



Thomas Tanabe

Associate

Dallas

thomas.tanabe@haynesboone.com

+1 214.651.5235

PRACTICES Healthcare and Life Sciences, Healthcare Transactions and Regulatory, Fraud, Abuse, and Compliance, Health Privacy (HIPAA) and Healthcare IT

Thomas Tanabe is an associate in the Healthcare Transactions and Regulatory Practice Group in Haynes Boone's Dallas office. His practice focuses on providing comprehensive guidance to clients navigating complex healthcare regulatory and business transactional matters.

During his time at Texas A&M University School of Law, Thomas externed with multiple large health systems' legal departments and a federal agency. These experiences give him a unique insight into the healthcare industry, which he leverages to provide clients informed and practical guidance.

Prior to entering the legal field, Thomas was a public health researcher and an infectious disease data analyst for both state and local health departments.

QUALIFICATIONS

EDUCATION

- J.D., Texas A&M University School of Law, 2024, cum laude
- M.P.H., University of Texas Health Science Center Houston, 2020, Graduate Certificate in Healthcare Administration
- M.B.A., University of Texas at San Antonio, 2020
- B.S., University of Texas at San Antonio, 2018, summa cum laude
- B.A., University of Texas at San Antonio, 2018, summa cum laude

ADMISSIONS

- Texas
-

PUBLICATIONS AND SPEAKING ENGAGEMENTS

- "Hot Topics in Fraud for Healthcare Technology Companies," co-author, Dallas Bar Association Headnotes, April 2025, Volume 50, Number 4.

- “HIPAA Security Rule Proposed Updates: Addressing Increasing Cyberthreats in Health Care,” co-author, American Health Law Association, January 29, 2025.
 - “Compliance Deadline for HIPAA Reproductive Health Care Privacy Rule Looms While Uncertainty over Future Remains,” co-author, American Health Law Association, December 12, 2024.
-

PROFESSIONAL AFFILIATIONS AND ENGAGEMENTS

- Dallas Bar Association Health Law Section
 - American Health Law Association
-

SELECTED CLIENT REPRESENTATIONS

- Regularly perform comprehensive state and federal healthcare regulatory reviews, analyses, and assessments of various arrangements and transactions for compliance with fraud and abuse and other laws.
- Regularly draft and review HIPAA privacy and security policies and procedures and business associate agreements for covered entities and business associates.
- Regularly provide healthcare regulatory guidance to issuers and underwriters in connection with Exchange Act filings and related activities.
- Assist in Medicare audit appeals including Administrative Law Judge hearings before the Office of Medicare Hearings and Appeals (OMHA).
- Conduct anti-kickback and other fraud and abuse analyses for healthcare companies and providers involving discounts, referral arrangements, marketing/advertising programs, and other arrangements.
- Conduct surveys of material state laws applicable to healthcare clients, including those related to the corporate practice of medicine, professional entity formation and registration, data privacy, and provider licensing.