



Elinor A. Hiller

Partner

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Related Services

Health Care ■ Health Care Legislative & Public Policy ■ Health Care Regulatory Counseling and Fraud & Abuse ■ FDA/Food, Drug & Device ■ Legislative & Public Policy

Elinor draws on her experience working with policymakers at CMS and in Congress to advise clients on complex regulatory and legislative matters. She served as the CMS administrator's senior advisor for Medicare and as a group director in the CMS Office of Legislation.

Elinor Hiller is a partner in the Health Care Group. She focuses her practice on regulatory and legislative issues concerning health care payers, providers, and manufacturers. She has experience representing clients across the health care industry on policy matters, with a focus on Medicare Advantage and Part D, Medicare fee-for-service payment rules, interoperability and price transparency, and federal insurance oversight.

Elinor previously served at the Centers for Medicare & Medicaid Services (CMS), where she was most recently the administrator's senior advisor for Medicare. Elinor advised the administrator and other senior agency officials on all parts of Medicare and also led initiatives related to health care price transparency. Earlier in her time at CMS, Elinor was the director of the Medicare Parts C and D Analysis Group in the Office of Legislation, where she managed interactions between the agency and Capitol Hill on a portfolio of issues including provider integrity. From the Office of Legislation, she worked closely with staff for the Senate Finance, House Ways & Means, and House Energy & Commerce Committees on legislative priorities and Administration policy.

Chambers USA: America's Leading Lawyers for Business has recognized Elinor in the area of Government Relations: Federal.

Representative Experience

- Assisting stakeholders with coverage and payment issues before CMS.
- Advising a Fortune 500 pharmaceutical and medical device supplier and health IT developer on HHS interoperability and information blocking regulations.
- Counsel for Medicare Advantage plans and related entities on compliance issues.
- Representing Medicare Advantage Special Needs Plans (SNPs) on issues before the regulators and Congress.
- Advising health care providers on COVID-19 Provider Relief Fund frequently asked questions.
- Advocating on issues related to use of telehealth and telehealth benefits.
- Developing legislation to enhance options for Medicare beneficiaries receiving post-acute care.
- Draft legislative solutions to address expiring provisions key to client business.
- Prepared comment letters for industry coalitions.

Publications & Presentations

Publications

- “OCR Issues Proposed HIPAA Privacy Rule for Confidentiality of ‘Reproductive Health Care,’” *Benefits Law Journal*, Summer 2023.
- “Payment and Reimbursement,” chapter in *AHLA Telehealth Law Handbook*, 2nd Edition, LexisNexis, March 2023.

Presentations

- 2024 Medicare, Medicaid, Duals & Commercial Markets Forum, AHIP, Baltimore, MD, March 11–14, 2024.

Professional & Community Engagement

- American Health Lawyers Association

Education

- Georgetown University (J.D., 2007)
- Wellesley College (B.A., 2004)

Admitted to Practice

- District of Columbia
- Massachusetts (Inactive)