



Thanks to the extraordinary commitment and expertise of AHLA leaders, the American Health Lawyers Association continues to thrive and serve as the essential health law resource in the nation. The Association's strong foundation reflects a history that is vibrant, meaningful and worth sharing. Finding a way to preserve AHLA's history was especially relevant in light of the Association's 50<sup>th</sup> Anniversary, which was celebrated throughout 2017.

This transcript reflects a conversation between AHLA leaders that was conducted via audio interview as part of the Association's History Project. More than 60 of AHLA's Fellows and Past Presidents were interviewed. A video documentary was also prepared and debuted on June 26 during AHLA's 2017 Annual Meeting in San Francisco, CA.

**February 15, 2017**

**Katherine Benesch interviewing Gail Hasbrouck:**

**Katherine:** Well, this is Katherine Benesch. I'm calling from Benesch and Associates in Princeton, and I have the pleasure this afternoon of interviewing Gail. Gail is a fellow of the American Health Lawyers Association where she served on the board of directors, and Gail, you've been for many years the Senior Vice President, General Counsel and Corporate Secretary of Advocate Health Care. You have many distinctions in your resume, such as you're currently chairman, are you not, of the Board of Directors of the American Heart Association. That's really great. You also received a Salute to Excellence Award by the Northwestern University Black Alumni Association among many other things. At any rate, rather than me telling about your resume, why don't you tell us a bit about your career, your legal career, as it's progressed in health care, particularly from the time when there was no such thing as health care law. Do you wanna talk to us a few minutes about that?

**Gail:** Well, it is my pleasure. It is interesting to realize that I've had a career for a number of years now that I can be a part of the American Health Lawyers History project.

**Katherine:** I think we both feel that way.

**Gail:** Yes. I actually did start in this field when it wasn't as recognized, and therefore there were not the curriculums in the law school that we are just so fortunate to have now. I received my undergraduate degree at Berkeley and my major was sociology, and I went to the University of Chicago and received my masters in the School of Social Service Administration and my focus and desire was to work in the health care field. I spent two years at the University of Illinois Medical Center helping to train residents and social work students and also working in counseling individuals who had various psychological problems.

As I was doing that, I started thinking about law school and thinking that I could perhaps combine a legal degree and my background in the medical and health care arena and be able to be more impactful in terms of helping in actually making certain that patients were taken care of appropriately and fairly and having access, and I had very many big dreams. I took a couple of law classes and decided, as probably many have, that this was a full-time responsibility, so I stopped working and was able to attend Northwestern Law School, now the Pritzker School of Law, and completed my law degree. Also, at the same time was really reaching out to friends, colleagues, individuals that had been pointed out to me that were in the health care field, in the

**American Health Lawyers Association**

1620 Eye Street, NW, 6th Floor • Washington, DC 20006-4010  
(202) 833-1100 • Fax (202) 833-1105 • [www.healthlawyers.org](http://www.healthlawyers.org)

legal field, and started trying to get a feel for whether or not what I was talking about was possible. As a result of that, I was able to be hired in the General Counsel Office for the Health and Hospitals Governing Commission.

Katherine: Was that in Illinois?

Gail: That was in Illinois and it ran all of the county health facilities in Illinois. That was a combination of a very large, complex hospital, long-term care facility and the prison hospital, so it was quite a variety and health care and many, many challenges as you can imagine, but it was my first opportunity to actually combine my knowledge of the law as well as my knowledge of how health care works and really try and make a difference. I actually learned quite a bit in that position. I was there for a few years and then I was lucky enough to have the opportunity to be the second attorney in an organization called Evangelical Health Systems.

So, three years before I started there, they determined that they should have a general counsel. They had hired an individual who found himself to be in meetings all the time. They certainly embraced the importance of legal knowledge, but because he was in meetings all the time he really could not establish the legal function. I was hired by him. I remember kind of arrogantly, but honestly, saying to him, "I don't think there are very many people in the country that have the kind of background that I have." He looked at me and said, "You know, I think you're right." He hired me and I was able to, while he continued to be in quite a few meetings, establish the legal function, the risk management function, the insurance function, and together we started really growing the department. We did this for a number of years and then he moved to another role and I became General Counsel in 1982.

Katherine: Did that become Advocate Health Systems?

Gail: Not at that time, but it did later. There was a merger between Evangelical Health Systems and Lutheran General Health Systems, and that became Advocate Health Care. What I was going to say, from 1982 on and still today, one of the things that I thought was very important was to develop a legal function that was like a small law firm, and therefore to hire individuals who had expertise and experience that would allow for much of the legal work to be done internally, therefore helping to keep down some of the costs that you can experience with trying to have appropriate legal advising and counseling for an organization as complex as a health care organization.

We have expertise in terms of transactions. We've handled very, very complex matters in the multi-million dollar and even billion dollar category internally. We have a real estate attorney that handles all the real estate. Labor and employment lawyer. One that focuses on supply chain and other contracts. Those are just examples. One that focuses on managed care and all that's related there. There are examples, and then also as we know, compliance continued to be very, very important, so about 10 years ago I took on the compliance function and really developed that into a separate department from legal focusing on compliance and privacy. I know that's a little bit controversial because it is a position that reports to the General Counsel, but it also has a direct reporting relationship to the audit committee of the board. It has worked out very well. Our thinking within Advocate was that there was such a need to have a focus in this area that it really needed to have someone over it that understood what the issues were from a legal and compliance perspective. I think that might summarize it.

- Katherine: From this experience you told me that you started the In-House Counsel Program at American Health Lawyers. You wanna talk a bit about that and talk a bit about your work at AHLA and on the board and how you started the In-House Counsel Program?
- Gail: Absolutely. It's one of the things that I'm very, very proud of. I was on the Board of Directors of the American Health Lawyers for several years, and one of the things that we wanted to do was to try and be an organization that was attractive to not only those who were in private practice, but those who were in house. We had certainly excellent programming, but it wasn't necessarily programming that would have a particular focus for in-house counsel, and we thought that this was a missed opportunity.
- The board asked me to be the board person who helped to start a new program. We determined that we should have a program just for and focused on the work of in-house counsel on the Sunday before the meeting started, and to have for the most part, not to the exclusion but for the most part, to have speakers who were in-house counsel, who were seasoned and would be able to provide education and some very practical kinds of discussions around complex issues that in-house counsel has to manage. We started the program, and it continues to this day.
- What is important is not only is it an education program that's focused on in-house counsel, it's another opportunity for networking with counsel. I also think that's generally one of the most important benefits of being active with the American Health Lawyers is because through this networking you are able to meet colleagues who are working in the same field, who have perhaps have to deal with some of the same problems that you're dealing with, or who can just be helpful in discussing issues so that you realize that you are not the only one that's having a challenging time around something.
- You get to know colleagues from all over the country that are focused on health law, and certainly with the in-house counsel program you get to meet and spend time with in-house counsel and you have the possibility of getting to know them to point that you can pick up the phone and give them a call and have a conversation at a level that is very, very helpful to you when you're just trying to figure some things out or bounce something off of someone or even get a recommendation for perhaps hiring someone in private practice that would be helpful in a particular area. I think that it's been wonderful, and I always say to the attorneys who I have hired, if you're not a member we're going to make sure that you become a member because it's a wonderful opportunity for education and networking. I think it's the best way to have a pretty broad understanding of what is happening in the field.
- Katherine: I think you mentioned to me also that you thought that one of the great benefits of AHLA was just the camaraderie among all the lawyers that are members of the group and attend the programs and work with each other.
- Gail: Absolutely. It's a wonderful, inviting organization and you do enjoy each other. You have a lot of respect for each other. You understand each other's challenges. It's a wonderful program to be a part of on an ongoing basis. There are great programs during the year and it's a great way to just keep up with people.
- Katherine: The other thing we were gonna talk about was what you've seen over the years is a change in the practice of health law and what that will bring in the future for AHLA, if you would advise the current board to do anything differently or just how health law has changed over the years.

- Gail: Unfortunately, I feel that the regulatory environment, which has always been significant in terms of having to understand the changes and the complexity, I think it's gotten to be much more difficult to keep up with all of the heavy regulations. I also think that it has always been a punitive environment. In other words, there's a sense that you are trying to do something bad. You're trying to get away with something, and we're going to prevent you from doing that as opposed to a regulatory environment that is supportive of you trying to improve access for health care, to work at reducing cost. It's just been a very punitive environment.
- I think even more recently there's more concern about potential liability exposure, personal liability exposure, for not only clients but also for the lawyers who are trying to advise and represent them. I think it's become more and more of a challenge to be able to move through that environment when you're trying to do the right thing to provide health care to as large a population as possible. That's been very difficult, and I want young people who are coming into this profession to understand that I think it's absolutely a wonderful profession because it's not any way routine or boring. It is always gonna be challenging, but I want them to understand that they really do have to be very careful and not overstep their bounds and their knowledge, to be careful about that and get the expertise that they need instead of half-guessing or looking into something superficially I guess is my best advice.
- Katherine: Is there anything that you think that AHLA could do that it's not doing already to help lawyers make their way through this environment as it is at present?
- Gail: I do think that AHLA is trying to in appropriate ways advise some of the regulatory agencies or to write articles, opinions and get that information out about the impact of some of the proposed regulations. I think that we must continue to do that because we do have the expertise, and that's important to try and educate as much as possible within the regulatory environment as to the pros and cons of regulations that are being proposed. I think that's something that's very important for us to do.
- Katherine: I think our time is about up, but is there anything else that you would like to add just given that we are recording some things for posterity here for the AHLA and for new lawyers and old lawyers and whoever else listens to this very interesting conversation?
- Gail: The only thing that I would add is the American Health Lawyers has been a mainstay for me over the years as well as any colleagues and friends across the country, and the reason for that is the wonderful education opportunities, networking opportunities, and just the general camaraderie. Very professional at a very high level, and I just want to thank the American Health Lawyers for that and to recommend it very highly to those who are entering the field. You will never regret it. It is a wonderful, wonderful area of practice. American Health Lawyers helps you to really do it well.
- Katherine: Gail, thank you so much. This has been a really interesting interview, and we really appreciate your time and everything that you have contributed to AHLA and to this history project. Thank you very much. This has been great.

