J. Mark Farrar, CPA, CFE, CFF
Managing Director, Group Compliance Leader

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Summary

J. Mark Farrar is a Managing Director and the group compliance leader at Epsilon Life Sciences, and is based in Atlanta, GA. He advises clients in the U.S., Europe, South America, Africa, and Asia on complex issues such as SEC financial accounting investigations and white collar crime allegations, and provides expert witness and litigation support for Foreign Corrupt Practices Act matters, False Claims Act damages, violations of the Anti-Kickback Statute, pharmaceutical sales and marketing compliance, economic damages, global transparency, privacy and GDPR issues, risk assessments, auditing and monitoring assessments, and helping companies build and develop governance structures that are right-sized for the organization. Mark has also served as an expert witness and delivered deposition.

He has served in several secondments, including for over a year as the global Chief Compliance Officer for a multi-billion-dollar medical device and diagnostics company with over 50 world-wide locations, and for a mid-sized global pharmaceutical company and served as the U.S. Integrity & Compliance Officer and oversaw global sanctions. During these roles, he served on numerous approval committees including Grants, Donations, Independent Medical Education, Policy, and External Sponsored Studies. He also has helped build a comprehensive third-party due diligence system, sanctions screening program, and helped develop metrics for tailored management reporting.

Mark serves as an Independent Review Organization (IRO) expert and as an advisor on state and federal healthcare compliance issues. He also has assisted in the development of alternative methodologies to help refute multi-billion-dollar claims brought forth by government agencies.

Mark is a Certified Public Accountant (CPA) licensed in the state of Georgia, a Certified Fraud Examiner (CFE), and Certified in Financial Forensics (CFF). He has spoken at large industry-specific, global compliance conferences on topics ranging from global transparency issues, research & development, U.S. and global privacy, bribery and corruption, third-party due diligence programs, and using data analytics in a meaningful and ethical manner.

Education

- Master of Science in Jurisprudence (MSJ), Seton Hall Law School
- Bachelor of Business Administration, Finance and Management Information Systems, Ohio University
- Award in Accounting, University of California UCLA Extension
- Graduate Certificate - Pharmaceutical and Medical Device Law & Compliance, Seton Hall Law School
- Healthcare Compliance Certification – Asia Pacific, Seton Hall Law School
- Healthcare Compliance Certification – Europe, Seton Hall Law School
- Healthcare Compliance Certification – United States, Seton Hall Law School

Professional Experience

- Epsilon Life Sciences LLC
  Co-Founder, Managing Director, and Group Compliance Leader, 2021 – Present
- Guidehouse Inc. / Navigant Consulting, Inc.
  Partner and Global Leader, Life Sciences Governance, Risk Management and Compliance, 2008 – 2021
- Ernst & Young LLP
  Senior Manager, Fraud Investigations and Disputes Services, 2005 – 2008
- PricewaterhouseCoopers LLP – 2002-2005
  Senior Associate, Dispute Analysis and Investigations, 2002 – 2005
- National City Corporation Inc.
  Financial Risk Analyst, Corporate Accounting, 2000 – 2002

Certifications and Professional Affiliations

- Certified Public Accountant (CPA) licensed in the state of Georgia
- Certified Fraud Examiner (CFE)
- Certified in Financial Forensics (CFF)
- *Previously held (2021-2023)* - Certified Information Privacy Professional in the United States (CIPP/US)
- Completed Level 1 of the CFA® program
- Member of The American Institute of Certified Public Accountants
- Member of Forensic and Valuation Services Section of American Institute of Certified Public Accountants
- Member of Georgia Society of Certified Public Accountants
- Member of Association of Certified Fraud Examiners

Areas of Expertise

- **Compliance Advisory** – Mark routinely advises companies on the overall effectiveness of their healthcare compliance programs. Additionally, he assists pre-commercial companies create, design, and develop corporate compliance programs. Finally, Mark provides compliance advisory surrounding the seven (7) elements of an effective compliance program OIG guidance that focuses on the following elements:
    - Compliance leadership and oversight
    - Written policies and procedures
    - Training and education
    - Effective lines of communication
    - Conducting auditing, monitoring, and risk assessment
    - Enforcing standards through well-publicized disciplinary guidelines
    - Responding to detected issues and undertaking corrective actions

- **Monitorships** – Mark serves as the Independent Review Organization (IRO) for companies subject to a Corporate Integrity Agreement (CIA). In this role, Mark serves as an extension of HHS-OIG, and has routine discussions with the enforcement agency to report findings. In addition to serving as the IRO, Mark serves as the pre-IRO to assist companies in preparation for the IRO.

- **Investigations** – Mark conducts global investigations related to bribery, corruption, asset misappropriation, and financial statement fraud. These global investigations typically involve bribery and corruption where behavior and actions are subject to the Foreign Corrupt Practices Act, U.K. Bribery Act, and other global laws and regulations. Mark has also served as a forensic accountant to undercover various types of financial statement fraud and has been involved and investigated some of the biggest, most notable accounting frauds resulting in millions to billons in restatements.

- **Litigation Support / Economic Damages** – Mark provides litigation support and calculates economic damage scenarios pursuant to the Foreign Corrupt Practices Act, False Claims Act, the Anti-Kickback Statute and Food, Drug and Cosmetic Act. His expertise assists counsel when litigating the case and in settlement negotiations.

- **Expert Witness** – Mark serves as an expert witness and can opine on accounting related matters, as well as determining the overall effectiveness of a corporate healthcare compliance program. Mark is well versed in the federal rules of evidence and providing independent, expert opinions through expert reports, rebuttals, and deposition.

Below is a representative listing of engagements based on the areas of expertise listed above.

Compliance Advisory

- Mark served for over a year as the interim Global Chief Compliance Officer for a multi-billion-dollar medical device and diagnostics company. He had responsibility for all aspects of the compliance programs which included, but were not limited to, implementing new policies and procedures for global transparency requirements, to investigating and resolving investigations. During this time, Mark also implemented a global third-party due diligence program focusing on anti-bribery / anti-compliance standards as such a risk ranking and tiered due diligence based on the risk profile. Mark developed a 5-year compliance plan to assist the company in closing several gaps to bring the overall compliance program to a more current state, which in turn also helped the company align with the seven elements of an effective compliance program.
- Mark served for approximately seven months as the interim U.S. Compliance and Sanctions Officer for a mid-sized pharmaceutical manufacturer that was under several government enforcement actions with specific mandates. He served on numerous approval committees including Grants, Donations, Independent Medical Education, Policy, and Externally Sponsored Studies. Mark also built a global sanctions screening program and helped develop metrics for tailored management reporting highlighting compliance risk and obligations.
- Engaged by numerous pre-commercial pharmaceutical and medical device companies to help establish and build a healthcare compliance program that is right-sized for the organization, allowing it to grow and evolve as the company does. Activities typically include developing the code of conduct and written standards, developing training and communication based on company policy, developing fair market value rate cards, developing a privacy program, implementing a transparency program, creating and executing an auditing and monitoring plan, developing a risk assessment, setting up and operationalizing a compliance committee, and presenting to the executive committee and Board as needed.
- Engaged by numerous life sciences manufacturers to conduct compliance effectiveness reviews at numerous life sciences companies where the overall healthcare compliance program was evaluated against the OIG seven elements and the maturity of each element. Mark conducts interviews with key stakeholders, reviews written standards and training, analyzes the auditing and monitoring program, and evaluates the investigations process. Ultimately, Mark shares the results on the maturity of the healthcare compliance programs and provides recommendations on improvements as the compliance program evolves.
- Engaged by numerous life sciences manufacturers to help create a written governance structure that includes code of conduct, policies, procedures, and written instructions. The written standards range from core healthcare compliance standards (e.g., interactions with healthcare professionals, transfers of value, etc.). In addition to creating written standards, Mark has assisted in creating charters for compliance committees that outline the scope, authority, membership, meeting cadence, and committee responsibilities.
- Engaged by a pharmaceutical manufacturer to evaluate the government pricing program. Mark's team reviewed and updated the written standards related to U.S. government pricing. In addition, a three-year lookback at submitted pricing was reviewed and a recalculation was performed that ultimately led to submitting price revisions based on previously flawed calculations.
- Engaged by numerous life sciences manufacturers to assist with preparation and implementation of an enterprise-wide solution to comply with the federal Sunshine Act and select states with transparency laws in place. Mark interviewed multiple divisions across therapeutic areas within commercial sales and research & development to determine touch points with healthcare professionals and entities. He developed requirements from numerous systems that needed to flow into the enterprise-wide solution to assess aggregate spend. Mark updated various policies and procedures to align with the new enterprise-wide system to ensure compliance with the finalized federal regulations. He also met with counterparts in Europe and Asia to educate them on the new federal regulations and ensure their systems would capture the required information to adhere to the U.S. regulations.

- Engaged by approximately 30 provider systems, covering 300+ hospitals and healthcare treatments facilities to help assess their compliance with receiving stimulus funds during the COVID-19 pandemic from the CARES Act Provider Relief Fund. Our team assisted our clients to document the policies and procedures in place when attesting to funds received. Mark's team also helped clients assess and substantiate increase healthcare cost and/ or lost revenue due to the Coronavirus.

Monitorships

- Mark routinely serves as the Independent Review Organization (IRO) for mid-size to large pharmaceutical companies that are subject to Corporate Integrity Agreements (CIA). Mark's team conducts System Reviews in select years, typically in the 1st and 4th reporting periods, and annual Transaction Reviews. These reviews focus on the following areas including:

  - Sales force inquires to Medical Affairs
  - Information dissemination to Healthcare Professionals (HCPs) and Healthcare Institutions (HCIs)
  - Medical Affairs Interactions with HCPs and HCIs
  - Sales force incentive compensation
  - Call plans
  - Sample plans
  - Speaker programs and training
  - Fee for service arrangements
  - Compendia submissions
  - Investigator-Sponsored Studies
  - Authorship of publications
  - Risk assessments
  - Social media
  - Patient Assistance Programs / Patient Support Programs
  - Transfers of value to covered recipients
  - Handling of medical inquires

  Mark will then prepare an annual report that is submitted to the Company, Company Board and OIG monitor.

- Engaged by a mid-sized pharmaceutical client that was under a CIA in the process of making a sizable acquisition. Mark's team performed due diligence on the target company related to the compliance program and its policies and procedures to evaluate the alignment of its compliance program in relation to its CIA requirements. As part of the review, Mark's team analyzed the various systems and transactions that were required within the client's CIA and made recommendations. The analysis was shared with the OIG as part of negotiations for timelines related to the integration of the target and when its transactions would become subject to the evaluation of the Independent Review Organization.

- Engaged by a medical device manufacturer to conduct a pre-IRO and performed transaction testing related to product loans. Mark's team reviewed the process for how product loans are performed, documented, and tracked within the company records. Mark's team provided guidance and recommendations for how the company handled tracking field assets and the identified weakness in the systems, processes, policies and procedures. The observations identified helped the company remediate issues prior to independent IRO review.

Investigations and Litigation Support

- Engaged by a pharmaceutical manufacturer client to analyze off-label sales and marketing activities for six drugs subject to a federal investigation. Through an analysis of comparing return on investment for speaker programs, prescription behavior modification of physicians attending certain programs, and numerous baselines, Mark's team developed economic damage scenarios. These damage scenarios were in response to government inquiry, and to refute a multi-billion-dollar claim, and were based on penalties that were subject to the False Claims Act and Food, Drug and Cosmetic Act. The client settled the dispute, as well as several other lawsuits that were consolidated, for $3B+.
- Engaged by a pharmaceutical manufacturer client to analyze off-label sales and marketing activities for an anti-epileptic drug. Through its analysis of comparing market and prior period baselines, Mark's team developed numerous economic damage scenarios. Additionally, the team prepared a comparison of recent settlements within the industry to determine the percentage of sales for the drugs in question relative to their penalties and fines. These damage scenarios were in response to a government inquiry and to refute a multi-billion-dollar claim. The damages scenarios were based on penalties that were subject to the False Claims Act and Food, Drug and Cosmetic Act. The client settled the dispute for $422M.
- Engaged by a pharmaceutical manufacturer client to analyze off-label sales and marketing activities for durable medical equipment and the related drug to treat cystic fibrosis. Through its research of approved indications set forth by Medicare and Medicaid, Mark's team discovered indications approved for reimbursement that were not FDA approved for the drug in question. The team prepared a dynamic damage model to account for various baselines, multiple time periods, and built in the flexibility to exclude certain diagnosis groupings. These damage scenarios were in response to government inquiry that were subject to the False Claims Act. The client settled the dispute for $72M.
- Engaged by a pharmaceutical manufacturer's Chief Compliance Officer to review sales and marketing practices and to investigate an alleged kick-back scheme to physicians. Mark's team's review consisted of visiting numerous locations and exercising the right to audit option on third party vendors. These vendors were engaged to provide physician meetings and the team's review was to determine if the procedures and policies were enforced as set forth by the manufacturer master service agreement with the vender. The team compiled data from numerous outside vendors to monitor and track honoraria payments to physicians and to determine if they were within acceptable limits. The findings marked the beginning of a massive off-label sales and marketing investigation which settled for $1.4B in damages.
- Engaged by a pharmaceutical manufacturer client to analyze off-label sales and marketing activities for a cardiovascular drug. Mark's team's analysis looked at the usage of the drug for unapproved indications, as well using the drug too often and not within the stated timelines. The analysis was used to assist with settlement discussions and to offset previous settlement offers. The client settled the dispute for $85M.
- Engaged by a hospital system on the verge of bankruptcy to investigate allegations of financial statement fraud. As part of the internal investigation, Mark's team interviewed numerous executives and accounting personnel and performed a review of manual top-side journal entries. The team's investigation revealed no explicit fraudulent activity but did uncover poor strategic decisions by executive management and excessive discretionary spending. This, coupled with an ailing economy, deteriorated the financial condition of the hospital system, which led to its bankruptcy.
- Engaged by a hospital network to resolve allegations of financial statement fraud raised by a whistleblower. Mark's team spent six months reviewing manual journal entries, interviewing local CFOs and controllers in multiple locations, and working with the external auditors. The analysis uncovered a massive financial statement fraud that restated net income with a reduction of $50M over a five-year period and reduced assets by $250M.

- Engaged by a medical device manufacturer client to investigate a foreign subsidiary because of allegations of an embezzlement scheme by the purchasing manager. The project also had FCPA implications, as the foreign subsidiary was in a country with a nationalized health care system where physicians were technically government employees. Mark's team analyzed disbursement data and invoices to determine the embezzlement scheme. The team also interviewed key financial and sales employees and performed a sample review on expense reimbursements.
- Engaged by a pharmaceutical wholesaler client to perform FCPA investigations and assessments on five separate engagements that were potential acquisition targets and had international locations. Each entity represented a separate deal, and of the five deals only, two closed, with the other three being cancelled based on Mark's team's findings. As part of its procedures, the team interviewed key executives and performed sample testing related to cash disbursements, expense reimbursements, and performed a contract review.
- Engaged by a private equity firm that was performing due diligence on two oil and gas companies. Mark's team performed a FCPA assessment at the international locations of the targets. The team interviewed key executives, performed a contract review, and performed sample testing related to cash disbursements and expense reimbursements. As part of its findings, the team uncovered improper payments to foreign government officials that were disguised as training expenses under the contract.
- Engaged by a pharmaceutical manufacturer client to help defend a claim brought forth by government agencies. The agencies alleged that the manufacturer overstated its listed wholesale acquisition cost price, which affected the rates set forth for reimbursement by Medicare and Medicaid. The manufacturer then sold the product at a much lower price to the customers of Medicare and Medicaid, such as hospitals, home health agencies, and pharmacies. The company went on to market the spread to these customers based on the artificially high government reimbursement. Mark's team's analysis helped get the case dismissed.
- Engaged by a home healthcare client to collect and analyze data as part of multiple subpoenas from the state Attorney General's office related to overcharging Medicaid and not paying appropriate refunds. Through its review, Mark's team discovered an immaterial number of overpayments by Medicaid that were not refunded properly. The matter was settled with the state Attorney General's office for an undisclosed amount.
- Engaged by a clinical research organization that was a joint venture between a major hospital and physician practice group. Mark's team tested the fair market value of the hourly rate charged for the principal investigator for research trials.
- Engaged by several hospital systems conducting proactive billing and coding reviews of radiology and laboratory services to determine if any over- or under billing occurred. A team of certified coders reviewed a statistical sample of claims to determine errors rates. The team prepared a damage model to extrapolate the results of the sample to the population to determine the amount owed to government agencies.
- Engaged by a managed care insurance company in the defense of a national class action lawsuit alleging improper reimbursement of payments for out-of-network services over a ten-year period. Mark's team conducted numerous client interviews to understand the methodology and practices used in storing electronic claims data for over 40 active and legacy claims processing systems. The team extracted billions of records from these systems to perform detailed analysis, including calculation of alternative damages numbers, for all processing systems to refute Plaintiffs' allegations.
- Engaged by a laboratory and diagnostic service provider to analyze data in response to allegations of overcharging a state Medicaid agency. Mark's team collected and analyzed over one billion records from multiple systems. As part of its review, the team determined all Medicaid claims for which the state agency did not receive the best price and calculated damages for those claims. The damages calculations were based on a variety of benchmarks that included low price, average price, and numerous percentile prices.

- Engaged by a pharmacy services client to team collect and analyze data as part of a subpoena from the state Attorney General's office related to allegations that the pharmacy substituted the generic prescribed drug for a more expensive branded drug. Mark's team coordinated with hundreds of pharmacies to gather data to determine the financial impact of the substitution.
- Engaged by an assisted living and skilled nursing facility to audit a subcontractor providing laundry and food service to the facilities. The Navigant client was contacted by a whistleblower with allegations of a massive fraud to shift hours to meet minimum requirements set forth in a master services agreement. Mark's team performed interviews with key executives and performed a contract audit which resulted in the cancellation of the contract due to non-performance. The records and documentation were un-auditable, but evidence suggested a massive shifting of cost, which supported the whistleblower's allegations.
- Engaged by a large managed care organization that was in a commercial dispute with several providers regarding rate changes. As part of the dispute, the client asked that Mark's team perform an unbundling analysis to determine the total amount overpaid during a specific period before the client implemented a claim check software system. This amount would be used as an offset to any calculated damages related to improper rate changes.
- Engaged by a hospital system in a False Claims Act qui tam matter in which allegations were made that the hospital system was improperly billing Medicare by inflating charges to seek additional outlier payments. Additional allegations involved the hospital upcoding and billing for unnecessary procedures. Mark's team advised the client on the correct annual calculation for outlier payments and performed a statistical sample to analyze patient records to determine if the proper procedures were billed for.
- Engaged by an oilfield services client to investigate allegations that the company was engaging in a tax fraud scheme by transferring revenues to foreign locations where the tax rates were lower. Mark's team reviewed thousands of transactions to substantiate that machinery that was transferred was either purchased at an arm's length transaction or was being field tested and was returned. A written expert report was provided to the IRS.
- Engaged by a software manufacturer to investigate allegations of inappropriate revenue recognition. Mark's team advised outside counsel through the complex accounting issues associated with the accounting guidance for software revenue recognition, SOP 97-2, and selected a sample of contracts to review. The team discovered inappropriate side deals and price concessions, as well as improper revenue recognition. The findings were presented to the Audit Committee.
- Engaged by a financial services company to investigate financial statement fraud at a wholly owned insurance brokerage subsidiary. At the client's direction, Mark's team posed as company internal auditors and interviewed executive management. Based on its review of the general ledger, the team was able to confirm inappropriate adjusting journal entries made by executive management, which ultimately led to the dismissal of the CEO, CFO, and controller of the insurance brokerage. The financial statements were ultimately restated.
- Engaged by a mortgage originator against which a whistleblower made allegations of improper billing practices at its wholly owned software subsidiary. Mark's team analyzed the accounting records and interviewed executives and project managers in Silicon Valley, CA, and Bangalore, India. The team discovered billing errors did occur to substantiate the whistleblower allegations, but the amounts were immaterial. The findings were presented to the Board of Directors on two separate occasions.
- Engaged by a mortgage servicing client to investigate a massive financial statement fraud and perform restructuring services for the bankrupt company. Mark's team worked with numerous investors and subsequent servicers to determine the correct amounts and balances for individual loans as once the bankruptcy occurred the bank accounts were frozen by the FDIC. The work performed on the client led to the federal indictment of the Chairman and CEO as well as other company executives.

- Engaged by a collection agency to assist in substantiating damages caused by a local law firm. The client reimbursed the local law firm for court costs and other expense to file the appropriate paperwork to seek for collection of the debt. The local law firm had been accepting the reimbursement without filing the cases in the state and county court systems. Mark's team's analysis validated the client's work regarding the amount of improper reimbursement. Furthermore, due to statute of limitations, the team determined which cases were no longer collectable due to the passage of time.
- Engaged by a utility company to review and analyze compliance controls and procedures as part of a settlement agreement. The company's settlement agreement with the government was due to massive overbilling through the company's purchase gas adjustment. As part of a settlement, the company was required to engage an independent party to test its controls and billing procedures so that overbilling did not occur. Mark's team tested and documented the internal controls and performed interviews of key management positions.
- Engaged by the Board of Trustees of a large endowment fund that provides monies to a private university. Mark's team reviewed the monies spent and determined if the funds were being properly allocated based on original intent of the endowment and the articles set forth by it. This included an analysis of all the investments and associated returns to properly verify the capital gains/ losses and dividends paid.
- Engaged by a chemical manufacturer client to assist in calculating a historic research and development tax credit that was being used as a current baseline for the present-day tax credit. Using various historic cost accounting records, Mark's team was able to identify qualified research expenses and calculated the base period amount upon which the research and development credit was based. Mark managed 80+ team members researching multiple facets of the investigation. The team produced a 5,000-page expert report, with exhibits and appendices, and expert testimony was given in tax court. The testimony and expert report upheld the historic research and development baseline.
- Engaged by an insurance brokerage to defend allegations of underpayment to bankrupt institution. The liquidator of bankrupt insurance underwriter had filed suit for claims of unpaid premiums totaling $100M. Mark's team was able to trace the funds paid to reduce total damages to approximately $1M.

Expert Testimony

- PharmacyChecker.com LLC v. National Association of Boards of Pharmacy, Alliance for Safe Online Pharmacies, Center for Safe Internet Pharmacies Ltd., LegitScript LLC, and Partnership for Safe Medicines, Inc.
  U.S. District Court – Southern District of New York
  Civil Action No. 7:19-cv-07577

Publications

- Farrar, J. Mark, Klimberg, Steven, Prinzi, Liz, Chandler, Matt, Horton, Casey, Helman, Saul. "10 Key Quotes and Takeaways from the Office of Inspector General's 2023 General Compliance Program Guidance". https://www.linkedin.com/company/epsilonlifesciences/posts/?feedView=all , December 2023.
- Farrar, J. Mark., Norris, Katie., Segobiano, Brian., Mullady, Kelsey. "DOJ Strengthens Position on Corporate Criminal Enforcement with Latest Policy".
  https://www.linkedin.com/company/epsilonlifesciences/posts/?feedView=all , November 16, 2021.
- Farrar, J. Mark., Hauser, Thomas., Lui, Juliet. "Managing the Business and Legal Risks of Working with Third Parties." MedTech Strategist, June 22, 2020.
- Farrar, J. Mark., Mullady, Kelsey. "How To Build A Compliance Program That's Rightsized For Your Organization." Life Sciences Leader, August 1, 2019.

- Helman, Saul B., Farrar, J. Mark, Careful, Johna, Prinzi, Liz. "A Prosecutor's Guide to Evaluating a Compliance Program: What Should Your Board Be Asking?" www.guidehouse.com , May 2019
- Farrar, J. Mark, Beilby, Darin. "Corporate Integrity Agreement Report, 2015 Update." www.navigant.com , July 2015.
- Farrar, J. Mark., Williams, Jim., Dingler,Christian., Boone, Corey and Helman, Saul B. "FDA's New Social Media Draft Guidances: Reason to be Atwitter?" www.navigant.com. August 2014.
- Farrar J. Mark., Ford, Bernard. "Quartley False Claims Act Analysis and Trends." www.navigant.com. Posted quarterly in 2009 and 2010.

Speaking Engagements

- PCF - The 23rd Annual Pharmaceutical Regulatory and Compliance Congress and Best Practices Forum, Oct 24, 2022. "Overview of ESG and the Role of Ethics & Compliance"
- Medispend Webinar – July 12, 2022. "Evolving Compliance: How to Remain Nimble While Mitigating Risk."
- PCF - The 21th Annual Pharmaceutical Regulatory and Compliance Congress and Best Practices Forum, June 16, 2021. "Ethics & Compliance in 3rd Party Management Beyond Due Diligence"
- Guidehouse – Guidehouse webcast. March 30, 2020. "Field Force Monitoring in the COVID Era"
- Fleming – 8th Annual Corporate Compliance & Transparency in Life Sciences, Feburary 12, 2020. "CCO Roundtable"
- Fleming – 7th Annual Corporate Compliance & Transparency in Life Sciences, Feburary 20, 2019. "How to Create An Effective Compliance Program in Life Sciences"
- PCF - The 19th Annual Pharmaceutical and Medical Device Compliance Congress, November 8, 2018. "Risk Assessments and Mitigation Plans: Best Practices and Lessons Learned"
- PCF – 8th Asia Pacific Pharmaceutical and Medical Device Compliance Congress, September 11, 2018. "Using Data Analytics for Enhanced Compliance Monitoring"
- CBI – 14th Annual Medical Device and Compliance Congress, June 14, 2018. "Enforcement Update – Tackling FCPA, Anti-Corruption, and Anti-Bribery"
- CBI - 15th Annual Pharmaceutical Compliance Congress, April 23, 2018. "Industry's Guide to GDPR Compliance"
- CBI – 4th West Coast Compliance Congress, October 27, 2017. "The Evolving World of Privacy"
- PCF – 8th Asia Pacific Pharmaceutical and Medical Device Compliance Congress, September 14, 2017. "Global Data Privacy Update and the Impact to the Life Sciences Industry"
- CBI – 4th West Coast Compliance Congress, April 25, 2013. "Monitoring for Transparency"
- CBI – National Disclosure Summit, Feburary 20, 2013. "Managing HCP Relationships"
- CBI – 7th Annual Forum on Sunshine & Aggregate Spend, August 20, 2012. "Understand Future Litigation and Enforcement Potential of Publicly Reported Data – Identify Risks and Implement Internal Controls"
- CBI – 4th Annual Summit on Disclosure, Transparency and Aggregate Spend for Drug, Device and Biotech Companies, March 27, 2012. "Research & Development Compliance"
- McGuire Woods - 2nd Annual Medical Device, Durable Medical Equipment & Diagnostics Conference, November 3, 2010. "Compliance Effectiveness and Board Certification"

- Georgia Institute of Technology – Guest speaker Accounting Club, February 24, 2011. "The Red Flags of Fraud".
- CBI - 4th Annual Forum on Tracking State Laws and Aggregate Spend, August 16, 2010. "Pursuing Compliance Effectiveness with HCP Aggregate Spend Management and Reporting"
- Emory University – Guest lecturer Intermediate Accounting, October 5, 2009; October 4, 2010; September 26, 2011; October 1, 2012. "An Overview of Fraud Investigations".