance company was seeking damages of over \$13 million. The case proceeded to comprehensive e-discovery and the exchange of well over a million pages of documents. In providing and demanding key discovery, Brach Eichler was ultimately able to resolve the case favorably to the clients.
- Represented medical practices in appeal of CMS overpayments demands before an administrative law judge, which resulted in fully favorable decisions.
- Successfully defeated summary judgment on behalf of a medical provider defending the insurance carrier’s motion seeking a fraud determination based on the provision of EMG/NCV testing.
- Represented a medical practice in this complex litigation, involving a claim against an insurance carrier for over \$284k in unpaid medical bills for services provided on an emergency basis. The insurance carrier moved to dismiss the case based on theory that the claims were preempted by ERISA. The Court denied Defendants’ motion and allowed the state based claims to proceed. The case ultimately settled in principle shortly thereafter.

*Results may vary depending on your particular facts and legal circumstances.

AWARDS

The Best Lawyers®
in America list*

2025



New Jersey Super
Lawyers® list*

2024



New Jersey Super
Lawyers® Rising
Star list*

2013-2021

*No aspect of this advertisement has been approved by the Supreme Court of New Jersey.

[Click here for the Awards and Honors Methodology.](#)

PROFESSIONAL ACTIVITIES

- Member, American Health Lawyers Association
- Member, Bergen County Bar Association, Health and Hospital Committee

Insights

[Newsletters - February 3, 2025](#)

Healthcare Law Update - February 2025

[Alerts - January 9, 2025](#)

Appellate Division Decides That IFPA Claims Are Not Subject to PIP Arbitration

[Newsletters - December 26, 2024](#)

Litigation Quarterly Advisor - Winter 2025

[Articles - November 27, 2024](#)

Atlantic Diagnostic Laboratories Overcharged Medicaid \$7.3 Million

[Articles - October 31, 2024](#)

Laboratory Pays \$27 Million to Settle Alleged False Claims and Anti-Kickback Violations

[Newsletters - October 1, 2024](#)

Healthcare Law Update - September 2024

[Articles - September 30, 2024](#)

Court Rules that Earnout Violates New York Fee-Splitting Rules

[Articles - August 30, 2024](#)

Provider Success in Federal and New Jersey Dispute Resolution Arbitrations

[Articles - August 30, 2024](#)

National Health Care Fraud Enforcement Action Results in Criminal Charges for New Jersey Defendants

[Newsletters - August 29, 2024](#)

Healthcare Law Update - August 2024
