Case Nos. 85525 & 85656

In the Supreme Court of Nevada

UNITED HEALTHCARE INSURANCE COMPANY; UNITED HEALTH CARE SERVICES, INC.; UMR, INC.; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.; and HEALTH PLAN OF NEVADA, INC.,

Appellants,

vs.

FREMONT EMERGENCY SERVICES (MANDAVIA), LTD.; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C.; and CRUM STEFANKO AND JONES, LTD.,

Respondents.

UNITED HEALTHCARE INSURANCE COMPANY; UNITED HEALTH CARE SERVICES, INC.; UMR, INC.; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.; and HEALTH PLAN OF NEVADA, INC.,

Petitioners,

vs.

THE EIGHTH JUDICIAL DISTRICT COURT of the State of Nevada, in and for the County of Clark; and the Honorable NANCY L. ALLF, District Judge,

Respondents,

us.

FREMONT EMERGENCY SERVICES (MANDAVIA), LTD.; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C.; and CRUM STEFANKO AND JONES, LTD.,

Real Parties in Interest.

Electronically Filed Apr 18 2023 09:36 PM Elizabeth A. Brown Clerk of Supreme Court

Case No. 85525

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101	Recorder's Transcript of Hearing Motion for Leave to File Opposition to Defendants' Motion to Compel Responses to Second Set of Requests for Production on Order Shortening Time in Redacted and Partially Sealed Form	05/12/21	17	4155–4156
107	Recorder's Transcript of Hearing Motion for Leave to File Plaintiffs' Response to Defendants' Objection to the Special Master's Report and Recommendation No. 3 Regarding Defendants' Second Set of Request for Production on Order Shortening Time in Redacted and Partially Sealed Form	06/09/21	17	4224–4226
92	Recorder's Transcript of Hearing Motion to Associate Counsel on OST	04/01/21	16	3981–3986

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483	Recorder's Transcript of Hearing re Hearing (Filed Under Seal)	10/13/22	142	35,259–35,263
346	Recorder's Transcript of Hearing Re: Hearing	09/22/22	72	17,951–17,972
359	Recorder's Transcript of Hearing Status Check	10/20/22	76	18,756–18,758
162	Recorder's Transcript of Jury Trial – Day 1	10/25/21	25 26	6127–6250 6251–6279
213	Recorder's Transcript of Jury Trial – Day 10	11/10/21	36 37	8933–9000 9001–9152
217	Recorder's Transcript of Jury Trial – Day 11	11/12/21	37 38	9185–9250 9251–9416
224	Recorder's Transcript of Jury Trial – Day 12	11/15/21	39 40	9522–9750 9751–9798
228	Recorder's Transcript of Jury Trial – Day 13	11/16/21	40 41	9820–10,000 10,001–10,115
237	Recorder's Transcript of Jury Trial – Day 14	11/17/21	42 43	10,314–10,500 10,501–10,617
239	Recorder's Transcript of Jury Trial – Day 15	11/18/21	43 44	10,624–10,750 10,751–10,946
244	Recorder's Transcript of Jury Trial – Day 16	11/19/21	44 45	10,974–11,000 11,001–11,241
249	Recorder's Transcript of Jury Trial – Day 17	11/22/21	46 47	11,273–11,500 11.501–11,593
253	Recorder's Transcript of Jury Trial – Day 18	11/23/21	47 48	11,633–11,750 11,751–11,907
254	Recorder's Transcript of Jury Trial – Day 19	11/24/21	48	11,908–11,956
163	Recorder's Transcript of Jury Trial – Day 2	10/26/21	26	6280-6485
256	Recorder's Transcript of Jury Trial – Day 20	11/29/21	48 49	12,000 12,001–12,034

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262	Recorder's Transcript of Jury Trial – Day 21	12/06/21	49	12,078-,12,135
266	Recorder's Transcript of Jury Trial – Day 22	12/07/21	49 50	12,153–12,250 12,251–12,293
165	Recorder's Transcript of Jury Trial – Day 3	10/27/21	27 28	6568–6750 6751–6774
166	Recorder's Transcript of Jury Trial – Day 4	10/28/21	28	6775–6991
196	Recorder's Transcript of Jury Trial – Day 5	11/01/21	30 31	7404–7500 7501–7605
197	Recorder's Transcript of Jury Trial – Day 6	11/02/21	31 32	7606–7750 7751–7777
201	Recorder's Transcript of Jury Trial – Day 7	11/03/21	32 33	7875–8000 8001–8091
210	Recorder's Transcript of Jury Trial – Day 8	11/08/21	34 35	8344–8500 8501–8514
212	Recorder's Transcript of Jury Trial – Day 9	11/09/21	35 36	8724–8750 8751–8932
27	Recorder's Transcript of Proceedings Re: Motions	04/03/20	4	909–918
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80	Recorder's Transcript of Proceedings Re: Motions	02/22/21	16	3757–3769
81	Recorder's Transcript of Proceedings Re: Motions	02/25/21	16	3770–3823
93	Recorder's Transcript of Proceedings Re: Motions	04/09/21	16 17	3987–4000 4001–4058
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45	Recorder's Transcript of Proceedings Re: Motions (via Blue Jeans)	07/23/20	7	1628–1643
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67	Recorder's Transcript of Proceedings Re: Motions (via Blue Jeans)	12/23/20	12	2786–2838
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105	Recorder's Transcript of Proceedings Re: Motions Hearing	06/03/21	17	4185–4209
106	Recorder's Transcript of Proceedings Re: Motions Hearing	06/04/21	17	4210–4223
109	Recorder's Transcript of Proceedings Re: Motions Hearing	06/23/21	17 18	4240–4250 4251–4280
113	Recorder's Transcript of Proceedings Re: Motions Hearing	07/29/21	18	4341–4382
123	Recorder's Transcript of Proceedings Re: Motions Hearing	09/02/21	19	4610–4633
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29	Recorder's Transcript of Proceedings Re: Pending Motions	05/14/20	4	949-972
51	Recorder's Transcript of Proceedings Re: Pending Motions	09/09/20	8	1933–1997
15	Rely in Support of Motion to Remand	06/28/19	2	276–308
124	Reply Brief on "Motion for Order to Show	09/08/21	19	4634–4666

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19	Reply in Support of Amended Motion to Remand	02/05/20	2 3	486–500 501–518
330	Reply in Support of Defendants' Motion for Remittitur and to Alter or Amend the Judgment	06/22/22	70	17,374–17,385
57	Reply in Support of Defendants' Motion to Compel Production of Clinical Documents for the At-Issue Claims and Defenses and to Compel Plaintiff to Supplement Their NRCP 16.1 Initial Disclosures	10/07/20	10	2337–2362
331	Reply in Support of Defendants' Renewed Motion for Judgment as a Matter of Law	06/22/22	70	17,386–17,411
332	Reply in Support of Motion for New Trial	06/22/22	70	17,412–17,469
87	Reply in Support of Motion for Reconsideration of Order Denying Defendants' Motion to Compel Plaintiffs Responses to Defendants' First and Second Requests for Production	03/16/21	16	3895–3909
344	Reply in Support of Supplemental Attorney's Fees Request	08/22/22	72	17,935–17,940
229	Reply in Support of Trial Brief Regarding Evidence and Argument Relating to Out-Of- State Harms to Non-Parties	11/16/21	41	10,116–10,152
318	Reply on "Defendants' Rule 62(b) Motion for Stay Pending Resolution of Post-Trial Motions" (on Order Shortening Time)	04/07/22	68	16,832–16,836
245	Response to Plaintiffs' Trial Brief Regarding Punitive Damages for Unjust Enrichment Claim	11/19/21	45 46	11,242–11,250 11,251–11,254

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230	Response to Plaintiffs' Trial Brief Regarding Specific Price Term	11/16/21	41	10,153–10,169
424	Response to Sur-Reply Arguments in Plaintiffs' Motion for Leave to File Supplemental Record in Opposition to Arguments Raised for the First Time in Defendants' Reply in Support of Motion for Partial Summary Judgment (Filed Under Seal)	10/21/21	109	26,931–26,952
148	Second Amended Complaint	10/07/21	$\begin{array}{c} 21 \\ 22 \end{array}$	5246 – 5250 $5251 – 5264$
458	Second Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits (Filed Under Seal)	01/05/22	126 127	31,309–31,393 31,394–31,500
231	Special Verdict Form	11/16/21	41	10,169–10,197
257	Special Verdict Form	11/29/21	49	12,035–12,046
265	Special Verdict Form	12/07/21	49	12,150–12,152
6	Summons – Health Plan of Nevada, Inc.	04/30/19	1	29–31
9	Summons – Oxford Health Plans, Inc.	05/06/19	1	38–41
8	Summons – Sierra Health and Life Insurance Company, Inc.	04/30/19	1	35–37
7	Summons – Sierra Health-Care Options, Inc.	04/30/19	1	32–34
3	Summons - UMR, Inc. dba United Medical Resources	04/25/19	1	20–22
4	Summons – United Health Care Services Inc. dba UnitedHealthcare	04/25/19	1	23–25
5	Summons – United Healthcare Insurance Company	04/25/19	1	26–28
433	Supplement to Defendants' Motion to Seal Certain Confidential Trial Exhibits (Filed	12/08/21	110 111	27,383–27,393 27,394–27,400

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439	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 1 of 18 (Filed Under Seal)	12/24/21	114	28,189–28,290
440	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 2 of 18 (Filed Under Seal)	12/24/21	114 115	28,291–28,393 28,394–28,484
441	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 3 of 18 (Filed Under Seal)	12/24/21	115 116	28,485–28,643 28,644–28,742
442	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 4 of 18 (Filed Under Seal)	12/24/21	116 117	28,743–28,893 28,894–28,938
443	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 5 of 18 (Filed Under Seal)	12/24/21	117	28,939–29,084
444	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 6 of 18 (Filed Under Seal)	12/24/21	117 118	29,085–29,143 29,144–29,219
445	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 7 of 18 (Filed Under Seal)	12/24/21	118	29,220–29,384
446	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 8 of 18 (Filed Under Seal)	12/24/21	118 119	29,385–29,393 29,394–29,527
447	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 9 of 18 (Filed Under Seal)	12/24/21	119 120	29,528–29,643 29,644–29,727
448	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial	12/24/21	120 121	29,728–29,893 29,894–29,907

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449	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 11 of 18 (Filed Under Seal)	12/24/21	121	29,908–30,051
450	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 12 of 18 (Filed Under Seal)	12/24/21	121 122	30,052–30,143 30,144–30,297
451	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 13 of 18 (Filed Under Seal)	12/24/21	122 123	30,298–30,393 30,394–30,516
452	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 14 of 18 (Filed Under Seal)	12/24/21	123 124	30,517–30,643 30,644–30,677
453	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 15 of 18 (Filed Under Seal)	12/24/21	124	30,678–30,835
454	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 16 of 18 (Filed Under Seal)	12/24/21	124 125	30,836–30,893 30,894–30,952
455	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 17 of 18 (Filed Under Seal)	12/24/21	125	30,953–31,122
456	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 18 of 18 (Filed Under	12/24/21	125 126	30,123–31,143 31,144–31,258

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466	Transcript of Proceedings re Hearing Regarding Unsealing Record (Filed Under Seal)	10/05/22	129	31,923–31,943
350	Transcript of Proceedings re Status Check	10/10/22	72 73	17,994–18,000 18,001–18,004
467	Transcript of Proceedings re Status Check (Filed Under Seal)	10/06/22	129	31,944–31,953
157	Transcript of Proceedings Re: Motions	10/19/21	22 23	5339–5500 5501–5561
160	Transcript of Proceedings Re: Motions	10/22/21	24 25	5908–6000 6001–6115
459	Transcript of Proceedings Re: Motions (Filed Under Seal)	01/12/22	127	31,501–31,596
460	Transcript of Proceedings Re: Motions (Filed Under Seal)	01/20/22	127 128	31,597–31,643 31,644–31,650
461	Transcript of Proceedings Re: Motions (Filed Under Seal)	01/27/22	128	31,651–31,661
146	Transcript of Proceedings Re: Motions (Via Blue Jeans)	10/06/21	21	5202-5234
290	Transcript of Proceedings Re: Motions Hearing	02/17/22	53	13,098–13,160
319	Transcript of Proceedings Re: Motions Hearing	04/07/22	68	16,837–16,855
323	Transcript of Proceedings Re: Motions Hearing	04/21/22	69	17,102–17,113
336	Transcript of Proceedings Re: Motions Hearing	06/29/22	71	17,610–17,681
463	Transcript of Proceedings Re: Motions Hearing (Filed Under Seal)	02/10/22	128	31,673–31,793

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464	Transcript of Proceedings Re: Motions Hearing (Filed Under Seal)	02/16/22	128	31,794–31,887
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39	Transcript of Proceedings, All Pending Motions	06/09/20	6	1385–1471
46	Transcript of Proceedings, Plaintiff's Motion to Compel Defendants' Production of Unredacted MultiPlan, Inc. Agreement	07/29/20	7	1644–1663
482	Transcript of Status Check (Filed Under Seal)	10/10/22	142	35,248–35,258
492	Transcript Re: Proposed Jury Instructions	11/21/21	146	36,086–36,250
425	Trial Brief Regarding Evidence and Argument Relating to Out-of-State Harms to Non-Parties (Filed Under Seal)	10/31/21	109	26,953–26,964
232	Trial Brief Regarding Jury Instructions on Formation of an Implied-In-Fact Contract	11/16/21	41	10,198–10,231
233	Trial Brief Regarding Jury Instructions on Unjust Enrichment	11/16/21	41	10,232–10,248
484	Trial Exhibit D5499 (Filed Under Seal)		142 143	35,264–35,393 35,394–35,445
362	Trial Exhibit D5502		76 77	18,856–19,000 19,001–19,143
485	Trial Exhibit D5506 (Filed Under Seal)		143	35,446
372	United's Motion to Compel Plaintiffs' Production of Documents About Which Plaintiffs' Witnesses Testified on Order Shortening Time (Filed Under Seal)	06/24/21	82	20,266–20,290
112	United's Reply in Support of Motion to Compel Plaintiffs' Production of Documents About Which Plaintiffs' Witnesses Testified	07/12/21	18	4326–4340

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CERTIFICATE OF SERVICE

I certify that on April 18, 2023, I submitted the foregoing appendix for filing via the Court's eFlex electronic filing system.

Electronic notification will be sent to the following:

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I further certify that I served a copy of this document by mailing a true and correct copy thereof, postage prepaid, at Las Vegas, Nevada, addressed as follows:

The Honorable Nancy L. Allf DISTRICT COURT JUDGE – DEPT. 27 200 Lewis Avenue Las Vegas, Nevada 89155

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/s/ Jessie M. Helm
An Employee of Lewis Roca Rothgerber Christie LLP

D. The Judgment Should Not Predict the Award of Costs and Attorneys' Fees.

The award of costs and attorneys' fees, if any, should be addressed in a separate order after entry of the judgment. The announcement in the proposed form of judgment that TeamHealth Plaintiffs "recover . . . [their] costs of action and attorneys' fees" is premature and overbroad. Cross-Motion Exhibit 5. TeamHealth Plaintiffs have not filed a motion seeking that relief, nor has the Court granted such relief. As a result, it is not yet known if they will recover costs and attorneys' fees and, if they do so, based on which findings in the verdict. Worse still, it may undermine the finality of the judgment by suggesting that the judgment itself includes an award of fees and costs, yet fails to calculate the amount. Cf. Lee v. GNLV Corp., 116 Nev. 424, 426, 996 P.2d 416, 417 (2000) (final judgment need not address attorneys' fees and costs). Rather than destabilizing the judgment with questions about its finality for appeal and postjudgment motions, this Court should restrict the judgment to the claims addressed in the jury's verdict. The words "together with its costs of action and attorneys' fees in amounts to be determined hereafter" should be stricken from any final judgment entered by the Court.

CONCLUSION

For the forgoing reasons, the Court should deny TeamHealth Plaintiffs' Cross-Motion for Entry of Judgment.

Dated this 10th day of February, 2022.

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CERTIFICATE OF SERVICE

I hereby certify that on the 10th day of February, 2022 a true and correct copy of the foregoing DEFENDANTS' MOTION TO SEAL COURTROOM AND MOTION FOR EVIDENTIARY HEARING IN SUPPORT OF MOTION TO SEAL CERTAIN CONFIDENTIAL TRIAL EXHIBITS ON ORDER SHORTENING TIME electronically filed/served on counsel through the Court's electronic service system pursuant to Administrative Order 14-2 and N.E.F.C.R. 9, via the electronic mail addresses noted below, unless service by another method is stated or noted:

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DISTRICT COURT

CLARK COUNTY, NEVADA

FREMONT EMERGENCY SERVICES (MANDAVIA), LTD., a Nevada professional corporation; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C., a Nevada professional corporation; CRUM, STEFANKO AND JONES, LTD. RUBY CREST MEDICINE, a Nevada professional corporation,

Plaintiffs,

VS.

UNITED HEALTHCARE INSURANCE

Case No.: A-19-792978-B

Dept. No.: 27

DEFENDANTS' REPLY IN SUPPORT OF THEIR MOTION EMERGENCY TO APPLY THE STATUTORY CAP ON PUNITIVE DAMAGES

Hearing Date: Feb. 16, 2022

Hearing Time: 1:00 PM

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COMPANY, a Connecticut corporation; UNITED HEALTH CARE **SERVICES** INC., UNITEDHEALTHCARE, Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

Defendants.

Defendants UnitedHealthcare Insurance Company ("UHIC"), United HealthCare Services Inc. ("UHS", which does business as UnitedHealthcare or "UHC" and through UHIC), UMR, Inc. ("UMR"), Sierra Health and Life Insurance Company ("SHL"), and Health Plan of Nevada, Inc. ("HPN") (collectively, "Defendants"), by and through their attorneys, hereby submit this Reply in support of their Motion to Apply the Statutory Cap on Punitive Damages ("Motion").

I. **TEAMHEALTH PLAINTIFFS'** COMPLETE AND **VOLUNTARY** ABANDONMENT OF BAD FAITH AS A BASIS FOR PUNITIVE DAMAGES WAS NOT A "STRAY, AMBIGUOUS REMARK" MADE AT THE END OF A "LENGTHY CONFERENCE"

Before turning to the plain statutory language that denies TeamHealth Plaintiffs¹ an uncapped punitive damages award, Defendants must briefly answer TeamHealth Plaintiffs' desperate attempt to retract their own voluntary concession that they were not pursuing bad faith as a "basis" or "predicate" for punitive damages.

The record is beyond genuine dispute: TeamHealth Plaintiffs unequivocally conceded at the charge conference, "[w]e're not pursuing bad faith as a basis for punitive damages." 11/22/2021 Tr. 310:20-22. TeamHealth Plaintiffs cannot escape that binding admission by incorrectly suggesting that neither party is "complaining about the [] omission" to instruct the jury on bad faith or to obtain the requisite finding of bad faith from the jury. Plfs' Opposition to Defs' Motion to Apply the Statutory Cap on Punitive Damages ("Plfs' Opp.") at 10-11. TeamHealth Plaintiffs also cannot re-write the record by baldly asserting that their abandonment of "bad faith" was a "stray, ambiguous remark" made "during a lengthy conference." *Id.* at 10-11.

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¹ Fremont Emergency Services (Mandavia), Ltd. ("Fremont"); Team Physicians of Nevada-Mandavia, P.C. ("Team Physicians"); Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine ("Ruby Crest") (collectively the "TeamHealth Plaintiffs").

First, and to state the obvious, Defendants do indeed take issue with the absence of necessary jury instructions and findings to support an uncapped punitive damages award. As Defendants' Motion, and Part II of this Reply, make clear, uncapped punitive damages pursuant to NRS 42.005(2)(b) can only be awarded if all requisite instructions are given and the jury returned a verdict expressly finding bad faith. Defendants of course argued in their Motion that the failure to instruct the jury on bad faith or query the jury on that finding renders unlimited punitive damages unavailable under Nevada law, especially when TeamHealth Plaintiffs' prior litigation strategy disavowed any claim to insurance coverage. *E.g.*, Defs' Mot. at 5-12, 17-19.

TeamHealth Plaintiffs' unsupported statement that instructions "withdrawn without objection are not relevant" is erroneous. Plfs' Opp. at 11. It was TeamHealth Plaintiffs' duty to request that the Court instruct the jury properly on bad faith and return the requisite findings as to their theories of recovery. *See Atkinson v. MGM Grand Hotel, Inc.*, 120 Nev. 639, 642, 98 P.3d 678, 680 (2004) ("a party is entitled to have the jury instructed on all of [its] case theories"); *Flanagan v. State*, 112 Nev. 1409, 1422, 930 P.2d 691, 699 (1996) ("failure to request special instruction . . . precludes" review); *see also Myers Building Indus., Ltd. v. Interface Tech.*, 13 Cal. App. 4th 949, 961, 17 Cal. Rptr. 2d 242 (1993) (rejecting plaintiff's argument that it was defendant's "responsibility to obtain special verdict findings on the [punitive damages issue] and that [defendant] waived its right to assert the deficiency in the verdict form by failing to object").

TeamHealth Plaintiffs knew this to be true, too. They proposed that the jury be instructed on bad faith, but then withdrew that instruction. Defs' Mot. at 18 (citing TeamHealth Plaintiffs' jury instruction filings). And they proposed a jury interrogatory on bad faith, only to withdraw that interrogatory as well. *Id.* (comparing TeamHealth Plaintiffs' verdict form filings at 7). Defendants cannot be faulted for those tactical decisions. *See* NRCP 51(c)(2)(B) ("An objection is timely if . . . a party was not informed of an instruction . . . and the party objects promptly after learning that the instruction . . . has been[] given."). Defendants, like all litigants, have no duty to advance their opponents' theory of the case, including by proposing jury instructions that are necessary for TeamHealth Plaintiffs' theory of recovery. TeamHealth Plaintiffs, not Defendants, must live with their tactical decisions at trial. Thus, TeamHealth Plaintiffs have no basis to argue

that "neither [party is] complaining about the[] omission" or that the "instructions that were withdrawn" are irrelevant. Plfs' Opp. at 10-11.

Second, TeamHealth Plaintiffs' conscious abandonment of bad faith as a basis for punitive damages is clear in the record. They said "[w]e're not pursuing bad faith as a basis for punitive damages." 11/22/2021 Tr. 309:20-310:22. This was not a "stray, ambiguous remark" as they now declare, Plfs' Opp. at 10-11, because they made the concession *three* separate times.

TeamHealth Plaintiffs filed multiple verdict forms. In explaining what changes were made by their later filing, they said "we have a [verdict form] chart regarding the predicate on punitive damages. We've actually withdrawn number 6" from the originally filed form. 11/22/2021 Tr. 309:20-22. As the Court will recall, the original sixth question on their proposed verdict form asked whether "any of the Defendants . . . are guilty of *bad faith* conduct that you found to constitute unfair insurance practices." Plfs' 11/16/2021 Proposed Verdict Form Question No. 6 (emphasis added).

That first withdrawal and the multiple filings caused Defendants to seek clarity from TeamHealth Plaintiffs about their intentions. 11/22/2021 Tr. 310:10-17. In response to questions from Defendants' counsel, TeamHealth Plaintiffs' counsel stated on the record that their November 19, 2021, verdict form filing included a chart showing all of the punitive damages predicates that they sought to obtain from the jury. *Id.* And they explained that they were withdrawing the bad faith predicate that was included in the November 16 filing. *Id.*² Finally, and just to confirm that the record was unambiguous, Defendants' counsel asked TeamHealth Plaintiffs' counsel to state for the record what precisely they were withdrawing. *Id.* 310:18-19. TeamHealth Plaintiffs' counsel then confirmed in no uncertain terms that they were withdrawing verdict question "[n]umber six. . . . This is bad faith. We're not pursuing bad faith as a basis for punitive damages." 11/22/2021 Tr. 310:20-22.

² TeamHealth Plaintiffs' counsel explained to the Court and Defendants the following: "This is the [filing from the] 19th. This is the [filing from the] 16th. We filed two.... And then [on the filing from the 19th] ... we have a chart for the predicate [indiscernible] for punitives. And that's all we've got because we would withdraw it," *i.e.*, bad faith. 11/22/2021 Tr. 310:10-17 ("[indiscernible]" in original).

In TeamHealth Plaintiffs' own repeated words—words that the Court and Defendants justifiably relied upon—bad faith was not a "predicate" or "basis" for punitive damages. Therefore, they are precluded from obtaining uncapped punitive damages based on bad faith. *See Myers Building Indus.*, 13 Cal. App. 4th at 961-62 (striking punitive damages because there was no actual verdict on the issue and the party "attempting to enforce the judgment based on the special verdict form must bear the responsibility for a special verdict submitted to the jury on its own case").³

Notwithstanding this clear record, TeamHealth Plaintiffs argue that uncapped punitive damages are permissible because bad faith is effectively a lesser included offense of unjust enrichment or a violation of the Unfair Claims Practices Act when a defendant engaged in statutory oppression, fraud, or malice. Plfs' Opp. at 7, 10-11, 13. To do so, they attempt to reframe the record by claiming that they only abandoned their cause of action for breach of the implied covenant of good faith and fair dealing. *Id.* at 10. That argument is easily dismissed as a red herring because TeamHealth Plaintiffs abandoned that cause of action before trial—*i.e.*, long before the November 22, 2021 charge conference cited above. That previously abandoned cause of action does not limit their decision at trial to forego a claim of bad faith as a predicate for punitive damages. To the contrary, it demonstrates that their abandonment of bad faith at trial was distinct. There would have been no need to re-abandon something that they had relinquished before trial even commenced. On this record, the only credible explanation is that TeamHealth Plaintiffs consciously abandoned bad faith as a predicate for punitive damages.

³ TeamHealth Plaintiffs' abandonment of "bad faith as a basis for punitive damages" was not made "during a lengthy conference." Plfs' Opp. at 11. That abandonment occurred during a Court conference that lasted just under one hour. 11/22/2021 Tr. 285:4-321:3 (indicating that the conference began at "5:02 p.m." and ended at "6:01 p.m."). The transcript also shows that the first half of that conference was not a charge conference and instead related to other trial issues. *Id.* 290:15-291:4 (noting that there were issues to address before the charge conference); *id.* 304:4-320:7 (TeamHealth Plaintiffs' counsel noting when the conference "move[d] into the charge conference" phase). Thus, any suggestion that TeamHealth Plaintiffs' repeated withdrawal of bad faith was the result of fatigue or confusion should not be taken seriously. Defendants offered opposing counsel the opportunity to clarify and they doubled down. Also, there is no such thing as a "lengthy conference" exception to abandonment, waiver, estoppel, invited error, or the like. *See Pearson v. Pearson*, 110 Nev. 293, 297, 871 P.2d 343, 345 (1994) ("The doctrine of 'invited error' embodies the principle that a party will not be heard to complain . . . of errors which [it] induced.").

Because TeamHealth Plaintiffs unequivocally and unambiguously abandoned bad faith as a "basis" or "predicate" for punitive damages, it was no oversight that the jury was never instructed on the legal definition of "bad faith" or asked to render a finding of bad faith. Accordingly, this Court must limit the award of punitive damages pursuant to NRS 45.005(1).

II. THE PLAIN, UNAMBIGUOUS MEANING OF NRS 42.005 CONFIRMS DEFENDANTS' POSITION AND TEAMHEALTH PLAINTIFFS' READING OF THE STATUTE WOULD RENDER WORDS, PHRASES, AND PROVISIONS MEANINGLESS OR PRODUCE ABSURD RESULTS

TeamHealth Plaintiffs argue that Defendants misunderstand the plain meaning of NRS 42.005. To determine the plain meaning of a statute, courts must read the statute as a whole so as not to produce absurd results or to render any provisions, phrases, or terms meaningless. *Rural Telephone Co. v. Public Utilities Commission*, 133 Nev. 387, 389, 398 P.3d 909, 911 (2017) ("Whether statutory terms are plain or ambiguous depends both on the language used and on the context in which that language is used."). But instead of looking to the statute as a whole, TeamHealth Plaintiffs narrowly focus on NRS 42.005(2)(b). Plfs' Opp. at 2, 5.

They contend that the bad faith exception applies to (1) "any action brought against an insurer," (2) "who acts in bad faith," (3) "regarding its obligation to provide insurance coverage." Plfs' Opp. at 2, 5, 8 (emphasis in original).⁴ This disjointed approach to NRS 42.005(2)(b) presents a slew of issues. First, allowing any plaintiff who sues an insurer to avail themselves of the NRS 42.005(2)(b) exception, as TeamHealth Plaintiffs request, would produce absurd results. The

[W]here is it proven by clear and convincing evidence that the defendant has been guilty of oppression, fraud or malice, . . . the plaintiff . . . may recover [punitive] damages. . . . The limitations on the amount of an award of . . . punitive damages prescribed in *subsection* 1 do not apply to an action brought against . . . [a]n insurer who acts in bad faith regarding its obligations to provide insurance coverage. . . . The findings required by this *section*, if made by a jury, must be made by special verdict along with any other required findings. . . . For the purposes of an action brought against an insurer who acts in bad faith regarding its obligations to provide insurance coverage, the [statutory] definitions [of oppression, fraud or malice] set forth in NRS 42.001 are not applicable and the corresponding provisions of the common law apply.

NRS 42.005(1), (2)(b), (3), (5) (emphasis added).

⁴ TeamHealth Plaintiffs also contend that the only relevant part of NRS 42.005 is subsection (2)(b). *See* Plfs' Opp. at 2, 5. That is incorrect. The pertinent part of the statue reads as follows:

Nevada Supreme Court only allows certain litigants to hold insurers liable for bad faith. *Torres v. Nev. Direct Ins. Co.*,131 Nev. 531, 533, 541-42, 353 P.2d 1203, 1205, 1211 (2015) *United Fire Ins. Co. v. McClelland*, 105 Nev. 504, 511-12, 780 P.2d 193, 197 (1989). But under TeamHealth Plaintiffs' theory, those litigants would be able to recover bad faith liability in the form of unlimited punitive damages.

Second, with their disjointed approach, TeamHealth Plaintiffs argue that bad faith is broader in scope than Nevada courts have historically interpreted bad faith by an insurer. *See* Plfs' Opp. at 6-7 (advancing examples of non-insurer bad faith). However, the term "bad faith" in the statute regards an insurer's obligation to provide insurance coverage. *Rural Telephone Co*, 133 Nev. at 389 ("Whether statutory terms are plain or ambiguous depends both on the language used and on the context in which that language is used."). It is a term of art with a specific meaning that existed before the Nevada Legislature added this language to NRS 42.005. As such, the Legislature is presumed to have used the pre-existing meaning of the term, which requires proof of an insurer and insured relationship and that liability is strictly tied to the insurance policy containing the covenant of good faith and fair dealing. *Infra* at II.B. Simply put, TeamHealth Plaintiffs cannot argue that NRS 42.005(2)(b) is satisfied by an insurer committing any type of bad faith; only bad faith by an insurer in satisfying its coverage obligation to its insured will qualify.

Third, TeamHealth Plaintiffs argue that other causes of action and statutory definitions can be substituted for the required finding of bad faith. Plfs' Opp. at 7, 13. Specifically, they contend that bad faith can be replaced by combining either unjust enrichment or a violation of the Unfair Claims Practices Act with a jury's finding of statutory oppression, fraud, or malice. *Id.* (asserting the combination results in a finding of "the *mens rea* that lies at the heart of bad faith," so all elements of bad faith are satisfied). This is impermissible because NRS 42.005(3) requires that the jury decide each required finding by special verdict, including bad faith, and NRS 42.005(5) prohibits the use of the statutory definitions when bad faith is at issue. That means the Court cannot mix and match other causes of actions with the statutory definitions to find bad faith. Relatedly, if different causes of action and the statutory definitions were allowed as substitutes,

then the statute's explicit use of "bad faith" would be meaningless. But even if other causes of action could be substituted for bad faith, the law is clear that neither unjust enrichment, a violation of the Unfair Claims Practices Act, nor oppression, fraud, or malice as defined in the statute can be used as a replacement for bad faith.

Finally, TeamHealth Plaintiffs assert that the statute's legislative history establishes that uncapped punitive damages are available to anyone who proves that an insurer engaged in bad faith. *Id.* at 14. But TeamHealth Plaintiffs noticeably omit from their selected quotes the very statements showing that the Legislature intended to only protect "insureds." *See id.* Therefore, the exception in NRS 42.005(2)(b) is clearly inapplicable to this case.

A. TeamHealth Plaintiffs' Interpretation of NRS 42.005 Produces Absurd Results

TeamHealth Plaintiffs argue that NRS 42.005(2)(b) applies whenever a plaintiff proves that an insurer acted with some form of "bad faith," and the insurer's bad faith relates, no matter how ancillary or tangential, to its insurance coverage obligations. *Id.* at 2, 5, 8. That argument contends that a plaintiff's relationship to the insurer is inconsequential. *Id.* at 8 ("the exception applies to *any* action brought against an insurer" (emphasis in original)). In other words, in TeamHealth Plaintiffs' reading, the bad faith exception is applicable despite the plaintiff not being an insured and even when the liability does not depend on the contract that establishes insurance coverage.

Aside from being legally unsupportable, *see infra* at II.B, this reading of the statute produces absurd results. For example, assume that an insured is at fault in a car accident that damages the vehicle of another motorist and the accident is covered under the insured's policy. Further, assume that the motorist whose vehicle was damaged takes his car to a body shop for repairs. Under TeamHealth Plaintiffs' reading of the statute, if the insurer unreasonably denies or delays paying for those vehicle repairs, then the body shop, the other motorist, and the insured could all hold the insurer liable for bad faith. But this is plainly not permissible under Nevada Supreme Court precedent. In *Torres*, the Court held that motorists who are injured by an insured cannot obtain bad faith liability from the insurer. 131 Nev. at 533, 541-42 (holding third-party

claimants have no standing to claim bad faith against an insurer). But TeamHealth Plaintiffs' theory would allow the motorist, or even the body shop, to recover uncapped punitive damages, *i.e.*, bad faith liability, because the motorist and body shop would have sued an insurer, been able to show bad faith, and the lawsuit would have related to the insurer's coverage obligations.⁵

TeamHealth Plaintiffs' understanding of NRS 42.005(2)(b) would also permit a person to recover bad faith liability from an insurer due to the insurer unreasonably denying coverage to his or her spouse. This too is not permitted by Nevada Supreme Court precedent. In *McClelland*, a wife was awarded compensatory damages because an insurer denied benefits to her husband in bad faith. 105 Nev. at 511-12. While the Court found that she was "an incidental beneficiary" of her husband's policy, it ruled that she could not hold the insurer liable for bad faith because she was not a party to the insurance policy and her action could not be tied to the underlying contractual relationship. *Id.* Yet TeamHealth Plaintiffs' position here would allow bad faith liability for uncapped punitive damages because the wife would have sued an insurer, been able to prove bad faith, and the lawsuit would have related to the insurer's coverage obligations.⁶

It is undisputed that TeamHealth Plaintiffs are not in an insured and insurer relationship with Defendants. Just like the wife in *McClelland* and the motorist in *Torres*, they are not parties to the underlying insurance policies. Indeed, pursuant to TeamHealth Plaintiffs' theory, their lawsuit has nothing to do with the underlying insurance policies. Defs' Mot. at 5-12 (representing that their lawsuit is not "dependent upon the terms of any particular patient's [insurance policy] in any way" (quoting Exhibit 1 at 11 & Exhibit 2)).

⁵ Likewise, if an insurer defending an insured in litigation acted in bad faith when it failed to inform the insured about a reasonable settlement offer, the insurer could be held liable for bad faith by *both* the insured and the party who made the settlement offer. After all, the plaintiff who extended the settlement offer would have expended additional litigation expenses after the offer date which would have been caused by the insurer engaging in "bad faith" regarding its "obligations to provide insurance coverage."

⁶ TeamHealth Plaintiffs' reading of the statute would also enable vendors, such as computer software developers, to hold insurers liable for uncapped punitive damages based on bad faith. For instance, assume that an insurer knowingly and in bad faith misrepresents material facts to induce a software developer into contracting with it to create a computer program to adjudicate insurance claims. Now assume that the insurer breaches the vendor contract in bad faith. Under the proffered reading of NRS 42.005(2)(b), the software developer could then recover uncapped punitive damages because it would be suing an insurer for bad faith and the lawsuit would relate, at least tangentially, to the insurer's coverage obligations.

To agree with TeamHealth Plaintiffs' position, this Court would have to ignore binding precedent and authorize absurd results.

B. Only Insurer Bad Faith Triggers NRS 42.005(2)(b).

In 1989, the Nevada Legislature added the term of art "bad faith" to NRS 42.005. In order to decide whether the bad faith exception can apply to this case, the contours of that term of art must be understood.

TeamHealth Plaintiffs argue that "bad faith," as used in the statute, is inclusive of all forms of the term and not limited to insurer bad faith. Plfs' Opp. at 6-7 (advancing examples of non-insurer bad faith, such as "actual or constructive fraud or a design to mislead or deceive another" (quoting Black's Law Dictionary, the Restatement (Second) of Contracts § 205, and *Land Residential Dev. v. Kaiser Aetna*, 100 Nev. 29, 33, 676 P.2d 235, 237–38 (1984))). In TeamHealth Plaintiffs' view, "bad faith" is an independent term that has no pre-existing meaning specific to the conduct of insurers. *See id.* at 2, 6-7. It does not matter, according to them, that the statute refers to "bad faith" in connection with "insurer" or "insurance coverage." So, their argument presumes that the other terms or phrases in the statute, including any immediately surrounding words, are immaterial to the proper understanding of "bad faith." *See id.* Isolating a statutory term in this manner, however, contravenes Nevada's well-established rules of statutory construction. *Rural Telephone Co.*, 133 Nev. at 389.

When the Nevada Legislature amended NRS 42.005 to permit uncapped punitive damages in bad faith actions, it used "bad faith" in connection with the term "insurer" and the phrase "regarding [an insurer's] obligations to provide insurance coverage." NRS 42.005(2)(b). As such, the statute's use of the term "bad faith" is limited to the context of insurance coverage. *See Rural Telephone Co.*, 133 Nev. at 389, 398 P.3d at 911

In the insurance context, bad faith is a term of art that Nevada courts defined long before the Legislature added that language to NRS 42.005. *See, e.g., U.S. Fidelity & Guaranty Co. v. Peterson*, 91 Nev. 617, 619-20, 540 P.2d 1070, 1071 (1975) (defining insurer bad faith); *Beazer Homes Nevada, Inc. v. Eighth Jud. Dist. Ct.*, 120 Nev. 575, 585, 97 P.3d 1132, 1139 (2004) (finding a term of art exists when the term is subject to "extensive case law"). When the

As such, the Court should reject TeamHealth Plaintiffs' request to apply definitions of bad faith beyond the insurance context. Plfs' Opp. at 6-7.7 TeamHealth Plaintiffs do provide some insight into insurer bad faith. They contend that bad faith is satisfied "where an insurer acts unreasonably and with knowledge that there is no reasonable basis for its conduct." *Id.* at 7 (quoting *Guaranty Nat'l Ins. Co. v. Potter*, 112 Nev. 199, 206, 913 P.2d 267, 272 (1996)). In doing so, they ignore that additional elements are required to prove that an insurer acted in bad faith regarding its insurance coverage obligations.

Liability for bad faith by an insurer occurs when the parties are in an insurer and insured relationship *and* the insurer has an actual or implied awareness that no reasonable basis exists regarding its coverage obligation. *Pioneer Chlor Alkali Co. v. Nat'l Union Fire Ins. Co. of Pittsburgh, Pennsylvania*, 863 F. Supp. 1237, 1242-44 (D. Nev. 1994); *Pemberton v. Farmers Ins. Exchange*, 109 Nev. 789, 793, 858 P.2d 380, 382 (1993) (holding bad faith exists when "the relationship between the parties is that of insurer and insured").⁸ In addition, bad faith must derive

⁷ TeamHealth Plaintiffs' reliance on Black's Law Dictionary and the Restatement (Second) of Contracts § 205 is misplaced because these authorities are broader in scope than insurer bad faith. Plfs' Opp. at 6-7. They also rely on *Land Residential Development*, 100 Nev. 29 at 33. *Id.* But that case is neither a bad faith case nor about insurance coverage. *Land Residential Dev.*, 100 Nev. at 31-34 (noting defendant was in the business of buying, selling, and developing land). It concerned a fraud action and the district court's erroneous instruction that bad faith implied fraud and concealment. *Id.* at 33 (holding that "the concepts of 'bad faith' and 'fraud' are separate and distinct, requiring allegation and proof of different elements").

In other words, there must be (1) an insured that brings suit against (2) an insurer (3) for taking unreasonable action (4) without proper cause, *i.e.*, actual or implied awareness that no reasonable basis exists to take that action. *See Pioneer Chlor Alkali Co.*, 863 F. Supp. at 1242-44; *Pemberton*, 109 Nev. at 793, 858 P.2d at 382. There are different types of unreasonable action, including where an insurer fails to sufficiently communicate with the insured, fails to investigate the insured's claim, fails to defend an insured, or fails to inform the insured about a reasonable settlement offer, but it "generally arise[s] in the context of improper delay or denial in the payment of valid claims" to the insured or on the insured's behalf. *Sloane v. State Farm Mut. Auto. Ins. Co.*, 2020 WL 7324643, at *4 (D. Nev. March 9, 2020); *Allstate Ins. Co. v. Miller*, 125 Nev. 300, 310, 212 P.3d 318, 325 (2009); *Farmers Home Mut. Ins. v. Fiscus*, 102 Nev. 371, 374, 725 P.2d 234, 235-36 (1986). But common to all bad faith actions against insurer is the parties' Page 11 of 24

from the underlying insurance contract that contains the implied covenant of good faith and fair dealing. *McClelland*, 105 Nev. at 511 ("Liability for bad faith is strictly tied to the implied covenant of good faith and fair dealing arising out of an underlying contractual relationship."). And to support a claim for punitive damages, the bad faith must be *tortious*, NRS 42.005(1)—meaning it the claim must arise out of a "special relationship" characterized by "fiduciary responsibility." *Ins. Co. of the W. v. Gibson Tile Co.*, 122 Nev. 455, 461–62, 464, 134 P.3d 698, 702, 703 (2006) (without a special relationship, claim for bad faith did not support punitive damages).⁹ Accordingly, NRS 42.005's bad faith exception can only be triggered with that understanding applied to the term. And here, there is no dispute that TeamHealth Plaintiffs are *not* insureds and were not parties to an insurance contract with Defendants. Thus, NRS 42.005(2)(b) cannot apply in this case.

C. TeamHealth Plaintiffs' Interpretation of the Statute Would Render NRS 42.005(3) & (5) and the Term "Bad Faith" Meaningless.

Instead of using bad faith, TeamHealth Plaintiffs want to use other causes of action and statutory definitions to support an award of uncapped punitive damages under the bad faith exception. Plfs' Opp. at 7, 13. Specifically, they want to combine the jury's findings on either unjust enrichment or the violation of the Unfair Claims Practices Act with the statutory definitions of oppression, fraud, or malice. *Id.* ("those findings demonstrate . . . the *mens rea* that lies at the heart of bad faith"). However, this mix and match process is not permitted by the statute's plan text and would render bad faith meaningless.

NRS 42.005(3) states that "[t]he findings required by this section, if made by a jury, must be made by special verdict *along with any other required findings*." (emphasis added). In no uncertain terms, the statute requires that every required finding must be made by the jury's special

relationship as insurer and insured. *Pemberton*, 109 Nev. at 793, 858 P.2d at 382; *Guaranty Nat'l Ins. Co.*, 112 Nev. at 206, 913 P.2d at 272 (citing *Pemberton*).

⁹ While "[e]xamples of special relationships include those between insurers and insureds, partners of partnerships, and franchisees and franchisers," the Nevada Supreme Court has never said that such a relationship exists in the arm's-length transactions between an insurer and a staffing company for providers of medical services. *Gibson Tile Co.*, 122 Nev. at 461–62

verdict. In this case, uncapped punitive damages can only be awarded if an "insurer . . . act[ed] in bad faith regarding its obligations to provide insurance coverage." NRS 42.005(2)(b). Read together, the statute thus requires an express finding by the jury that an insurer acted in bad faith regarding its insurance coverage obligations. It does not permit the Court to make that finding by replacing bad faith with the jury's findings on other causes of action and statutory definitions. Because TeamHealth Plaintiffs withdrew their request for a bad faith jury instruction and finding, the jury neither evaluated nor made this required finding by special verdict.

Moreover, NRS 42.005(5) states that the "definitions . . . of this act are not applicable" to insurer bad faith actions "and the corresponding provisions of the common law apply." Plainly, the statute precludes the statutory definitions from being used in a case involving an insurer that acts in bad faith regarding its insurance coverage obligations. When punitive damages are sought in those cases, common law definitions of fraud, oppression, and malice govern the jury's deliberations, not the statutory definitions. As such, the jury was also required to find by clear and convincing evidence that Defendants' conduct constituted common law oppression, fraud, or malice. Yet, TeamHealth Plaintiffs are now asking this Court to disregard the fact that the jury was never instructed on the common law definitions, and that they never requested those instructions, because the Court instructed the jury on the statutory definitions instead. Plfs' Opp. at 7. These requests are nakedly in violation of the statute. Thus, a fortiori, TeamHealth Plaintiffs are not entitled to uncapped punitive damages.

Assuming, *arguendo*, that a jury finding of bad faith can be replaced by a jury finding on another cause of action or statutory definitions, none of the substitutes offered by TeamHealth Plaintiffs do the trick. Neither unjust enrichment, a violation of the Unfair Claims Practices Act, nor oppression, fraud, or malice can serve as a substitute to prove bad faith. The sum of these parts simply does not equal bad faith. *See* Plfs' Opp. at 7, 13 (asserting that the combination only establishes the *mens rea* element of bad faith without discussing the other elements of bad faith).

A finding of bad faith must be in addition to the finding of oppression, fraud, or malice because they are separate required jury findings for recovering uncapped punitive damages. *See McClelland*, 105 Nev. at 512 ("bad faith, by itself, does not establish liability for punitive

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damages"); see also Land Residential Dev. v. Kaiser Aetna, 100 Nev. at 33 ("the concepts of 'bad faith' and 'fraud' are separate and distinct, requiring the allegation and proof of different elements"). The question of the insurer's bad faith under NRS 42.005(2)(b) only arises when and if the jury first finds that the insurer engaged in oppression, fraud or malice. As such, a finding of one does not result in a finding of the other. See McClelland, 105 Nev. at 512; Land Residential Dev., 100 Nev. at 33; Myers Building Indus., 13 Cal. App. 4th at 961 (rejecting the argument that a jury's special verdict that defendant acted "malic[iously], fraud[ulently], or oppressi[vely] constitute[d] an implied finding . . . [of] *fraud*" (emphasis added)).

Unjust enrichment also cannot be substituted for bad faith. It is a well-established principle of Nevada law that unjust enrichment is available only when there is no contract between the parties. See, e.g., Richey v. Axon Enters., Inc., 437 F. Supp. 3d 835, 849 (D. Nev. 2020) ("As a quasi-contract claim, unjust enrichment is unavailable when there is an enforceable contract between the parties."); Leasepartners Corp. v. Robert L. Brooks Tr. Dated Nov. 12, 1975, 113 Nev. 747, 756 (1997) (same). As noted *supra* at II.B, however, lability for bad faith by an insurer must be strictly tied to an underlying insurance contract. McClelland, 105 Nev. at 511; Gibson Tile Co., 122 Nev. at 461–62 (finding that without a special relationship, such as insurer and insured, claim for bad faith did not support punitive damages). Because there is no underlying contract in an unjust enrichment cause of action, an unjust enrichment claimant cannot recover bad faith liability. Thus, the statute's use of bad faith would be meaningless if a totally different cause of action – one that is not even tied to a contract – could supply the necessary jury finding.

The same is true for using a violation of the Unfair Claims Practices Act as a proxy for a finding of bad faith. TeamHealth Plaintiffs argue that an Unfair Claims Practices Act violation "plus something else would constitute bad faith" because Pioneer Chlor Alkali Co. v. Nat'l Union Fire Ins. Co. held that an Unfair Claims Practices Act violation is not per se an act of bad faith. Plfs' Opp. at 13.

TeamHealth Plaintiffs fail to explain that *Pioneer* cannot stand for the "plus something else" proposition because the court's per se holding was the result of analysis that concluded that

a violation of the Unfair Claims Practices Act *cannot* be substituted for bad faith.¹⁰ To be sure, the court began its analysis by noting that the two causes of action "involve different legal analyses." 863 F. Supp. at 1241. Then the court went on to hold that the Nevada Legislature did not codify common law bad faith when it enacted or amended the Unfair Claims Practices Act. *Id.* 1243-44. Similarly, it held that "Nevada's Supreme Court has never announced that the [Unfair Claims Practices Act] embodies the law of bad faith." *Id.* at 1244. Indeed, the court observed that "[i]t would be a sweeping change if . . . bad faith [went] beyond an unreasonable denial to include a wide variety of acts . . . by the insurer which take place in the processing of a claim." *Id.* at 1246. Thus, a violation of the Unfair Claims Practices Act cannot replace a jury finding of bad faith.

Because unjust enrichment, an unfair claims practice, and statutory oppression, fraud, or malice cannot be substituted for bad faith, their use in establishing NRS 42.005(2)(b)'s uncapped punitive damages liability would render bad faith meaningless. Indeed, if that theory was adopted, juries would never have to make the "other required findings" by special verdict as required by the Nevada Legislature.

Finally, even accepting their assertion that a finding of bad faith can be implied from other jury findings, TeamHealth Plaintiffs make no credible argument that the jury made a finding that Defendants engaged in bad faith regarding their *obligations to provide insurance coverage*. NRS 42.005(2)(b). The jury could not and did not render any decision regarding insurance coverage obligations. TeamHealth Plaintiffs' position from the outset of this litigation was that insurance coverage had no bearing on their right to recovery. Defs' Mot. at 8 (quoting TeamHealth Plaintiffs: insurance policies "are irrelevant," "there is no need to consider the existence of any [insurance policy]," and the "dispute with [Defendants] does not involve an employee benefit plan"); *id.* at 9 (quoting TeamHealth Plaintiffs: "the claims asserted . . . have no connection to the [insurance policies]," which "could say that the emergency services will not be covered," because they do

¹⁰ The court so held even though *Pioneer* at least involved the kind of Unfair Claims Practices Act violation most analytically similar to a common-law bad-faith claim: an insured suing its insurer for unfair treatment. 863 F. Supp. 1237. Perforce in this circumstance, which does not involve an insured suing its insurer, the gap between common law bad faith and the Unfair Claims Practices Act cannot be ignored.

"not form the basis" of the lawsuit); see also 6/24/2020 Order Denying Motion to Dismiss at 19 ¶ 31 ("[TeamHealth Plaintiffs'] state law claims . . . neither seek recovery under an ERISA plan, require examination of an ERISA plan, . . . and [t]he Court and jury will not need to reference any ERISA plan to resolve" this rate-of-payment lawsuit). TeamHealth Plaintiffs essentially ask this Court to overlook a required jury finding and write the word "coverage" completely out of the statute.

For these reasons, the bad faith exception in NRS 42.005 cannot be applied in this case.

D. TeamHealth Plaintiffs Omitted Inimical Legislative History, which Supports Defendants' Motion

While courts do not look to legislative history if a statute is unambiguous, *Sharpe v. State*, 131 Nev. 269, 274, 350 P.3d 388, 391 (2015), the legislative history surrounding NRS 42.005 shows that the bad faith exception is meant to apply only in actions brought by insureds against their insurers. Nothing in the 160 pages of legislative history supports the conclusion that the Nevada Legislature intended to authorize uncapped punitive damages against insurers in actions filed by parties other than their insureds.

In their opposition, TeamHealth Plaintiffs could only muster two quotes from one Assembly Member. *See* Plfs' Opp. at 14 (citing Plfs' Opp. Exhibit 3). However, those two quotes should actually be one, because they are continuous text. Plfs' Opp. Exhibit 3 at 31-32. Moreover, TeamHealth Plaintiffs did not share the full quote with the Court. In the first quote, TeamHealth Plaintiffs omitted the actual second sentence without indication. *Id.* Worse, they failed to present this Court with the key, ending sentence to their "second" quote: "Consequently, we want to make sure that the insurance companies who do business in this state cannot make an economic decision to treat Nevada *insureds* oppressively." Plfs' Opp. Exhibit 3 at 31-32 (emphasis added).

TeamHealth Plaintiffs failed to disclose that NRS 42.005 is an exception limited to actions filed by insureds because it negates their contention that anyone who sues an insurer can avail themselves of the exception in NRS 42.005. *Id.* at 8 ("the statute's plain language makes clear the

¹¹ Appendix to Plfs' Opposition and Cross-Motion ("Plfs' Opp. Exhibit #").

exception applies to *any* action brought against an insurer" (emphasis in original)). And, they represented that "if the Legislature intended to limit the exception to actions brought by insureds, it would have said so. But it did not." *Id.* However, the very legislative history they cite shows that the Legislature did just that. Plfs' Opp. Exhibit 3 at 31-32.¹² And, in case there was any remaining doubt, the Nevada Legislature plainly and unambiguously implemented that intent by conjoining the term "bad faith" with the phrase "regarding obligations to provide insurance coverage." Therefore, the exception in NRS 42.005(2)(b) is unavailable to TeamHealth Plaintiffs, as they are not insureds and affirmatively disclaimed any right to insurance coverage.

* * *

Because TeamHealth Plaintiffs' interpretation of NRS 42.005 would produce absurd results, would render various statutory language meaningless, and is not supported by the legislative history, the Court must apply the plain and clear meaning of the statute and cap punitive damages pursuant to NRS 42.005(1).

III. NRS 42.005(2)(B) ONLY APPLIES TO INSURERS, NOT THIRD PARTY ADMINISTRATORS

TeamHealth Plaintiffs are correct that "insurer" is not defined in Chapter 42, *see* Plfs' Opp. at 5, so the word must be given its ordinary and plain meaning. *Nguyen v. State*, 116 Nev. 1171, 1175, 14 P.3d 515, 518 (2000). However, they expand the plain meaning of insurer to include entities that assist insurers with their coverage obligations. Plfs' Opp. at 5 (defining "insurer" as all entities that "receive claims, make decisions about whether claims are covered, decide how much to pay on covered claims, issue payments for covered claims and are entities to whom appeals for coverage are made"). This overly expansive reading erodes corporate form and ignores business judgments to not enter into a certain line of business—the business of underwriting and

¹² TeamHealth Plaintiffs contend that Defendants' post-verdict statements demonstrate that the 1989 Legislature intended for the bad faith exception to apply in this case. Plfs' Opp. at 14-15. The danger of this argument is evident. There is nothing wrong with Defendants exercising their lawful rights of appellate review and free speech. Using Defendants' post-verdict statement to justify a \$60 million punitive damages award would chill these statutory and constitutional rights. Therefore, in deciding how to interpret a statute, the Court should decline TeamHealth Plaintiffs' invitation to punish a litigant for exercising their appellate and constitutional rights.

offering insurance.

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The plain meaning of insurer is "[s]omeone who agrees, by contract, to assume the risk of another's loss and to compensate for that loss." Insurer, Black's Law Dictionary (11th ed. 2019); Merriam-Webster's Collegiate Dictionary 649, 1365 (11th ed. 2007) (defining "insurer" as "one that insures," especially as an insurance "underwriter," which is "one that underwrites a policy of insurance" and "set[s] one's name to (an insurance policy) for the purpose of thereby becoming answerable for a designated loss or damage on consideration of receiving a premium percent"). Third-party administrators ("TPAs"), by contrast, do not assume another party's loss or provide the compensation for that loss. Third-Party Administrators (TPA), 2 Health L. Prac. Guide § 19:36 (2022) ("Given the nature of TPAs, their services typically are not provided on a risk basis. In other words, the TPA provides administrative services—but it is in no way financially responsible for the cost of care."). 13 They facilitate the insurer's assumption of risk and assist the insurer in compensating covered events. The TPAs that are Defendants in this case, UHS and UMR in totality and UHIC in part, made the business decision to not be insurers. For example, TeamHealth Plaintiffs cite PX 1, an administrative services agreement, to argue that UHIC is still an insurer while being a TPA because the insurer delegated some authority to UHIC. Plfs' Mot. at 5. However, that administrative services agreement also makes clear that the self-funded employer is the insurer. In entering into the administrative services agreement with UHIC, the self-funded employer had "the sole responsibility to pay, and provide funds, to pay for all Plan benefits." PX 1 at 3. Moreover, the self-funded employer was "solely responsible for providing funds for payment for all Plan benefits payable to . . . non-Network Providers." PX 1 at 12. Thus, the administrative services agreement clarifies that UHIC is not an insurer, as that term is plainly understood, because it did not contractually assume the risk of the employer's loss or to

collected cases)).

¹³ See also Third-Party Administrators, Benefits Guide § 2:57 (2021) ("A third-party administrator (TPA) is a person or firm that takes on the administrative burden of operating an employee benefits plan but does

not put its own funds at risk"); Fundamentals of Health Law, American Health Lawyers Association, AHLA-PAPERS P10049915 (1999) ("It is pretty well settled that the regulation of third party

administrators relates to employee benefit plans and does not constitute the business of insurance" (citing

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compensate that loss.

Additionally, TeamHealth Plaintiffs misrepresent the factual findings and legal holdings of *Albert H. Wohlers & Co. v. Bartigis* to argue that it is inapposite. First, contrary to TeamHealth Plaintiffs' suggestion, the court explicitly found that Wohlers was a third-party administrator. The very first sentence of the opinion states that "[t]his is a case involving fraud, bad faith, and violations of the Nevada Unfair Claims Practices Act by a medical insurance company *and its policy administrator*." *Albert H. Wohlers & Co. v. Bartigis*, 114 Nev 1249, 1252, 969 P.2d 949, 952 (1998) (emphasis added). Then the court went on to note that: (1) "[t]he *administrator of the policy* [is] appellant Albert H. Wohlers & Co"; (2) "[t]he medical insurance policies offered by [the employer] to its members were underwritten by Mutual of New York . . . and were administered by Wohlers"; and (3) "NRS 686A.310 . . . expressly proscribes unfair practices in settling claims by an insurer, which Wohlers is not." Id. at 1253, 1256 (emphasis added). Accordingly, there is no credible basis to assert that Wohlers was not a TPA.

Second, Wohlers became the TPA by contracting with the insurer, which "provided [it] with substantial administrative and claims management responsibilities." *Id.* at 1253. These responsibilities provided, but were not limited to, "administer[ing] the policy, shar[ing] in a percentage of the premiums paid, and shar[ing] in [the insurer's] profits that were realized from Wohlers's efforts to keep claim costs down." *Id.* at 1254. The insured submitted a claim for reimbursement of medical expenses under the policy issued by the insurer. *Id.* at 1255. After receiving an explanation of coverage expenses from Wohlers, as the TPA, the insured filed suit alleging a violation of the Unfair Claims Practices Act. *Id.* at 1255-57. The insured sued Wohlers because she believed that the claim reimbursement for certain expenses under the policy was inadequate. *See id.* at 1254-56. Based on these facts, the Supreme Court held that Wohlers, as the TPA, was not an insurer. *Id.* at 1256.

Third, TeamHealth Plaintiffs' analysis of *Wohlers* is driven by extraneous material that is not found in the opinion. Plfs' Opp. at 12 & n.10. Specifically, they cite to an Illinois college website published in 2014 instead of the Nevada Supreme Court's 1998 opinion to argue that Wohlers is an insurance agency and not a TPA. But their reliance on evidence outside the record

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is improper and cannot negate the court's actual holdings. See Reno v. Harris, 111 Nev. 672, 678, 895 P.2d 663, 667 (1995) ("A court's consideration of matters outside the record . . . generally constitutes error."); NRS 47.130 (precluding judicial notice of facts that come from out of jurisdiction or that are subject to reasonable dispute).

Wohlers controls here. As John Haben testified at trial, the TPAs that are Defendants performed similar administrative responsibilities to those performed by Wohlers. See 11/3/2021 Tr. 86:19-87:13. Likewise, those TPA Defendants do not issue insurance policies and their responsibilities are constrained by the definitions in those policies. See id. 11/2/2021 Tr. 44:6-11. Therefore, TeamHealth Plaintiffs have no legal or factual basis to assert that Wohlers is inapposite to this case, including its finding that TPAs are not insurers.

IV. IN FAILING TO EXPLAIN HOW THEIR PRIOR REPRESENTATIONS DO NOT DAMAGES, TEAMHEALTH PLAINTIFFS PROVED DEFENDANTS' ERISA CONCERNS CORRECT

TeamHealth Plaintiffs made numerous representations to this Court that their lawsuit had nothing to do with insurance coverage and their opposition does not contest those prior statements. They simply argue that Defendants misrepresent or misconstrue their disclaimer. Plfs' Opp. at 9-12. Not true.

In the Motion, Defendants directly quoted statements made by TeamHealth Plaintiffs. They said:

- "the terms of the patients' benefit plans," i.e., the insurance policies, "are irrelevant":
- "there is no need to consider the existence of any [insurance policy], at all";
- the "dispute with [Defendants] does not involve an employee benefit plan";
- "the claims asserted . . . have no connection to the [insurance policies]" and do "not form the basis for" the lawsuit; and
- that they "are not seeking to recover against [Defendants] for any claims arising under their [insurance policies] with their insured[s]."

Defs' Mot. at 7-9 (quoting TeamHealth Plaintiffs' court filings). Yet they offer no explanation for how these quotes are misrepresented or misconstrued. See Plfs' Mot. at 11-12.

Based on those representations, TeamHealth Plaintiffs repeatedly took the position that

they were not seeking to recover insurance benefits. Indeed, over Defendants' objections, TeamHealth Plaintiffs convinced multiple courts, including this Court, that the lawsuit does not "seek recovery under an ERISA plan, require examination of an ERISA plan, . . . [and] [t]he Court or jury will not need to reference any ERISA plan to resolve the [lawsuit]." 6/24/2020 Order Denying Motion to Dismiss at 19 ¶ 31; *id.* at 4 ¶ 8 (TeamHealth Plaintiffs "[d]o not contend they are owed an additional amount from the patients' ERISA plans." (quoting Notice of Entry of Remand Order)).

Now after evading ERISA preemption by convincing courts that they can be awarded damages because their lawsuit had no connection to Defendants' coverage obligations, TeamHealth Plaintiffs unabashedly assert that their case is "tied" to Defendants' insurance coverage obligations, including those that derive from ERISA governed plans. Plfs' Opp. at 6, 10. TeamHealth Plaintiffs assert that:

- all of the jury's "findings, beginning with the implied contract, [are] tied to Defendants' obligation to provide insurance coverage";
- "Defendants' obligation to provide insurance coverage created an obligation to effectuate a prompt, fair and equitable settlement";
- Defendants' "obligation to pay also supports the jury's finding that Defendants formed implied contracts with TeamHealth Plaintiffs and were unjustly enriched"; and
- Defendants' "obligation to pay lies at the heart of the jury's finding that Defendants engaged in oppression, fraud or malice."

Id. So, now they tell us.

After years of professing otherwise, TeamHealth Plaintiffs *current* argument is that the compensatory damages award is the result of insurance coverage, including coverage provided by ERISA governed plans, and not just an independent legal duty under Nevada law that is unrelated to insurance benefits. Therefore, this Court must either (1) apply the punitive damages statutory cap by ruling consistently with its prior decisions that Defendants' insurance policies are irrelevant to the resolution of this lawsuit; or (2) reverse its prior decisions because TeamHealth Plaintiffs seek recovery premised, at least in part, on ERISA plans.

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CONCLUSION

The record is undisputed: the jury's punitive damages verdict is not based on a finding that Defendants acted in bad faith regarding their coverage obligations under policies of insurance. To avoid ERISA preemption, TeamHealth Plaintiffs crafted a litigation position that assured this Court and a federal court that insurance coverage obligations had nothing to do with their lawsuit. And, TeamHealth Plaintiffs' expressly abandoned bad faith as a basis for punitive damages, which is the entire predicate for uncapped damages under NRS 42.005(2)(b). Finally, the plain meaning of NRS 42.005, as well as the legislative history that they cite, precludes TeamHealth Plaintiffs from receiving uncapped punitive damages. Therefore, any judgment entered on the verdict must apply the statutory limitations in NRS 42.005(1).

Dated this 10th day of February, 2022.

/s/ Colby L. Balkenbush

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CERTIFICATE OF SERVICE

I hereby certify that on the 10th day of February, 2022 a true and correct copy of the foregoing **DEFENDANTS' REPLY IN SUPPORT OF THEIR MOTION TO APPLY THE STATUTORY CAP ON PUNITIVE DAMAGES** was electronically filed/served on counsel through the Court's electronic service system pursuant to Administrative Order 14-2 and N.E.F.C.R. 9, via the electronic mail addresses noted below, unless service by another method is stated or noted:

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DISTRICT COURT

CLARK COUNTY, NEVADA

FREMONT EMERGENCY SERVICES (MANDAVIA), LTD., a Nevada professional corporation; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C., a Nevada professional corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST EMERGENCY MEDICINE, a Nevada professional corporation,

Plaintiffs,

VS.

UNITED HEALTHCARE INSURANCE
COMPANY, a Connecticut corporation;
UNITED HEALTH CARE SERVICES INC.,
dba UNITEDHEALTHCARE, a Minnesota
corporation; UMR, INC., dba UNITED
MEDICAL RESOURCES, a Delaware
corporation; SIERRA HEALTH AND LIFE

25 INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA,

26 | INC., a Nevada corporation,

Defendants.

Case No.: A-19-792978-B Dept. No.: XXVII

NOTICE OF ENTRY OF ORDER SHORTENING TIME FOR HEARING RE:

PLAINTIFFS' MOTION TO UNLOCK CERTAIN ADMITTED TRIAL EXHIBITS PLEASE TAKE NOTICE that an Order Shortening Time for Hearing on Plaintiffs' Motion to Unlock Certain Admitted Trial Exhibits on Order Shortening Time was entered on February 14, 2022, a copy of which is attached hereto.

DATED this 14th day of February, 2022.

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CERTIFICATE OF SERVICE

I certify that on this 14th day of February, 2022, I caused a true and correct copy of the foregoing to be served via this Court's Electronic Filing system in the above-captioned case, upon the following:

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DISTRICT COURT CLARK COUNTY, NEVADA

FREMONT EMERGENCY SERVICES (MANDAVIA), LTD., a Nevada professional corporation; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C., a Nevada professional corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST EMERGENCY MEDICINE, a Nevada professional corporation,

Plaintiffs,

VS.

UNITED HEALTHCARE INSURANCE COMPANY, a Connecticut corporation; UNITED HEALTH CARE SERVICES INC., dba UNITEDHEALTHCARE, a Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE INŜURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

Defendants.

Case No.: A-19-792978-B Dept. No.: XXVII

HEARING REQUSTED

PLAINTIFFS' MOTION TO UNLOCK CERTAIN ADMITTED TRIAL **EXHIBITS ON ORDER SHORTENING** TIME

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Plaintiffs Fremont Emergency Services (Mandavia), Ltd.; Team Physicians of Nevada-Mandavia, P.C.; Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine (collectively the "Health Care Providers") move to unlock the admitted trial exhibits that are not subject to any post-trial motion to seal.

This Motion is based upon the record in this matter, the points and authorities that follow, the pleadings and papers on file in this action, and any argument of counsel entertained by the Court.

DATED this 14th day of February, 2022.

AHMAD, ZAVITSANOS, ANAIPAKOS, ALAVI & MENSING P.C.

By: /s/ Jason S. McManis P. Kevin Leyendecker (admitted pro hac vice) John Zavitsanos (admitted pro hac vice) Joseph Y. Ahmad (admitted pro hac vice) Jason S. McManis (admitted pro hac vice) Michael Killingsworth (admitted pro hac vice) Louis Liao (admitted pro hac vice) Jane L. Robinson (admitted pro hac vice) Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing, P.C 1221 McKinney Street, Suite 2500 Houston, Texas 77010 kleyendecker@azalaw.com joeahmad@azalaw.com jzavitsanos@azalaw.com jmcmanis@azalaw.com mkillingsworth@azalaw.com lliao@azalaw.com jrobinson@azalaw.com

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DECLARATION OF JASON MCMANIS IN SUPPORT OF PLAINTIFFS' MOTION TO UNLOCK CERTAIN ADMITTED TRIAL EXHIBITS ON ORDER SHORTENING TIME

I, Jason S. McManis, declare as follows:

- 1. I am an attorney licensed to practice law in the State of Texas, and am an associate in the law firm of Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing P.C., counsel for Plaintiffs Fremont Emergency Services (Mandavia), Ltd.; Team Physicians of Nevada-Mandavia, P.C.; Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine (collectively the "Health Care Providers") in the above-captioned case currently pending in the Eighth Judicial District Court, Clark County, Nevada, Case No. A-19-792978-B.
- 2. This Declaration is made of my own personal knowledge except where stated on information and belief, and as to those matters, I believe them to be true, and I am competent to testify thereto if called upon to do so.
- 3. MultiPlan and Defendants have filed various motions to seal admitted trial exhibits in this matter (the "Sealing Motions"). The Sealing Motions do not address all admitted exhibits in the case. Yet, the remaining, unaddresses exhibits, remain locked to public access. Those exhibits are as follows (the "Public Exhibits"):

P009	P121	P295	P473H	D4874
P012	P122	P296	P473X	D4875
P013	P130	P297	P473Y	D4887
P014	P142	P299	P473Z	D4891
P019	P145	P313	P478	D4893
P027	P146	P317	P482	D4894
P031	P158	P322	P486	D4896
P032	P163	P325	P488	D4914
P033	P165	P363	P492	D4918
P035	P168	P365	P506	D4944
P037	P170	P376	P513	D4971
P040	P183	P379	P530-16	D5174
P043	P185	P412	D1000	D5175
P055	P213	P422	D1001	D5177
P058	P255	P424	D1002	D5180
P061	P261	P428	D1003	D5242
P063	P263	P470	D1004	D5321

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.	P070	P264	P473A	D1005	D5322A
	P072	P271	P473B	D4008	D5365
1	P074	P272	P473B1	D4458	D5464
3	P077	P282	P473C	D4570	D5502
	P079	P284	P473D	D4643	D5503
	P082	P287	P473E	D4760	D5508
5	P085	P290	P473F	D4777	D5527
,	P100	P291	P473G	D4863	D5529
'	P120	P293			

- 4. In corresponding with the Court's IT staff, it is Plaintiffs' understanding that IT is awaiting an order from the Court to allow them to unlock the Public Exhibits
- 5. The Health Care Providers have attempted to work with MultiPlan and Defendants to file an agreed Stipulation and Order as to the unlocking of the Public Exhibits. Defendants have delayed, raised purported concerns with the list that were directly refuted by reference to the trial transcripts, and then refused to respond to any follow up correspondence. See Ex. A. MultiPlan has not responded at all.
- 6. The Health Care Providers respectfully request this hearing be taken up after the Court's hearing on the motion for entry of judgment on February 16, 2022.
- 7. The Health Care Providers seek the relief requested because it has been months since the trial concluded and neither United nor MultiPlan have claimed post-trial confidentiality over any of these admitted trial exhibits.

I declare under penalty of perjury that the foregoing is true and correct.

Executed: February 14, 2022 /s/ Jason S. McManis Jason S. McManis

ORDER SHORTENING TIME

It appearing to the satisfaction of the Court and good cause appearing therefor, IT IS HEREBY ORDERED that the hearing on PLAINTIFFS' MOTION TO UNLOCK ADMITTED TRIAL EXHIBITS ON ORDER SHORTENING TIME shall be shortened and heard before the above-entitled Court in Department XXVII on the 16th day of February, 2022 at 1:00 game. / p.m., or as soon thereafter as counsel may be heard; that Defendants' opposition, if any, shall be electronically filed and served on or before the 15th February, 2022. Dated this 14th day of February, 2022

Hon. Nancy Allf, District Court Judge

A18 7AC B3CD A02B Nancy Allf District Court Judge

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MEMORANDUM OF POINTS AND AUTHORITIES

I. INTRODUCTION

As has been the subject of much briefing before the Court, "the courts of this country recognize a general right to inspect and copy public records and documents, including judicial records and documents." *Nixon v. Warner Comm'ns, Inc.*, 435 U.S. 589, 597 (1978) (citing, *inter alia, State ex rel. Nevada Title Guaranty & Trust Co. v. Grimes*, 29 Nev. 50 (1906)). Nevada courts recognize this open courts principle. *Del Papa v. Steffen*, 112 Nev. 369, 374, 915 P.2d 245, 248 (1996) (recognizing that the public has a right to access proceedings in civil cases under state law and the U.S. Constitution). "Every trial on the merits must be conducted in open court." NRCP 77(b).

Further, as the Nevada Supreme Court has recognized, this extends to the court records, including admitted trial exhibits: "[a]ll court records in civil actions are available to the public, except as otherwise provided in these rules or by statute." SRCR 1(3); *see also* SRCR 2(2) (defining "court record" to include "[a]ny . . . exhibit . . . maintained by a court in connection with a judicial proceeding").

II. ARGUMENT

Plaintiffs seek an order from the Court unlocking all exhibits that were not the subject of any party's post-trial motion to seal (collectively, the "Public Exhibits").

During the course of trial, the Court made clear that "the case is locked during trial." Jury Drial – Day 10 (Nov. 10, 2021) at 102:21; *id.* at 103:10. Trial, however, is now over—but many exhibits still remain locked.

Because no party has sought to seal any of the Public Exhibits, yhere is no longer any competing interest to weigh against the public interest in full access. Therefore, Plaintiffs request an order unlocking the record with respect to the Public Exhibits:

P009	P121	P295	P473H	D4874
P012	P122	P296	P473X	D4875
P013	P130	P297	P473Y	D4887
P014	P142	P299	P473Z	D4891
P019	P145	P313	P478	D4893

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1		P027	P146	P317	P482	D4894
2		P031	P158	P322	P486	D4896
2		P032	P163	P325	P488	D4914
3		P033	P165	P363	P492	D4918
4		P035	P168	P365	P506	D4944
7		P037	P170	P376	P513	D4971
5		P040	P183	P379	P530-16	D5174
6		P043	P185	P412	D1000	D5175
0		P055	P213	P422	D1001	D5177
7		P058	P255	P424	D1002	D5180
8		P061	P261	P428	D1003	D5242
		P063	P263	P470	D1004	D5321
9		P070	P264	P473A	D1005	D5322A
10		P072	P271	P473B	D4008	D5365
10		P074	P272	P473B1	D4458	D5464
11		P077	P282	P473C	D4570	D5502
12		P079	P284	P473D	D4643	D5503
12		P082	P287	P473E	D4760	D5508
13		P085	P290	P473F	D4777	D5527
14		P100	P291	P473G	D4863	D5529
17		P120	P293			
15	III.	CONCLUSION				

For the foregoing reasons, Plaintiffs respectfully request the Court enter an order unlocking the record with respect to the following exhibits:

18	P009	P121	P295	P473H	D4874
10	P012	P122	P296	P473X	D4875
19	P013	P130	P297	P473Y	D4887
20	P014	P142	P299	P473Z	D4891
21	P019	P145	P313	P478	D4893
21	P027	P146	P317	P482	D4894
22	P031	P158	P322	P486	D4896
23	P032	P163	P325	P488	D4914
23	P033	P165	P363	P492	D4918
24	P035	P168	P365	P506	D4944
25	P037	P170	P376	P513	D4971
23	P040	P183	P379	P530-16	D5174
26	P043	P185	P412	D1000	D5175
27	P055	P213	P422	D1001	D5177
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P063	P263	P470	D1004	D5321
P070	P264	P473A	D1005	D5322A
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P085	P290	P473F	D4777	D5527
P100	P291	P473G	D4863	D5529
P120	P293			

DATED this 14th day of February, 2022.

AHMAD, ZAVITSANOS, ANAIPAKOS, ALAVI & MENSING P.C.

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I HEREBY CERTIFY that on this 14th day of February, 2022, I caused a true and correct copy of the foregoing PLAINTIFFS' MOTION TO UNLOCK CERTAIN

ADMITTED TRIAL EXHIBITS ON ORDER SHORTENING TIME to be served via this

Court's Electronic Filing system in the above-captioned case, upon the following:

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/s/ Jason S. McManis

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1 **CSERV** 2 DISTRICT COURT 3 CLARK COUNTY, NEVADA 4 5 Fremont Emergency Services CASE NO: A-19-792978-B 6 (Mandavia) Ltd, Plaintiff(s) DEPT. NO. Department 27 7 VS. 8 United Healthcare Insurance 9 Company, Defendant(s) 10 11 **AUTOMATED CERTIFICATE OF SERVICE** 12 This automated certificate of service was generated by the Eighth Judicial District 13 Court. The foregoing Order Shortening Time was served via the court's electronic eFile system to all recipients registered for e-Service on the above entitled case as listed below: 14 Service Date: 2/14/2022 15 16 Michael Infuso 17

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DISTRICT COURT

CLARK COUNTY, NEVADA

SERVICES FREMONT **EMERGENCY** (MANDAVIA), LTD., a Nevada professional **TEAM PHYSICIANS** corporation; OF NEVADA-MANDAVIA, P.C., Nevada professional corporation; CRUM, STEFANKO LTD. JONES, dba RUBY CREST AND **EMERGENCY** MEDICINE, Nevada professional corporation,

Plaintiffs,

VS.

Case No.: A-19-792978-B

Dept. No.: 27

DEFENDANTS' RESPONSE TO PLAINTIFFS' MOTION TO UNLOCK **CERTAIN ADMITTED TRIAL** EXHIBITS ON ORDER SHORTENING **TIME**

Hearing Date: February 16, 2022 Hearing Time: 1:00 p.m.

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UNITED HEALTHCARE **INSURANCE** COMPANY, a Connecticut corporation; UNITED **SERVICES** HEALTH **CARE** INC., UNITEDHEALTHCARE, Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES. Delaware a corporation; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

Defendants.

Defendants UnitedHealthcare Insurance Company ("UHIC"), United HealthCare Services, Inc. ("UHS"), UMR, Inc. ("UMR"), Sierra Health and Life Insurance Co., Inc. ("SHL"), and Health Plan of Nevada, Inc. ("HPN") (collectively "Defendants"), by and through their attorneys, hereby submit their Response to Plaintiffs' Motion to Unlock Certain Admitted Trial Exhibits ("Motion to Unlock").

This Response is made and based upon the papers and pleadings on file herein, and the following memorandum of points and authorities.

Dated this 15th day of February, 2022.

/s/ Brittany M. Llewellyn

D. Lee Roberts, Jr., Esq. Colby L. Balkenbush, Esq. Brittany M. Llewellyn, Esq. Phillip N. Smith, Jr., Esq. Marjan Hajimirzaee, Esq. WEINBERG, WHEELER, HUDGINS, GUNN & DIAL, LLC 6385 South Rainbow Blvd. Suite 400 Las Vegas, Nevada 89118

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MEMORANDUM OF POINTS AND AUTHORITIES

Plaintiffs' Motion to Unlock seeks an order from the Court unlocking the record with respect to the following exhibits:

P009	P121	P295	P473H	D4874
P012	P122	P296	P473X	D4875
P013	P130	P297	P473Y	D4887
P014	P142	P299	P473Z	D4891
P019	P145	P313	P478	D4893
P027	P146	P317	P482	D4894
P031	P158	P322	P486	D4896
P032	P163	P325	P488	D4914
P033	P165	P363	P492	D4918
P035	P168	P365	P506	D4944
P037	P170	P376	P513	D4971
P040	P183	P379	P530-16	D5174
P043	P185	P412	D1000	D5175
P055	P213	P422	D1001	D5177
P058	P255	P424	D1002	D5180
P061	P261	P428	D1003	D5242
P063	P263	P470	D1004	D5321
P070	P264	P473A	D1005	D5322A
P072	P271	P473B	D4008	D5365
P074	P272	P473B1	D4458	D5464
P077	P282	P473C	D4570	D5502
P079	P284	P473D	D4643	D5503
P082	P287	P473E	D4760	D5508
P085	P290	P473F	D4777	D5527
P100	P291	P473G	D4863	D5529
P120	P293			

This Response memorializes that, since the filing of Plaintiffs' Motion, the parties have reached the following agreements with respect to the exhibits identified above:

- Exhibits named D1001-D1005 in Plaintiffs' Motion should be corrected to P1001-P1005;
- 2. **P1001** is subject to Defendants' pending Motion to Seal, and will not be unlocked;
- 3. P1005 was not an admitted trial exhibit, and will not be unlocked;
- 4. **D4008** was not an admitted trial exhibit, and will not be unlocked;

5. **D4458** was not an admitted trial exhibit, and will not be unlocked.

II. RELIEF REQUESTED

For the foregoing reasons, Defendants respectfully request that the Court enter an Order unsealing only the following exhibits:

P009	P121	P295	P473H	D4874
P012	P122	P296	P473X	D4875
P013	P130	P297	P473Y	D4887
P014	P142	P299	P473Z	D4891
P019	P145	P313	P478	D4893
P027	P146	P317	P482	D4894
P031	P158	P322	P486	D4896
P032	P163	P325	P488	D4914
P033	P165	P363	P492	D4918
P035	P168	P365	P506	D4944
P037	P170	P376	P513	D4971
P040	P183	P379	P530-16	D5174
P043	P185	P412	P1002	D5175
P055	P213	P422	P1003	D5177
P058	P255	P424	P1004	D5180
P061	P261	P428		D5242
P063	P263	P470		D5321
P070	P264	P473A		D5322A
P072	P271	P473B		D5365
P074	P272	P473B1	D1000	D5464
P077	P282	P473C	D4570	D5502
P079	P284	P473D	D4643	D5503
P082	P287	P473E	D4760	D5508
P085	P290	P473F	D4777	D5527
P100	P291	P473G	D4863	D5529
P120	P293			

Dated this 15th day of February, 2022.

/s/ Brittany M. Llewellyn	
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CERTIFICATE OF SERVICE

I hereby certify that on the 15th day of February, 2022, a true and correct copy of the foregoing **DEFENDANTS' RESPONSE TO PLAINTIFFS' MOTION TO UNLOCK CERTAIN ADMITTED TRIAL EXHIBITS ON ORDER SHORTENING TIME** was electronically filed/served on counsel through the Court's electronic service system pursuant to Administrative Order 14-2 and N.E.F.C.R. 9, via the electronic mail addresses noted below, unless service by another method is stated or noted:

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DISTRICT COURT CLARK COUNTY, NEVADA

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NEVADA-MANDAVIA, P.C., a Nevada
professional corporation; CRUM, STEFANKO
AND JONES, LTD. dba RUBY CREST
EMERGENCY MEDICINE, a Nevada
professional corporation,
Plaintiffs,

VS.

UNITED HEALTHCARE INSURANCE COMPANY, a Connecticut corporation; UNITED HEALTH CARE SERVICES INC., dba UNITEDHEALTHCARE, a Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

Defendants.

Case No.: A-19-792978-B Dept. No.: XXVII

PLAINTIFFS' REPLY IN SUPPORT OF CROSS MOTION FOR ENTRY OF JUDGMENT

Hearing Date: February 16, 2022 Hearing Time: 10:30 a.m.

SUMMARY OF ARGUMENT

Because Plaintiffs' Cross Motion for Entry of Judgment is necessarily tied to Defendants' Motion to Apply the Cap, Plaintiffs offer this short Reply in Support of the Cross Motion and request the Court to enter Plaintiffs' proposed judgment.

At its core, Defendants' position on the cap requires the Court to conclude that the exception only applies to a claim *brought by an insured* against an insurance company for acting in bad faith regarding its coverage obligations *to that insured*.

The exception is not so narrow. If it were, there would be no reason for Defendants to spend so much energy arguing that Plaintiffs abandoned (which Plaintiffs did not) any and all types of bad faith that might otherwise satisfy the exception because Plaintiffs are obviously not insureds. But that is precisely how Defendants lead their arguments in both the Motion and Reply.

Defendants other core argument – that Plaintiffs' interpretation of the exception would mean anyone could sue an insurance company for bad faith– is equally without merit. Plaintiffs do not contend that *anyone* who sues an insurance company would be eligible for the statutory exception to the punitive damages cap.

Rather, Plaintiffs merely contend that the evidence introduced at trial and the jury findings as set forth in Special Verdict questions 10 (unfair claims practices), 16 (oppression, fraud or malice in conduct that constituted unfair claims practices), 1 (unjust enrichment), and 15 (oppression, fraud or malice in conduct that constituted unjust enrichment) establish Defendants' bad faith with regard to their obligations to provide coverage.

That position is supported by the *Myers* case on which Defendants rely, which establishes that a special verdict form may result in implied findings that would support a judgment.

Plaintiffs debunk these two core points, along with Defendants' other arguments, in greater detail below.

MEMORANDUM OF POINTS AND AUTHORITIES

A. There is more than one way to commit bad faith and Plaintiffs' abandonment of one way did not constitute an abandonment of all ways.

Plaintiffs' Third Claim for Relief in the Second Amended Petition – Violation of NRS 686A.020 and 686A.310 – alleges Plaintiffs are entitled to recover punitive damages from Defendants because Defendants "acted in bad faith regarding their obligation to pay the usual and customary fee." Plaintiffs never abandoned that theory of bad faith.

Instead, Plaintiffs merely abandoned a proposed instruction (and its' incorporation into a separate punitive damage instruction) that said "'Bad Faith' means that the insurer had no reasonable basis for disputing the claim; and the insurer knew or recklessly disregarded the fact that there was no reasonable basis for disputing the claim." (emphasis added) See Nov. 15, 2021Plas. Proposed Jury Instructions (Contested) at 16.

The reason for withdrawing that proposed instruction is obvious. Plaintiffs' theory of bad faith was unrelated to a *denial* of Plaintiffs' claims and focused instead on Defendants' conduct in violating Nevada's Unfair Claims Practices Act (*i.e.*, the allegation in paragraph 96 of the SAC). Indeed, Defendants readily admitted they had not disputed any claim, so submitting a bad faith instruction based on *disputing* claims made no sense.

Consequently, Plaintiffs pursued the bad faith alleged in paragraph 96 of the SAC. That allegation covered the evidence presented and the jury's findings.

Neither Defendants' lengthy arguments, nor the cases they cite require a different conclusion. In fact, *Myers Building* supports the application of 42.005(2)(b) urged by Plaintiffs. In that case, the court struck the punitive damages finding because there was no tort claim presented to the jury. *Myers Building Indus., Ltd. v. Interface Tech., Inc.*, 13 Cal. App. 4th 949, 961 17 Cal. Rptr. 2d 242 (1993) (noting that the plaintiff had obtained a verdict "which found only that Interface had breached its contract with Myers," and that "without an actual verdict by the jury on a fraud (or other tort) cause of action, the instructions and evidence cannot support the punitive damages award"). Here, Plaintiffs submitted and the jury found bad faith liability based on at least one tort theory; *i.e.*, the Unfair Claims Practices Act.

Tellingly, the court's discussion in *Myers Building* demonstrates that the substance, and not the form, of jury questions is what matters – noting that "a finding of fraud" could have been "impliedly made by the jury in its special verdict form." *Id.* This is precisely what happened here: bad faith was impliedly found based on the jury's answer to Special Verdict questions 10 (unfair claims practices) and 16 (oppression, fraud or malice in conduct that constituted unfair claims practices). The same is equally true based on the jury's answer to Special Verdict questions 1 (unjust enrichment) and 15 (oppression, fraud or malice in conduct that constituted unjust enrichment). Accordingly, the Court should enter Plaintiffs' requested judgment.

B. Defendants misstate Plaintiffs' interpretation of 42.005(2)(b).

Plaintiffs ask the Court to apply the plain meaning of NRS 42.005(2)(b)—nothing more, nothing less. Plaintiffs brought an action against Defendants (insurers) and proved they acted in bad faith with respect to their obligation to provide insurance coverage. NRS 42.005(2)(b). This is the plain language of the statute.

In order to meet those requirements, Plaintiffs do not suggest that anyone could sue an insurer for bad faith (as Defendants portray Plaintiffs' position);¹ rather, Plaintiffs merely suggest that the evidence presented and jury's findings to Special Verdict questions 1, 10, 15 and 16 establish a legally sufficient basis to conclude that the Defendants acted in bad faith regarding their obligation to provide insurance coverage. Plaintiffs do not challenge the findings of *Torres* and *McClelland*, nor would a ruling in Plaintiffs' favor be contrary to either of those opinions.

C. Bad faith is broader than breach of the covenant of good faith and fair dealing, and the plain language of the statute confirms that.

Defendants argue that "bad faith" is a term of art with a specific meaning that existed prior to the legislature's statutory inclusion of bad faith in 1989. Based on that, Defendants seek to impose an overly restrictive definition of bad faith upon the statute, which is that "bad faith" can

¹ Defendants' absurd hypotheticals aside, Plaintiffs have never argued it could be "any action" of any conceivable nature. It still must meet the statutory requirements of being an action against an insurer "who acts in bad faith regarding its obligations to provide insurance coverage," as Defendants did here.

only mean "breach of the implied covenant of good faith and fair dealing" in a claim brought by an insured against an insurance company. That argument ignores Nevada caselaw and guidance prior to 1989 as to the meaning of "bad faith" as well as the plain language of the statute.

On the one hand, Defendants argue that "bad faith" is a term of art that had a specific meaning at common law. On the other, they ignore all common law cases that discuss bad faith outside of the insurance context. In other words, Defendants turn a blind eye to any case that undermines their argument. And, as pointed out in Plaintiffs' brief, at common law, "bad faith" had a meaning that was inclusive of all forms of bad faith and was not exclusively limited to an insurers breach of the covenant of good faith and fair dealing to its insured, like Defendants' suggest. See, e.g., Land Residential Dev. v. Kaiser Aetna, 100 Nev. 29, 33, 676 P.2d 235, 237–38 (1984); the Restatement (Second) of Contracts § 205. Hence, Defendants' premise is flawed because it ignores Nevada caselaw and other guidance as to the common law meaning of bad faith.

Even if it were true that the historical meaning of bad faith only involved claims by insureds against insurers, which it is not, that argument ignores the plain language of the statute, which contains no limitation as to who may recover against an insurer under NRS § 42.005(2)(b):

The limitations on the amount of an award of exemplary or punitive damages prescribed in subsection 1 do not apply to **an action brought against**: . . . (b) An insurer who acts in bad faith regarding its obligations to provide insurance coverage.

Section 42.005(2) applies to any "action brought against . . . [a]n insurer." Under longstanding statutory interpretation principles, the Legislature's exclusion of a limitation on who may bring suit under NRS § 42.005(2)(b) demonstrates the legislature chose not to limit the exception to what Defendants contend was the accepted meaning of bad faith prior to adoption of the exception in 1989. *See Ex Parte Arascada*, 44 Nev. 30, 35, 189 P. 619, 620 (Nev. 1920) ("[I]t is fair to assume that, when the Legislature enumerates certain instances in which an act or thing may be done, or when certain privileges may be enjoyed, it names all that it contemplates; otherwise what is the necessity of specifying any?"); *Rural Telephone Co. v. Public Utilities Commission*, 133 Nev. 387, 390, 398 P. 3d 909, 911 (Nev. 2017) (citing *Ex Part Arascada*). Thus, by its plain language, NRS 42.005(2)(b) is not limited to actions brought by insureds.

Defendants also do not address the intent behind the Legislature's statutory inclusion of the bad faith exception—that is, to create a mechanism by which a Nevada jury can send a message to the largest and wealthiest of corporations, like United, to deter further oppression, fraud and malice in the state. The context of this case falls squarely within that intent.

Instead of addressing legislative intent, Defendants focus on portions of the legislative history that discuss bad faith in the context of insureds and extrapolate that as dispositive "proof" that NRS 42.005(2)(b) is limited to actions brought by insureds. By doing this, Defendants gloss over a crucial fact: despite that discussion, the legislature did not include the "insured" limitation in the statute. The legislature did not include any plain language in NRS 42.005(2)(b) that would limit the exception only to an action against an insurer by the insured. Rather, the plain language is that of an "action brought against . . . [a]n insurer." It must be assumed this omission of any insured limitation was deliberate. The legislature's choice to include broad language and leave out any requirement that an action can only be brought by an insured is proof that no such limitation exists. Therefore, because Defendants ask for an interpretation that contravenes both the legislative intent and the plain language of NRS 42.005(2)(b), the Court should reject it and enter Plaintiffs' requested judgment.

D. The jury made a special finding that supports applying the exception to the cap.

Defendants' argument is, effectively, that if the magic words "bad faith" are not included in the jury's findings, then the statutory cap on punitive damages must apply. They cite not a single case in support of that notion.

Plaintiffs did obtain special findings: fraud, oppression, or malice by clear and convincing evidence. This goes beyond the threshold required to establish common law bad faith. Defendants effectively ask the Court to punish Plaintiffs for satisfying a higher standard. But again, that is not the law. Plaintiffs obtained a finding that encompasses bad faith, by an insurer, in connection with the obligation to provide insurance coverage. NRS 42.005(2)(b). The exception applies.

Defendants cite *Pioneer* extensively, but they mistake the opinion for much more than it really is. The federal district court opinion clearly states, after spending pages discussing bad faith causes of action versus statutory violations of NRS 686A.310, that "this opinion should not be

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construed as a win or a loss for insurers or insureds. Rather, it is an attempt to clarify causes of action which understandably have confused more than a few persons." Pioneer Chlor Alkali Co., Inc. v. Nat'l Union Fire Ins. Co. of Pittsburgh, Pennsylvania, 863 F. Supp. 1237, 1251 n.23 (D. Nev. 1994).

But most importantly, the *Pioneer* Court also distinguished its discussion from the punitive damages cap, explicitly clarifying that its definition of "bad faith" did not establish the bounds of the cap under NRS 42.005:

> The Court does note however that the recovery caps on punitive damages are not applicable for "[a]n insurer who acts in bad faith regarding its obligations to provide insurance coverage." See NRS 42.005. The Court need not decide here the Nevada legislature's intent as to the scope of this exception to the recovery caps.

Id. (emphasis added).

In other words, *Pioneer* not only doesn't mean what Defendants' say, but it clearly and directly disclaims that meaning. For that reason, the Court should overrule Defendants' objections and enter Plaintiffs' requested judgment.

Plaintiffs have not proposed a judgment with inconsistent remedies, so election of Ε. remedies doesn't apply.²

Defendants do not cite a single case that requires a final judgment to actually spell out the specific waterfall for legal theories in order to facilitate an appeal. On the contrary, Allstate *Insurance Company v. Miller* holds only that an appellate court "can focus on a legally valid theory and determine if there is substantial evidence supporting that theory." 125 Nev. 300, 322 212 P.3d 318, 333 (2009).

"The doctrine of election of remedies applies 'only to inconsistent remedies." JA Jones Const. Co. v. Lehrer McGovern Bovis, Inc., 120 Nev. 277, 288 89 P.3d 1009, 1017 (2004). But Plaintiffs' proposed judgment already accounts for that because it only seeks entry of a single claim for Actual Damages. Thus, there can be no inconsistency in the judgment.

Plaintiffs have modified the language regarding post-judgment interest consistent with Defendants' argument, so there should be no further objection to that language.

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Plaintiffs' Prompt Pay Damages are obviously not inconsistent with actual damages under the other claims. And Plaintiffs seek entry of only one set of Actual Damages. Because the damages questions were all answered identically, and because Plaintiffs' proposed judgment separates Actual Damages, Prompt Pay Damages, and Punitive Damages by Plaintiff and by Defendant, any court on appellate review will have the flexibility to follow the guidance of *Allstate* and render a judgment without ordering a retrial.

CONCLUSION

Plaintiffs respectfully request the Court to (1) deny Defendants' Motion to Enforce the Statutory Cap, (2) enter judgment in their favor and against Defendants as set forth on the attached proposed judgment and (3) award Plaintiffs such other and further relief to which they may be entitled.

DATED this 15th day of February, 2022.

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CERTIFICATE OF SERVICE

I certify that on this 15th day of February, 2022, I caused a true and correct copy of the foregoing to be served via this Court's Electronic Filing system in the above-captioned case, upon the following:

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FREMONT EMERGENCY SERVICES (MANDAVIA), LTD., a Nevada professional **TEAM PHYSICIĀNS** corporation; OF P.C., NEVADA-MANDAVIA, a Nevada professional corporation; CRUM, STEFANKO JONES, dba **RUBY CREST** AND LTD. **EMERGENCY** MEDICINE, Nevada professional corporation,

Plaintiffs,

VS.

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Case No.: A-19-792978-B

Dept. No.: 27

DEFENDANTS' INDEX OF TRIAL EXHIBIT REDACTIONS IN DISPUTE

Hearing Date: February 10, 2022

Hearing Time: 1:00 p.m.

Page 1 of 11

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UNITED **HEALTHCARE INSURANCE** COMPANY, a Connecticut corporation; UNITED **HEALTH CARE SERVICES** INC., dba UNITEDHEALTHCARE, Minnesota UNITED corporation; UMR, INC., dba **MEDICAL** RESOURCES. Delaware a corporation; **SIERRA** HEALTH AND LIFE COMPANY, INC., INSURANCE a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

Defendants.

Defendants UnitedHealthcare Insurance Company ("UHIC"), United HealthCare Services, Inc. ("UHS"), UMR, Inc. ("UMR"), Sierra Health and Life Insurance Co., Inc. ("SHL"), and Health Plan of Nevada, Inc. ("HPN") (collectively "Defendants"), by and through their attorneys, hereby submit the following index of redactions to be addressed at the hearing set for February 10, 2022. It reflects the parties agreements as of February 9, 2022, which have continued to evolve. As a result, there may be some discrepancies between the parties' lists that could be resolved at or after the hearing.

In Order of Presentation at the Hearing

Ex. #	Description	Pages in Dispute as of 2/9/22	Court's Ruling
PX 266	PX 266 is a 37 page strategic business plan titled "Employer & Individual 2019 Business Plan."	P266.0003; P266.0012; P266.0017; P266.0024-0031; P266.0033-0035; P266.0037	
PX 447	PX447 is a strategic business plan titled "Employer & Individual: 2020 Business Plan."	P447.0004-0005; P447.0009; P447.0017-0023; P447.0024; P447.0025-0026	
PX 329	PX 329 is a strategic business plan titled "2019 E&I Performance."	P329.0002-0043; P329.0045-0047	
PX 426	PX 426 is an October 2019 business strategy document titled "Western Region Quarterback Kick-off Summit."	P426.0013, P426.0016–0019; P426.0020, P426.0021–0023; P426.0025;	

Ex. #	Description	Pages in Dispute as of 2/9/22	Court's Ruling
		P426.0026; P426.0027; P426.0028–0032; P426.0033; P426.0034–0036; P426.0037–0038; P426.0042–0043; P426.0044–0045; P426.0047–0050; P426.0054; P426.0055; P426.0056–0059; P426.0060–0062, P426.0064–0079; P426.0098–0100; P426.0101–0102; P426.0105–0107; P426.0108; P426.0109; P426.0110; P426.0111; P426.0113; P426.0115–0116; P426.0119	
PX 66	PX 66 is a 32 page strategic business plan titled "Commercial Group 2017 Business Plan Strategic Summary."	P066.0004–0006; P066.0013; P066.0014; P066.0015; P066.0016; P066.0022–0032	
PX 89	PX 89 is a 2017 strategic business plan titled "United Health Networks West Region Review."	P089.0004–0018; P089.0031–0032; P089.0038–0040; P089.0042; P089.0059; P089.0060; P089.0074–0075; P089.0077–0081; P089.0082; P089.0083; P089.0085–0086; P089.0087; P089.0088; P089.0090; P089.0091; P089.0118–0125;	
PX 236	PX 236 is a 2018 strategic business plan titled "Enterprise Value:	P236.0004; P236.0005–0010;	

Ex. #	Description	Pages in Dispute as of 2/9/22	Court's Ruling
	TCOC."	P236.0012-0014; P236.0015-0017; P236.0015-0017; P236.0018-0020; P236.0021; P236.0023; P236.0025; P236.0026-0027; P236.0028; P236.0029; P236.0030-0034	
PX 268	PX 268 is a 7 page strategic business plan titled "2019 EHCV Executive Summary."	P268.0005	
PX 273	PX 273 is a 198 page strategic business plan titled "Re–Defining the E&I Strategy and Enabling Operating Model" from November 2019.	P273.0010-0017; P273.0023-0024; P273.0026-0027; P273.0031-0033; P273.0035-0039; P273.0046; P273.0049-0050; P273.0054-0055; P273.0056-0060; P273.0098-0101; P273.0107; P273.0119-0121; P273.0123-0124; P273.0129; P273.0136-0139; P273.0150; P273.0162; P273.0166; P273.0180; P273.0180; P273.0180; P273.0180; P273.0180; P273.0193-198	
PX 288	PX 288 is a 207 page strategic business plan titled "Value Creation: Project Status and Summaries as of January 31, 2019."	P288.0013; P288.0018-0019; P288.0055; P288.0060-0061; P288.0067; P288.0132;	
PX 294	PX 294 is a 2019 strategic business plan titled "EHCV: Executive Summary."	P294.0002	

Ex. #	Description	Pages in Dispute as of 2/9/22	Court's Ruling
PX 361	PX361 is an internal United email chain from 2019 regarding United's revenues and budgets.	P361.0003-0008	
PX 378	PX 378 is a 2019 strategic business plan titled "UHN Employer & Individual: Market Competitiveness."	P378.0002; P378.0004–0014; P378.0016–0017; P378.0019–0022	
PX 423	PX 423 is a business strategy document, part of the "Enterprise Health Care Value West Region QB Kick-off Summit" titled "Non Par_Out of Network."	P423.0003-0005	
PX 462	PX 462 is a 2020 strategic business plan titled "West Region 2020 Business Planning."	P462.0003-0005; P462.0011-0019; P462.0021-0022; 462.0027-0034	
PX 471	PX 471 is a business strategy document titled "Commercial Competitor Financial Review."	P471.0004; P471.0006; P471.0007–0008; P471.0012–0013	
PX 476	PX 476 is a 2019 business strategy document titled "Parking Lot."	P476.0003; P476.0005; P476.0008–0012; P476.0013–0014; P476.0015; P476.0018–0021	
PX 509	PX 509 is a 13 page business strategy document titled "UnitedHealthcare – Contract Negotiations - Communication Plan Executive Summary."	P509.0002; P509.0004–0005; P509.0007–0008; P509.0010–0013	
PX 1001	PX 1001 is the audited financial statements for United HealthCare Services, Inc. and subsidiaries for the year ended December 31, 2020.	P1001.0003-0004; P1001.0006-0040	

Ex. #	Description	Pages in Dispute as of 2/9/22	Court Ruling
PX 071	PX 71 is a 2017 Financial Renewal Agreement.	P071.0006	

Ex. #	Description	Pages in Dispute as of 2/9/22	Court Ruling
PX 075	PX 75 is a 2017 Financial Renewal Agreement.	P075.0003	
PX 003	PX 3 is a 2010 Network Access Agreement between UHIC and MultiPlan.	P003.0030; P003.0043–0045; P003.0047	
PX 008	PX 8 is a 2013 Network Access Agreement between UHIC and MultiPlan.	P008.0012-0013; P008.0016-0020; P008.0024; P008.0047-0048; P008.0050; P008.0080; P008.0093-0095; P008.0130-0131	
PX 092	PX 92 is a May 2017 presentation titled Emergency Department Transformation Initiative (EDTI).	P092.0003-0004; P092.0009-0010; P092.0018; P092.0024;	
PX 127	PX 127 is a 2017 Financial Renewal Agreement.	P127.0006	
PX 147	PX 147 is a 2018 Administrative Services Agreement.	P147.0024	
PX 148	PX 148 is a 2018 Financial Renewal Agreement.	P148.0006	
PX 149	PX 149 is a 2018 Financial Renewal Agreement.	P149.0003	
PX 159	PX 159 is a 2018 Master Professional Services Agreement.	P159.0020	
PX 231	PX 231 is a 2018 Network access agreement between UHIC and MultiPlan.	P231.0009-0011	
PX 244	PX 244 is an internal United email chain discussing current UMR out-of-network program offerings.	P244.0009-0010	
PX 246	PX 246 is an October 2018 meeting presentation titled Non-Par Opportunities UHC Ops Meeting.	P246.0004; P246.0005; P246.0009; P246.0010	

Ex. #	Description	Pages in Dispute as of 2/9/22	Court Ruling
PX 265	PX 265 is a 2018 "Region 5 Review" presentation.	P265.004; P265.006;	
		P265.010	
PX 319	PX 319 is an Administrative Services Agreement between UnitedHealthcare Services, Inc and United's customer.	P319.0004	
PX 354	PX 354 is an email with attached May 2019 presentation titled Project Airstream MVP Overview.	P354.0003; P354.0006; P354.0008; P354.0010-0012; P354.0016-0017; P354.0021-0023; P354.0025-0026; P354.0040	
PX 359	PX 359 is an internal United email chain discussing concerns from a client benefit manager contact.	P359.0001; P359.0003-0007	
PX 367	PX 367 is a presentation titled Out- of-Network Cost Management Programs.	P367.0008 P367.0011	
PX 368	PX 368 is a talking points document titled Out-of-Network Cost Management Programs.	P368.0006 P368.0011	
PX 400	PX 400 is a September 2016 MultiPlan PowerPoint Presentation to UnitedHealthcare regarding projected revenue from suggested new programs for consideration.	P400.0003; P400.0009-0012	
PX 440	PX 440 is an internal United email chain from November 2019 discussing OCM program and talking points.	P440.0001; P440.0003-0004	
PX 464	PX 464 is a United document describing Naviguard in comparison to the OCM program.	P464.0001–0003; P464.0005–0006; P464.0010	
PX 472	PX 472 is a United document outlining customer membership and program selection for out-of-	P472.0001	

Ex. #	Description	Pages in Dispute as of 2/9/22	Court Ruling
	network services.		

Exhibit	Description	Pages in Dispute as of 2/9/22	Court Ruling
DX 4573	DX 4573 is a September 2019 MultiPlan PowerPoint Presentation to UnitedHealthcare titled Competitive Landscape for Cost Management.	D4573.0003-0005; D4573.0007; D4573.0009-0012	
DX 5499	DX 5499 is a 182-page 2017 Administrative Services Agreement between United HealthCare Services, Inc. and its affiliates and a customer.	D5499.0024; D5499.0028; D5499.0054–0089; D5499.0091; D5499.0101; D5499.0104; D5499.0107; D5499.0110; D5499.0113; D5499.0116; D5499.0119; D5499.0122; D5499.0128; D5499.0128; D5499.0131; D5499.0134; D5499.0137	
DX 5504	DX 5504 is an Equity Healthcare Existing UHC Customer Out Of Network Program Summary, which contains a chart presenting data analyzing specific aggregate amounts allowed for particular clients.	D5504.000001	
DX 5505 ¹	DX 5505 is a 244-page UnitedHealth Group presentation titled: "Value Creation: Project Status and Summaries as of May 31, 2019" reflecting various	D5505.000003; D5505.000030; D5505.000033; D5505.000055; D5505.000085; D5505.000087;	

¹ There are discrepancies between Defendants and TeamHealth Plaintiffs' lists of resolved pages that could likely could be resolved at a subsequent meet and confer.

Exhibit	Description	Pages in Dispute as of 2/9/22	Court Ruling
	projects led by Value Creation Teams in Clinical Services and Network.	D5505.000090; D5505.000094; D5505.000101-000102; D5505.000108-000110; D5505.000114; D5505.000121-000122; D5505.000125; D5505.000130; D5505.000133; D5505.000137; D5505.000137; D5505.000143; D5505.000149; D5505.000149; D5505.000166; D5505.000186; D5505.000192; D5505.000192; D5505.000192; D5505.000198; D5505.000223; D5505.000236	

Dated this 16th day of February, 2022.

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CERTIFICATE OF SERVICE

I hereby certify that on the 16th day of February, 2021, a true and correct copy of the foregoing **DEFENDANTS' INDEX OF TRIAL EXHIBIT REDACTIONS IN DISPUTE** was electronically filed/served on counsel through the Court's electronic service system pursuant to Administrative Order 14-2 and N.E.F.C.R. 9, via the electronic mail addresses noted below, unless service by another method is stated or noted:

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Plaintiffs,

VS.

21 UNITED HEALTHCARE INSURANCE 22

COMPANY, a Connecticut corporation; UNITED HEALTH CARE SERVICES INC.,

dba UNITEDHEALTHCARE, a Minnesota 23 corporation; UMR, INC., dba UNITED

24 MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE

INŜURANCE COMPANY, INC., a Nevada 25 corporation; HEALTH PLAN OF NEVADA,

INC., a Nevada corporation, 26

27

Defendants.

Case No.: A-19-792978-B Dept. No.: XXVII

NOTICE OF ENTRY OF STIPULATION AND ORDER REGARDING CERTAIN ADMITTED TRIAL EXHIBITS

1	PLEASE TAKE NOTICE that a Stipulation and Order Regarding Certain Admitted Trial			
2	Exhibits was entered on February 16, 2022, a copy of which is attached hereto.			
3	DATED this 17th day of February, 2022.			
4				
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CERTIFICATE OF SERVICE

I certify that on this 17th day of February, 2022, I caused a true and correct copy of the foregoing to be served via this Court's Electronic Filing system in the above-captioned case, upon the following:

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Judge David Wall, Special Master Mara Satterthwaite & Michelle Samaniego JAMS 3800 Howard Hughes Parkway, 11th Floor Las Vegas, NV 89123 msatterthwaite@jamsadr.com msamaniego@jamsadr.com

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Attorneys for Non-Party MultiPlan, Inc.

/s/ Jason S. McManis

ELECTRONICALLY SERVED 2/16/2022 2:09 PM

Electronically File 913 077 02/16/2022 2:09 PM RK OF THE COURT

		CLERK OF THE COU
1	SAO	
2	Pat Lundvall (NSBN 3761) Kristen T. Gallagher (NSBN 9561) Amanda M. Barach (NSBN 12300)	Joseph Y. Ahmad (admitted pro hac vice) John Zavitsanos (admitted pro hac vice) Joseph S. McMonie (admitted pro hac vice)
3	Amanda M. Perach (NSBN 12399) McDONALD CARANO LLP 2300 West Sahara Avenue, Suite 1200	Jason S. McManis (admitted <i>pro hac vice</i>) Michael Killingsworth (admitted <i>pro hac vice</i>)
4	Las Vegas, Nevada 89102 Telephone: (702) 873-4100	Louis Liao (admitted <i>pro hac vice</i>) Jane L. Robinson (admitted <i>pro hac vice</i>)
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6	aperach@mcdonaldcarano.com	Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing, P.C.
7	Justin C. Fineberg (admitted <i>pro hac vice</i>) Rachel H. LeBlanc (admitted <i>pro hac vice</i>)	1221 McKinney Street, Suite 2500 Houston, Texas 77010
8	Jonathan E. Siegelaub (admitted <i>pro hac vice</i>) Lash & Goldberg LLP	Telephone: 713-600-4901 joeahmad@azalaw.com
9	Weston Corporate Centre I 2500 Weston Road Suite 220	jzavitsanos@azalaw.com jmcmanis@azalaw.com
10	Fort Lauderdale, Florida 33331 Telephone: (954) 384-2500	mkillingsworth@azalaw.com lliao@azalaw.com
11	jfineberg@lashgoldberg.com rleblanc@lashgoldberg.com	jrobinson@azalaw.com kleyendecker@azalaw.com
12	jsiegelaub@lashgoldberg.com	
13	Attorneys for Plaintiffs	
14	DISTRIC	T COURT
15	CLARK COU	NTY, NEVADA
16	FREMONT EMERGENCY SERVICES	Case No.: A-19-792978-B
17	(MANDAVIA), LTD., a Nevada professional corporation; TEAM PHYSICIANS OF	Dept. No.: XXVII
18	NEVADA-MANDAVIA, P.C., a Nevada professional corporation: CRUM, STEFANKO	

professional corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST 19 EMERGENCY MEDICINE, a Nevada professional corporation, 20

Plaintiffs,

VS.

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22

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24

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27

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2300 WEST SAHARA AVENUE, SUITE 1200 • LAS VEGAS, NEVADA 89102 PHONE 702.873.4100 • FAX 702.873.9966

UNITED HEALTHCARE INSURANCE COMPANY, a Connecticut corporation; UNITED HEALTH CARE SERVICES INC., dba UNITEDHEALTHCARE, a Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

STIPULATION AND ORDER REGARDING CERTAIN ADMITTED TRIAL EXHIBITS

Defendants

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Plaintiffs Fremont Emergency Services (Mandavia), Ltd.; Team Physicians of Nevada-Mandavia, P.C.; Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine (collectively, "Plaintiffs"); and defendants UnitedHealthcare Insurance Company; United HealthCare Services, Inc.; UMR, Inc.; Sierra Health and Life Insurance Co., Inc.; and Health Plan of Nevada, Inc. (collectively, "Defendants") stipulate and agree as follows:

- 1. On November 10, 2021, the Court confirmed on the record that the case is locked during trial. See, e.g., Nov. 10, 2021 Tr. at 103:10 ("The case is locked during trial.").
- 2. On November 11, 2021, Defendants filed a Preliminary Motion to Seal Attorneys' Eyes Only Documents Used At Trial. As part of that motion, Defendants requested "that the Court maintain the AEO status of trial exhibits until the jury renders a verdict," and then after that, the Court could "hear motions to seal or redact certain AEO trial exhibits." Defs. Prelim. Mot. to Seal at 3.
- 3. Following the jury's verdict, Defendants filed a Motion to Seal Certain Confidential Trial Exhibits on December 5, 2021. Defendants also filed Supplement to Defendants Motion to Seal Certain Confidential Trial Exhibits on December 8, 2021.
- Non-Party MultiPlan, Inc. ("MultiPlan") filed a Motion to Seal Certain 4. Confidential Trial Exhibits on December 16, 2021.
- 5. Defendants' Motion to Seal Certain Confidential Trial Exhibits, Supplement to Defendants Motion to Seal Certain Confidential Trial Exhibits, and MultiPlan's Motion to Seal Certain Confidential Trial Exhibits (collectively, the "Sealing Motions") identified all of the admitted trial exhibits which any party sought to seal.
- 6. Plaintiffs responded to the Sealing Motions, and Defendants and MultiPlan filed replies.
- 7. Subsequently, on February 14, 2022, Plaintiffs filed a Motion to Unlock Certain Admitted Trial Exhibits on Order Shortening Time. Defendants responded on February 15, 2022. The parties then conferred regarding certain differences as to the exhibits that were actually subject of the Sealing Motions.

8. The parties agree that the following exhibits admitted at trial are not the subject of any of the Sealing Motions:

P009	P121	P295	P473H	D4874
P012	P122	P296	P473X	D4875
P013	P130	P297	P473Y	D4887
P014	P142	P299	P473Z	D4891
P019	P145	P313	P478	D4893
P027	P146	P317	P482	D4894
P031	P158	P322	P486	D4896
P032	P163	P325	P488	D4914
P033	P165	P363	P492	D4918
P035	P168	P365	P506	D4944
P037	P170	P376	P513	D4971
P040	P183	P379	P530-16	D5174
P043	P185	P412	P1000	D5175
P055	P213	P422		D5177
P058	P255	P424	P1002	D5180
P061	P261	P428	P1003	D5242
P063	P263	P470	P1004	D5321
P070	P264	P473A		D5322A
P072	P271	P473B		D5365
P074	P272	P473B1		D5464
P077	P282	P473C	D4570	D5502
P079	P284	P473D	D4643	D5503
P082	P287	P473E	D4760	D5508
P085	P290	P473F	D4777	D5527
P100	P291	P473G	D4863	D5529
P120	P293			

9. Accordingly, Plaintiffs and Defendants hereby stipulate and agree that these admitted exhibits are not confidential, not subject to seal, and may be unlocked as part of the Court's public record.

1	Dated this 16th day of February, 2022.	
2	Respectfully submitted by:	
3	AHMAD, ZAVITSANOS, ANAIPAKOS, ALAVI & MENSING, P.C	WEINBERG, WHEELER, HUDGINS, GUNN & DIAL, LLC
4	// L. C.M.M.	/s/ Brittany M. Llewellyn
5	/s/ Jason S. McManis P. Kevin Leyendecker (admitted pro hac	D. Lee Roberts, Jr., Esq. Colby L. Balkenbush, Esq.
6	vice) John Zavitsanos (admitted pro hac vice)	Brittany M. Llewellyn, Esq. 6385 South Rainbow Blvd., Suite 400
7	Joseph Y. Ahmad (admitted pro hac vice) Jason S. McManis (admitted pro hac vice)	Las Vegas, Nevada 89118
8	Michael Killingsworth (admitted pro hac vice)	Dimitri D. Portnoi, Esq. (Admitted Pro Hac Vice)
9	Louis Liao (admitted pro hac vice) Jane L. Robinson (admitted pro hac vice)	Jason A. Orr, Esq. (Admitted Pro Hac Vice) Adam G. Levine, Esq. (Admitted Pro Hac
10	1221 McKinney Street, Suite 2500	Vice) Hannah Dunham, Esq. (Admitted Pro Hac
11	Houston, Texas 77010 kleyendecker@azalaw.com	Vice) Nadia L. Farjood, Esq. (Admitted Pro Hac
12	joeahmad@azalaw.com	Vice) O'Melveny & Myers LLP
13	jzavitsanos@azalaw.com jmcmanis@azalaw.com	400 S. Hope St., 18 th Floor
14	mkillingsworth@azalaw.com lliao@azalaw.com	Los Angeles, CA 90071 Telephone: (213) 430-6000
15	jrobinson@azalaw.com	K. Lee Blalack, II, Esq.(Admitted Pro Hac Vice)
16	Justin C. Fineberg (admitted pro hac vice)	Jeffrey E. Gordon, Esq. (Admitted Pro Hac Vice)
17	Rachel H. LeBlanc (admitted pro hac vice) Lash & Goldberg LLP	Kevin D. Feder, Esq. (Admitted Pro Hac Vice)
18	Weston Corporate Centre I 2500 Weston Road Suite 220	Jason Yan, Esq. (Admitted Pro Hac Vice) O'Melveny & Myers LLP
19	Fort Lauderdale, Florida 33331	1625 Eye St. NW Washington, DC 20006
20	jfineberg@lashgoldberg.com rleblanc@lashgoldberg.com	Telephone: (202) 383-5374
21	Pat Lundvall (NSBN 3761)	Paul J. Wooten, Esq. (Admitted Pro Hac Vice)
22	Kristen T. Gallagher (NSBN 9561) Amanda M. Perach (NSBN 12399)	Amanda L. Genovese (Admitted Pro Hac Vice)
23	McDonald Carano LLP 2300 West Sahara Avenue, Suite 1200	Philip E. Legendy (<i>Admitted Pro Hac Vice</i>) O'Melveny & Myers LLP
24	Las Vegas, Nevada 89102	Times Square Tower Seven Times Square
25	plundvall@mcdonaldcarano.com kgallagher@mcdonaldcarano.com	New York, NY 10036 Telephone: (212) 728-5857
26	aperach@mcdonaldcarano.com	Attorneys for Defendants
27	Attorneys for Plaintiffs	Thorneys for Defending
28		

ORDER

IT IS SO ORDERED that the following exhibits admitted at trial shall be considered not confidential, are not subject to seal, and may be unlocked as part of the Court's public record:

4	P009	P121	P295	P473H	D4874
5	P012	P122	P296	P473X	D4875
3	P013	P130	P297	P473Y	D4887
6	P014	P142	P299	P473Z	D4891
7	P019	P145	P313	P478	D4893
	P027	P146	P317	P482	D4894
8	P031	P158	P322	P486	D4896
9	P032	P163	P325	P488	D4914
	P033	P165	P363	P492	D4918
10	P035	P168	P365	P506	D4944
11	P037	P170	P376	P513	D4971
	P040	P183	P379	P530-16	D5174
12	P043	P185	P412	P1000	D5175
13	P055	P213	P422		D5177
	P058	P255	P424	P1002	D5180
14	P061	P261	P428	P1003	D5242
15	P063	P263	P470	P1004	D5321
	P070	P264	P473A		D5322A
16	P072	P271	P473B		D5365
17	P074	P272	P473B1		D5464
	P077	P282	P473C	D4570	D5502
18	P079	P284	P473D	D4643	D5503
19	P082	P287	P473E	D4760	D5508
	P085	P290	P473F	D4777	D5527
20	P100	P291	P473G	D4863	D5529
21	P120	P293			

Dated: February 16, 2022

Dated this 16th day of February, 2022

31A 5F2 ADAB BEE7 Nancy Allf District Court Judge

Respectfully submitted by:
AHMAD, ZAVITSANOS, ANAIPAKOS,
ALAVI & MENSING, P.C
/s/ Jason S. McManis
P. Kevin Leyendecker (admitted pro hac vice)
John Zavitsanos (admitted pro hac vice)
Joseph Y. Ahmad (admitted pro hac vice)
Jason S. McManis (admitted pro hac vice)
Michael Killingsworth (admitted pro hac vice)
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irohinson@azalaw.com

Angela Keniston

From: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>

Sent: Wednesday, February 16, 2022 2:11 PM

To: Jason McManis

Cc: Fowler, Jeffrey; John Zavitsanos; Pat Lundvall; Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.;

Blalack II, K. Lee; Phillips, Ellie; Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham; TMH010

_(Case 34)

Subject: RE: Fremont - Updated Redactions to Trial Exhibits

Thanks Jason. You may add my electronic signature.





Brittany M. Llewellyn, Attorney

Weinberg Wheeler Hudgins Gunn & Dial

6385 South Rainbow Blvd. | Suite 400 | Las Vegas, NV

89118

D: 702.938.3848 | F: 702.938.3864

www.wwhgd.com | vCard

From: Jason McManis [mailto:jmcmanis@AZALAW.COM]

Sent: Wednesday, February 16, 2022 10:16 AM

To: Llewellyn, Brittany M.

Cc: Fowler, Jeffrey; John Zavitsanos; Pat Lundvall; Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Blalack II, K.

Lee; Phillips, Ellie; Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham; TMH010_(Case 34)

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

This Message originated outside your organization.

Brittany,

With the extra time before the hearing today, I've prepared the attached stipulation that reflects the list of exhibits identified in Defendants' response last night, with one exception (highlighted in the SAO). D1000 should be P1000 (admitted on 11/19 at page 23).

If you agree, we can remove the highlighting and submit the SAO and moot the pending motion. Let me know if we can add your signature.

Thanks, Jason

From: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>

Date: Tuesday, February 15, 2022 at 5:05 PM **To:** Jason McManis < jmcmanis@AZALAW.COM>

Cc: Fowler, Jeffrey <jfowler@omm.com>, John Zavitsanos <jzavitsanos@AZALAW.COM>, Pat Lundvall <plundvall@mcdonaldcarano.com>, Roberts, Lee <LRoberts@wwhgd.com>, Balkenbush, Colby <CBalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Blalack II, K. Lee <lblalack@omm.com>, Phillips, Ellie <ephillips@omm.com>, Bowman, Cindy S. <CBowman@wwhgd.com>, Polsenberg, Daniel F. <DPolsenberg@lewisroca.com>, Smith, Abraham <ASmith@lewisroca.com>, TMH010_(Case 34) <TMH010@azalaw.com>

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

Great, I think we are all agreed. We'll submit a quick response to your motion noting agreement and can put it on the record tomorrow.

On Feb 15, 2022, at 4:51 PM, Jason McManis < jmcmanis@azalaw.com> wrote:

This Message originated outside your organization.

You are correct, was looking at wrong list.

--Jason McManis

AZA
1221 McKinney, Ste. 2500
Houston, TX 77010
713.600.4969
jmcmanis@azalaw.com<mailto:jmcmanis@azalaw.com>

From: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>

Date: Tuesday, February 15, 2022 at 6:34 PM

To: Jason McManis < jmcmanis@AZALAW.COM>, Fowler, Jeffrey < jfowler@omm.com>

Cc: John Zavitsanos <jzavitsanos@AZALAW.COM>, Pat Lundvall <plundvall@mcdonaldcarano.com>, Roberts, Lee <LRoberts@wwhgd.com>, Balkenbush, Colby <CBalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Blalack II, K. Lee <lblalack@omm.com>, Phillips, Ellie <ephillips@omm.com>, Bowman, Cindy S. <CBowman@wwhgd.com>, Polsenberg, Daniel F. <DPolsenberg@lewisroca.com>, Smith, Abraham <ASmith@lewisroca.com>, TMH010_(Case 34) <TMH010@azalaw.com> Subject: RE: Fremont - Updated Redactions to Trial Exhibits Thanks Jason.

It looks like D4457 was also included in our motion to seal. With that exception, I believe we have reached a consensus. Please let me know your position on 4457 when you can.

Brittany

From: Jason McManis [mailto:jmcmanis@AZALAW.COM]

Sent: Tuesday, February 15, 2022 3:21 PM To: Llewellyn, Brittany M.; Fowler, Jeffrey

Cc: John Zavitsanos; Pat Lundvall; Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Blalack II, K. Lee; Phillips, Ellie;

Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham; TMH010 (Case 34)

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

This Message originated outside your organization.

Brittany,

Thanks for getting back to us.

Agree re: D4008 and D1005/P1005 (will withdraw, not admitted)

Agree re: D1001/P1001 (will withdraw, subject to sealing motion)

D4458 should be D4457. (11/23 Tr. at 134) (should be corrected and unlocked)

Other minor cleanups:

D1002 = P1002 (should be corrected and unlocked)

D1003 = P1003 (should be corrected and unlocked)

D1004 = P1004 (should be corrected and unlocked)

Happy to put the above on the record at the hearing tomorrow and incorporate into the final order.

Thanks,

Jason

--

Jason McManis AZA 1221 McKinney, Ste. 2500

Houston, TX 77010

713.600.4969

jmcmanis@azalaw.com<mailto:jmcmanis@azalaw.com>

From: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>

Date: Tuesday, February 15, 2022 at 3:50 PM

To: Jason McManis < jmcmanis@AZALAW.COM>, Fowler, Jeffrey < jfowler@omm.com>

Blalack II, K. Lee < lblalack@omm.com>, Phillips, Ellie < ephillips@omm.com>, Bowman, Cindy S.

<CBowman@wwhgd.com>, Polsenberg, Daniel F. <DPolsenberg@lewisroca.com>, Smith, Abraham

<ASmith@lewisroca.com>

Subject: RE: Fremont - Updated Redactions to Trial Exhibits

Jason,

Following discussions last week, we agree on the below regarding D5322A, and the P473 set. We've identified some additional issues. D1001 is actually P1001, which is subject to our motion to seal. D1005 is likewise P1005, which was not admitted. Similarly, neither D4008 nor D4458 were admitted. Are you willing to withdraw these exhibits from your motion to unlock?

Thanks.

Brittany

From: Jason McManis [mailto:jmcmanis@AZALAW.COM]

Sent: Wednesday, February 9, 2022 6:08 PM

To: Fowler, Jeffrey

Cc: Llewellyn, Brittany M.; John Zavitsanos; Pat Lundvall; Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Blalack II, K. Lee; Phillips, Ellie; Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham; Craig.Caesar@phelps.com; Michael Infuso (minfuso@greeneinfusolaw.com)

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

This Message originated outside your organization.

PX473 was subject to the motion, but PX473A, PX473B, PX473B1, PX473C, PX473D, PX473E, PX473D, and PX473G were not. If I have that wrong, please point me to the page in your sealing papers.

There is no DX5332A on the list, there is a DX5322A. See 11/19/21 Tr. at 53:6. DX5322A was also not subject to your motion to seal. Again, if you think I have that wrong, please point me to the page in your sealing papers.

Do you have any other comments beyond this? If not, sounds like we've got the complete list.

Let me know.

From: Fowler, Jeffrey <jfowler@omm.com> Date: Wednesday, February 9, 2022 at 7:58 PM To: Jason McManis < jmcmanis@AZALAW.COM>

Cc: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>, John Zavitsanos <izavitsanos@AZALAW.COM>, Pat Lundvall <plundvall@mcdonaldcarano.com>, Roberts, Lee <lroberts@wwhgd.com>, Balkenbush, Colby <CBalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Blalack II, K. Lee <lblalack@omm.com>, Phillips,

Ellie <ephillips@omm.com>, Bowman, Cindy S. <CBowman@wwhgd.com>, Polsenberg, Daniel F.

<DPolsenberg@lewisroca.com>, Smith, Abraham <ASmith@lewisroca.com>, Craig.Caesar@phelps.com

<Craig.Caesar@phelps.com>, Michael Infuso (minfuso@greeneinfusolaw.com) <minfuso@greeneinfusolaw.com> Subject: Re: Fremont - Updated Redactions to Trial Exhibits

Jason,

We've taken a look and are a bit confused by some of your exhibit numbers. For example, we don't have a record of an admitted exhibit titled, DX5332A. We only know of DX5322, and that's subject to our motion to seal. There are others (like PX473) that we also believe are subject to our motion that appear to be listed. Would you please take a look and be sure your list is not overinclusive?

Jeff

Jeffrey J. Fowler O'Melveny & Myers LLP 213-430-6404

From: Fowler, Jeffrey

Sent: Wednesday, February 9, 2022 5:46 AM

To: Jason McManis

Cc: Llewellyn, Brittany M.; John Zavitsanos; Pat Lundvall; Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Blalack II, K. Lee; Phillips, Ellie; Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham; Craig.Caesar@phelps.com; Michael Infuso (minfuso@greeneinfusolaw.com)

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

Jason, We will respond to you on this today. Thanks. Jeff

On Feb 9, 2022, at 3:23 AM, Jason McManis < jmcmanis@azalaw.com> wrote:

[EXTERNAL MESSAGE]

Brittany and the Lees, we need a response on this today.

--

Jason McManis AZA 1221 McKinney, Ste. 2500 Houston, TX 77010 713.600.4969 jmcmanis@azalaw.com

From: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>

Sent: Monday, February 7, 2022 9:04 PM

To: Jason McManis; Fowler, Jeffrey; John Zavitsanos; Pat Lundvall

Cc: Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Blalack II, K. Lee; Phillips, Ellie; Bowman, Cindy S.; Polsenberg,

Daniel F.; Smith, Abraham; craig.caesar@phelps.com; Michael Infuso (minfuso@greeneinfusolaw.com)

Subject: RE: Fremont - Updated Redactions to Trial Exhibits

Jason,

We are reviewing and will have a response to you as soon as possible.

Thanks,

Brittany

From: Jason McManis [mailto:jmcmanis@AZALAW.COM]

Sent: Monday, February 7, 2022 4:06 AM

To: Fowler, Jeffrey; Llewellyn, Brittany M.; John Zavitsanos; Pat Lundvall

Cc: Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Blalack II, K. Lee; Phillips, Ellie; Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham; craig.caesar@phelps.com; Michael Infuso (minfuso@greeneinfusolaw.com); TMH010_(Case 34)

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

This Message originated outside your organization.

Jeff (or whoever is responsible from the United side) could we please get a response on this today? Would like to get it on file and out of the way.

From: Jason McManis < jmcmanis@AZALAW.COM> Date: Thursday, February 3, 2022 at 11:06 PM

To: Fowler, Jeffrey <jfowler@omm.com>, Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>, John Zavitsanos <jzavitsanos@AZALAW.COM>, Pat Lundvall <plundvall@mcdonaldcarano.com>

Cc: Roberts, Lee <LRoberts@wwhgd.com>, Balkenbush, Colby <CBalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Blalack II, K. Lee <lbalack@omm.com>, Phillips, Ellie <ephillips@omm.com>, Bowman, Cindy S. <CBowman@wwhgd.com>, Polsenberg, Daniel F. <dpolsenberg@lewisroca.com>, Smith, Abraham <asmith@lewisroca.com>, craig.caesar@phelps.com <Craig.Caesar@phelps.com>, Michael Infuso (minfuso@greeneinfusolaw.com) <minfuso@greeneinfusolaw.com>, TMH010_(Case 34) <TMH010@azalaw.com> Subject: Re: Fremont - Updated Redactions to Trial Exhibits
Jeff,

Following up on yesterday's discussion, please see the attached stipulation and order identifying the exhibits not subject to any party's motion to seal.

Please let us know whether you have any revisions to the list or the language so that we can get this on file.

Thanks, Jason

From: Fowler, Jeffrey <jfowler@omm.com> Date: Thursday, February 3, 2022 at 12:59 PM

To: Jason McManis <jmcmanis@AZALAW.COM>, Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>, John Zavitsanos <jzavitsanos@AZALAW.COM>, Pat Lundvall cplundvall@mcdonaldcarano.com>

Cc: Roberts, Lee <LRoberts@wwhgd.com>, Balkenbush, Colby <CBalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Blalack II, K. Lee <lblalack@omm.com>, Phillips, Ellie <ephillips@omm.com>, Bowman, Cindy S. <CBowman@wwhgd.com>, Polsenberg, Daniel F. <dpolsenberg@lewisroca.com>, Smith, Abraham <asmith@lewisroca.com>, craig.caesar@phelps.com <Craig.Caesar@phelps.com>, Michael Infuso (minfuso@greeneinfusolaw.com) <minfuso@greeneinfusolaw.com>, TMH010 (Case 34) <TMH010@azalaw.com>

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

Thanks, Jason. Let's reserve 4pm CT. (I'm unfortunately not available during the 12:30CT hour.) We'll send around a zoom link. Jeff

Jeffrey J. Fowler O'Melveny & Myers LLP 213-430-6404

From: Jason McManis < jmcmanis@AZALAW.COM>

Sent: Thursday, February 3, 2022 9:07 AM

To: Fowler, Jeffrey; Llewellyn, Brittany M.; John Zavitsanos; Pat Lundvall

Cc: Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Blalack II, K. Lee; Phillips, Ellie; Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham; craig.caesar@phelps.com; Michael Infuso (minfuso@greeneinfusolaw.com); TMH010_(Case 34)

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

[EXTERNAL MESSAGE]

Jeff,

I've got an hour window tomorrow at 12:30 CT/10:30 PT, or otherwise free up at 4pm CT. Some specific responses to your email below in blue.

I know I also received additional documents from y'all yesterday evening, which I will try to look at today.

I've also copied in MultiPlan's counsel regarding the scheduling proposal.

Thanks,

Jason

From: Fowler, Jeffrey <jfowler@omm.com>

Date: Thursday, February 3, 2022 at 10:34 AM

To: Jason McManis < jmcmanis@AZALAW.COM>, Llewellyn, Brittany M. < BLlewellyn@wwhgd.com>, John Zavitsanos < jzavitsanos@AZALAW.COM>, Pat Lundvall < plundvall@mcdonaldcarano.com>

Cc: Roberts, Lee <LRoberts@wwhgd.com>, Balkenbush, Colby <CBalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Blalack II, K. Lee <lblalack@omm.com>, Phillips, Ellie <ephillips@omm.com>, Bowman, Cindy S. <CBowman@wwhgd.com>, Polsenberg, Daniel F. <dpolsenberg@lewisroca.com>, Smith, Abraham

<asmith@lewisroca.com>

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

Jason,

Thanks again for yesterday's productive meet and confer. It's clear we share a common goal of agreeing on as many redactions as we can (without either party waiving any appellate rights) to hopefully reduce the number we would need to present to the Court at the February 10, 2022 hearing.

It sounds like, to help facilitate our negotiations, we have agreed to push the deadline for submitting updated redactions to early next week. We think that will certainly give the parties additional opportunity to reach agreement and narrow the redactions to include in our final submission. To ensure that we use the time productively, we propose a follow-up meet and confer tomorrow morning, February 4, to share an update on the open issues I outline below and walk through some additional pages/documents for which there appear to be avenues to narrow the scope of disputed issues or eliminate dispute. I am generally flexible tomorrow and could start at 9am PT (I am in Los Angeles).

* I suggest that we agree to move the deadline to file updated redactions to Monday (2/7). That gives us a little bit of time to evaluate Defendants' remaining positions and file any responses on Wednesday (2/9), while also working collectively on preparing a worksheet of sorts that identifies any remaining open issues.

Below I briefly summarize below the points on which the parties were able to reach agreement on yesterday's call, plus several open issues that Defendants have agreed to revisit with TH Plaintiffs. Apologies in advance if I have misstated anything—please let me know if that's the case.

Overall, we understand that TeamHealth Plaintiffs' approach to analyzing the proposed redactions has been to accept those redactions that are similar to the M&A and "Atlanta Analysis redactions the Court exemplified as acceptable and are standing on redactions that either appear on pages shown to the jury or relate to topics raised at trial. Examples include merger and acquisitions discussions or similar forward-looking acquisition analysis; sensitive data relating to markets unrelated to Nevada (e.g., Colorado or the Northeast region); non-emergency programs and operations, such as facility, and lab operations; and specific unrelated par and MNRP rates, but not aggregated percentages. This is helpful guidance that we will consider as we raise additional documents in a subsequent meet and confer.

Points of Agreement Between the Parties:

- * P066.0015: the parties agree to deem the motion granted as to the "Lex Hardships "M&A Disruption sections on the bottom third of the page. Correct.
- * P329.0011-13: the parties agree to deem the motion granted as to the numbers from these pages. Correct.
- * P471.0011: the parties agree to deem the motion granted as to this page. Correct.
- * The parties further agree that, where present, the motion is deemed granted as to specific par rates and specific MNRP rates. Aggregated rates, such as percentages of par median, are not within the scope of that agreement. My only response here is that I don't think I agreed to a universal concept that the motion was granted with respect to all specific par or MNRP rates (for example, there may be some pages that were shown at length to the jury in opening, closing, and during trial, that I believe the Court has already denied the motion). But generally speaking, that is the framework I suggested, within which I am willing to consider targeted proposals about specific rates.

Open Issues for Defendants to Provide Further Update:

- * P089.0029-31: Plaintiffs would consider a proposal from Defendants for more targeted redactions to these pages, to the extent that they address states other than Nevada.
- * P266.0010 and 0012: Plaintiffs would consider a proposal from Defendants targeting specific competitive information, such as growth opportunities and "TPA Prospects, on these pages.
- * P268.0005: Plaintiffs would consider a proposal from Defendants to make more targeted redactions as to non-Nevada programs and information about pharmacy.
- * P273.0031-33 and 0035-39: Plaintiffs would consider a proposal from Defendants to make more targeted redactions on these pages, eliminating redactions covering high-level or abstract statements.
- * P294.0002: Plaintiffs are willing to review narrowed redactions to this page.
- * P329.0003-7: Plaintiffs would consider a proposal from Defendants for targeted redactions covering the nonemergency topics on these pages.
- * Yes, we will consider these proposals.

Thanks again.

Jeff

Jeffrey J. Fowler

O'Melveny & Myers LLP 213-430-6404

From: Jason McManis < imcmanis@AZALAW.COM>

Sent: Tuesday, February 1, 2022 3:42 PM

To: Llewellyn, Brittany M.; John Zavitsanos; Pat Lundvall

Cc: Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Fowler, Jeffrey; Blalack II, K. Lee; Phillips, Ellie; Bowman, Cindy

S.; Polsenberg, Daniel F.; Smith, Abraham

Subject: Re: Fremont - Updated Redactions to Trial Exhibits

[EXTERNAL MESSAGE]

Sure, that works. I may have to break a time or two for other calls, depending on how long things are taking. But I'm hoping we can work relatively quickly.

From: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>

Date: Tuesday, February 1, 2022 at 5:34 PM

To: Jason McManis < jmcmanis@AZALAW.COM>, John Zavitsanos < jzavitsanos@AZALAW.COM>, Pat Lundvall < plundvall@mcdonaldcarano.com>

Cc: Roberts, Lee <LRoberts@wwhgd.com>, Balkenbush, Colby <CBalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Fowler, Jeffrey <jfowler@omm.com>, Blalack II, K. Lee <lblalack@omm.com>, 'Phillips, Ellie' <ephillips@omm.com>, Bowman, Cindy S. <CBowman@wwhgd.com>, Polsenberg, Daniel F.

<dpolsenberg@lewisroca.com>, Smith, Abraham <asmith@lewisroca.com>

Subject: RE: Fremont - Updated Redactions to Trial Exhibits

Jason,

We are available for the 9am PT start time that you proposed, although we will need to break from 11:00–12:30PT. We understand you and Craig Caesar plan to convene at 1pm PT/3pm CT. Perhaps we reconvene at that time, and if there is a need to continue our meet and confer, we can do it after we are done with MultiPlan. If this schedule works for you, we will go ahead and send a Zoom link and share it with Craig Caesar.

Thank you for your proposal to resolve the issue of appellate rights. We anticipate that we can respond to it tomorrow during our meet and confer.

Thanks,
Brittany
From: Jason McManis [mailto:jmcmanis@AZALAW.COM] Sent: Tuesday, February 1, 2022 8:42 AM To: Llewellyn, Brittany M.; John Zavitsanos; Pat Lundvall Cc: Roberts, Lee; Balkenbush, Colby; Gordon, Jeffrey E.; Fowler, Jeffrey; Blalack II, K. Lee; 'Phillips, Ellie'; Bowman, Cindy S.; Polsenberg, Daniel F.; Smith, Abraham Subject: Re: Fremont - Updated Redactions to Trial Exhibits
This Message originated outside your organization.
Brittany,
I have a morning conflict until 11am CT/9am PT, but otherwise am agreeable to your suggestion regarding the schedule.
With respect to your point about preserving rights on appeal, I suggest that we handle it as follows: rather than Plaintiffs agreeing to redactions or Defendants agreeing to withdraw redactions, we will simply note that United's motion was either granted or denied with respect to the specific pages that neither party is seeking further clarification on at the final hearing. The final order can reflect that as well.
We will provide our positions on the new proposal as quickly as we are able.
Thanks,
Jason

From: Llewellyn, Brittany M. <BLlewellyn@wwhgd.com>

Date: Tuesday, February 1, 2022 at 12:53 AM

To: Jason McManis <jmcmanis@AZALAW.COM>, John Zavitsanos <jzavitsanos@AZALAW.COM>, Pat Lundvall

<plundvall@mcdonaldcarano.com>

Cc: Roberts, Lee <lroberts@wwhgd.com>, Balkenbush, Colby <cbalkenbush@wwhgd.com>, Gordon, Jeffrey E. <jgordon@omm.com>, Fowler, Jeffrey <jfowler@omm.com>, Blalack II, K. Lee <lblalack@omm.com>, 'Phillips, Ellie' <ephillips@omm.com>, Bowman, Cindy S. <cbowman@wwhgd.com>, Polsenberg, Daniel F.

<dpolsenberg@lewisroca.com>, Smith, Abraham <asmith@lewisroca.com>

Subject: Fremont - Updated Redactions to Trial Exhibits

Jason,

In accordance with the Court's January 31, 2022 scheduling order, I am attaching Defendants' Log of Revised Redactions. Following this email, we will also transmit copies of the trial exhibits that correspond with the log using O'Melveny's secure email system.

Defendants' positions on this log are intended to comply with the Court's January 12, 2022 rulings and are not intended as concessions; Defendants maintain their original positions on redactions and reserve all rights on appeal.

As the log reflects, Defendants have withdrawn redactions to 53 trial exhibits in their entirety on the basis that the Court denied those redactions. For the trial exhibits that remain, the log identifies dozens of other redactions that Defendants have withdrawn as well as many instances where Defendants believe the Court was not explicit and plan to request a more specific ruling. This includes four trial exhibits—PX236, PX329, PX378, PX426—that, although the Court denied redactions in their entirety, Defendants either seek reconsideration or a clarification of the Court's ruling.

The log includes a column for TeamHealth Plaintiffs to state their position on each trial exhibit. To ensure a productive meet and confer on February 2, 2022, Defendants request that TeamHealth Plaintiffs fill-in its positions in advance of the meeting, and identify which redactions, if any, TeamHealth Plaintiffs will agree to accept without further guidance from the Court.

We are available to meet and confer on February 2, 2022 starting at 8am PT. We propose starting at that time and are prepared to spend as many hours as necessary to discuss each exhibit.

Brittany

<image001.png>

Brittany M. Llewellyn, Attorney

Weinberg Wheeler Hudgins Gunn & Dial

6385 South Rainbow Blvd. | Suite 400 | Las Vegas, NV 89118

CSERV

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DISTRICT COURT CLARK COUNTY, NEVADA

Fremont Emergency Services (Mandavia) Ltd, Plaintiff(s)

CASE NO: A-19-792978-B

vs.

DEPT. NO. Department 27

United Healthcare Insurance Company, Defendant(s)

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AUTOMATED CERTIFICATE OF SERVICE

This automated certificate of service was generated by the Eighth Judicial District Court. The foregoing Stipulation and Order was served via the court's electronic eFile system to all recipients registered for e-Service on the above entitled case as listed below:

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Electronically Filed 2/18/2022 1:26 PM

1 2 TRAN 3 4 5 6 DISTRICT COURT 7 CLARK COUNTY, NEVADA 8 FREMONT EMERGENCY SERVICES CASE NO: A-19-792978-B (MANDAVIA) LTD., 9 Plaintiff(s), 10 DEPT. XXVII VS. 11 UNITED HEALTHCARE INSURANCE 12 COMPANY, 13 Defendant(s). 14 15 BEFORE THE HONORABLE NANCY ALLF, DISTRICT COURT JUDGE 16 THURSDAY, FEBRUARY 17, 2022 17 18 TRANSCRIPT OF PROCEEDINGS 19 MOTIONS HEARING RE: 20 21 SEE PAGE 2 FOR APPEARANCES 22 SEE PAGE 3 FOR MATTERS 23 24 RECORDED BY: BRYNN WHITE, COURT RECORDER 25 TRANSCRIBED BY: KATHERINE MCNALLY, TRANSCRIBER

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1	APPEARANCES
2	FOR PLAINTIFF(S):
3	PATRICIA K. LUNDVALL, ESQ.
4	JASON S. McMANIS, ESQ. JANE ROBINSON, ESQ. KEVIN LEYENDECKER, ESQ.
5	JOHN ZAVITSANOS, ESQ. MICHAEL A. KILLINGSWORTH, ESQ.
6	JOSEPH Y. AHMAD, ESQ.
7	FOR DEFENDANT(S) HEALTH PLAN OF NEVADA INC.:
8	COLBY L. BALKENBUSH, ESQ.
9	BRITTANY LLEWELLYN, ESQ. JEFFREY E. GORDON, ESQ.
10	ABRAHAM G. SMITH, ESQ. DANIEL F. POLSENBERG, ESQ.
11	J 1 v 1 0 1 0 1 1 1 0 2 0 2 v
12	FOR DEFENDANT(S) MULTIPLAN INC.:
13	CRAIG CAESAR, ESQ.
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1 LAS VEGAS, CLARK COUNTY, NEVADA THURSDAY, FEBRUARY 17, 2022 11:02 a.m. 2 3 4 THE COURT: Thanks, everyone. Please be seated. 5 All right. Let's take appearances, please, in Fremont versus United. 6 7 MS. LUNDVALL: Good morning, Your Honor. 8 Lundvall, from McDonald Carano, here on behalf of the 9 plaintiffs. 10 MR. ZAVITSANOS: John Zavitsanos, on behalf of the 11 Health Care Providers. 12 MR. AHMAD: Joe Ahmad, also on behalf of the Health 13 Care Providers, Your Honor. 14 MR. LEYENDECKER: Kevin Leyendecker, Your Honor, on 15 behalf of the plaintiffs. 16 MR. McMANIS: Jason McManis, Your Honor, for the 17 plaintiffs. 18 MS. ROBINSON: Jane Robinson, also for the plaintiffs, 19 Your Honor. Good morning. 20 MR. KILLINGSWORTH: Your Honor, Michael Killingsworth, 21 for the plaintiffs. 22 THE COURT: Thank you. 23 MR. SMITH: Good morning, Your Honor. Abe Smith and 24 Dan Polsenberg for defendants. 25 THE COURT: Thank you.

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             And on the phone?
             MR. GORDON: Jeff Gordon, on behalf of the defendants.
 2
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             THE COURT: Thank you. All right. So we're --
 4
             One more? Brittany Llewellyn?
 5
             MR. LLEWELLYN: Sorry. Brittany Llewellyn, also on
    behalf of defendants.
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 7
             MR. BALKENBUSH: And Colby Balkenbush, on behalf of
8
    the defendants, Your Honor.
9
             THE COURT: Thank you. All right. So what is the
    agenda?
10
11
             What are we doing for first today, plaintiffs?
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             MR. LEYENDECKER: I believe we are taking up the
13
    motions related to the cap and the judgment motion, Your
14
    Honor.
15
             THE COURT: That's correct.
16
             MR. POLSENBERG: Whatever you want, Judge.
17
             THE COURT: Is that the order?
18
             All right. So let's --
19
             MR. POLSENBERG: I know they have some -- some of them
20
    have the flights to catch, so that would make sense.
21
             THE COURT: Good enough.
22
             So who will argue then the defendant's motion to apply
23
    the statutory cap?
24
             MR. POLSENBERG: I will, Your Honor. I brought
    Mr. Smith along, just so somebody would laugh at my jokes.
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1 MR. SMITH: But not that one.
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THE COURT: I am usually so formal in the courtroom.

I've become very informal in this case. I hope you are not troubled by that.

MR. POLSENBERG: You know I am always informal.

All right. So this is our motion to establish the application of the caps to the punitive damage award.

And you know, in one of their briefs they said that we thought so little of our waiver argument in the original motion that we had become -- I mean, so little of our argument on the merits, we had to come up with the waiver argument.

So you notice in our reply, we reversed the order.

And let me do that order now, because I think the waiver issue is the most critical issue.

Waiver is very important in Nevada. It's become -it's become increasingly more important and increasingly
applied by the Nevada Supreme Court.

In First Transit versus Chernikoff recently, the Nevada Supreme Court issued a published opinion reversing a case in 2019. And then in 2020, they withdrew that and issued an unpublished order, an authored order by Chief Justice Pickering. That's unusual to have an authored unpublished order.

And what they said there was that the issue on which they have previously reversed wasn't preserved. And the issue

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critical to that opinion was that the defendants there on a wrongful death claim said that the decedent should -- obviously not the issue we have here -- but the decedent should be on the verdict form.
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And the Supreme Court said, Even though you have said that -- and I think actually it was obvious what that meant -- all you are saying then is just add another line on the verdict form. Even though you said that, you didn't propose a verdict form that had the decedent on it, and therefore the issue wasn't preserved.

Here, I think it is far, far more obvious. It's express waiver. It is abandonment. It is disclaiming that the issue exists.

You know, throughout our briefs we cite the November 22nd transcript at page 310. We cite lines 20 to 22, where they expressly withdrew and abandoned the bad faith claim.

But you know, it's far more than those three lines. I mean, it goes on for pages and pages. You know, until about that time frame, I had been pretty quiet during the trial.

And when those issues were coming up, I was making sure --

THE COURT: You are never quiet. You sit there and make faces on everything -- don't ever play poker, because when you disagree with something being said, it shows all over your face. Sorry.

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MR. POLSENBERG: But at least I was quiet. I wasn't on the transcript.
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Oh, and I know, I always tell the truth.

But there I was, I mean, we were having the interchange back and forth. I am even saying, You withdraw what? I wanted the record clear on that. And I wanted the record clear for a number of reasons.

One, it was obvious to me they were withdrawing any bad faith claim, but that wasn't new.

But one of the reasons I was making the record clear is there are some federal cases that say, If there are issues you have in the case that you don't submit to the jury, in certain circumstances then you have the judge decide those.

Now, I can't waive my clients' right to a jury trial in a case like this. So I wanted to make clear that they were not just not submitting the case to the jury, they were abandoning it and withdrawing it. So I don't think there is any bad faith claim whatsoever.

Here is what they said on page 310, We are not pursuing bad faith as a basis for punitive damages.

I think if you go further in the transcript, a couple pages after 310, you will see that they said, We are only going to the jury on four claims: Implied contract, unjust enrichment, the Unfair Claims Practices Act, and the Prompt Payment Act.

So it is clear to me, not only that they dropped the claim, but clearly that they dropped it as a basis for punitive damages.

And if you go through the transcripts on the 22nd and the 23rd, I mean, we are mentioning Allstate Miller all the time. And it's funny because in their surreply brief, they are coming in and saying, Well, we may have given up some forms of bad faith, but not other forms of bad faith.

Now, we discussed during the trial -- and we had many conferences on jury instructions and verdict forms. We discussed Allstate Miller where it was just a bad faith claim that we are talking about in that case. That there were three bases for the bad faith claim. And on appeal, the Supreme Court said at least one of them wasn't any good. And since we didn't break them down as to what they were, we had to try that case over again.

They can't come in here now and say, well, they waived some forms of bad faith but not other forms of bad faith, because they didn't submit any type of bad faith claim to the jury.

They seem to be -- and I will go into it in a little more detail later, or I may be forgiving and not bother everybody with the time it would take for it -- but they seem to be saying that their Unfair Claims Practices Act contained, in paragraph 96, also a claim for bad faith.

Well, that's not true. It didn't. And what they proposed to the jury was not a bad faith claim. I don't think they had evidence on a bad faith claim on a denial of coverage. I don't think that they submitted jury instructions on it. We have a whole set of jury instructions in our three sets of standard forms in Nevada. They didn't propose any of them. And it wasn't on the verdict form.

So even without the express disclaimer, I think they have waived it. And they abandoned it. Even though they are saying now that they are somehow reviving it in paragraph 96 of their second amended complaint, paragraphs 11 through 16 make clear that it is abandoned. It's abandoned in the Joint Pretrial Memo, pages 5 and 6.

Their claim was about to the value of their service. It wasn't about bad faith.

And as I will discuss at the end, they also, in their efforts to avoid removal to federal court and the risk of preemption, they disavowed any reliance on the policy. They disavowed any third-party beneficiary. They were just going on implied contract and unjust enrichment.

I think they have expressly waived it. I think they have abandoned it. I think they made a thoughtful decision not to go forward with bad faith. And I think they are judicially estopped from making the argument there.

In their surreply, they say that I am arguing that

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they weren't the magic words, bad faith. Oh, no, no. I am arguing so much more than that. It was not a bad faith claim, and it was waived.
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And I am not -- what that also did is added another element of error to the whole trial. You know, if you look at NRS 42.005, it created the cap in 1985. It created the exceptions in 1985. And in 1995, it added a provision that said, In insurance bad faith cases, the new definitions, which would be malice, oppression, fraud, conscious disregard, don't apply. That the common law applies.

And the reason for that -- I think the reason for that is pretty easy if you look at the 1995 legislative history.

The NRA, the Nevada Resort Association, came into the legislature with a proposal -- a series of proposals -- reforms on punitive damages. They actually lowered the standard for punitive damages, except for insurance bad faith cases. And the reason they did this is because they wanted provisions that said, Okay. You can be liable without actual intent to injure for punitive damages. And under NRS 41.007, you can vicariously liable under certain circumstances without an intent to harm. And then in the third provision they said that can be insurable.

The casinos wanted the law to be that, at least for most businesses, you could be liable for punitive damages in a way that insurance would cover it all. But they didn't make

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those provisions -- they, meaning the legislature -- didn't make those provisions apply to insurance bad faith cases, because obviously if you've got a case against an insurance company, you don't -- the insurance company doesn't need to worry about insurance for themselves. They could have reinsurance, but I mean, that's really getting into the weeds.
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So the old common law definitions for punitive damages apply in an insurance bad faith case. Since they waived the insurance bad faith case, we didn't ask for the instructions under the old definitions.

Before 1995, I am fairly sure that malice, express or implied — the Nevada Supreme Court expressly said that that meant proof of malice, express or implied. It didn't have the current implied malice standard. You had to show an intent to harm.

And if they went to the jury on a bad faith case, we would have asked for those instructions. I think you would've had to have given those instructions. If you didn't give those instructions, I think we would have a new trial. But it was all gone because they waived that argument.

And I am not saying that this was bad practice. I think it's obvious that these are practitioners of the highest quality. I think this was a knowing and wise decision not to go forward on bad faith for a number of reasons.

But let's look at what we are talking about. What is

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the meaning of 42.005? You know, it is not a catchall provision. It's not any claim involving an insurer. It's -- what it says is it doesn't apply to an action against an insurer who acted in bad faith regarding its obligations to provide insurance coverage.
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Now, plaintiffs come in here -- you know, it reminds me of a scene from a Michael Keaton movie where he takes this word and he breaks it down into syllables. And he gives the meaning of each syllable so that the meaning of the word is completely different when he has done.

And they are doing that here. They are saying, Okay. What you need is three things: There has to be an insurer. Hey, this is an insurance company.

It has to be bad faith. And these guys were bad.

And it has to do with insurance.

But a couple of things wrong with that. I think they are missing some things, and I think they are failing to look at the entire idea of 42.005(2)(a). You have to look at the concepts of insurer and bad faith and coverage altogether.

So we know that it has to be related to an insured's claim on coverage that falls into the definition of insurance bad faith.

Now, what really makes me do -- you know, they come in and they argue, well, you know, look at the legislative intent; look at the clear wording of the statute. If they had

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1 meant to say an insurer, they would have put it in there.
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But, no. Look at 42.005(2)(a) where they said it doesn't apply -- the cap doesn't apply to an action against a manufacturer, distributor, or seller of a defective product. Now, clearly there we are talking about someone who has a claim under the established law of products liability for a defective product and would have it as against a manufacturer or distributor or seller.

If we took their reading that it -- of (2)(b), (2)(a) would mean anyone who distributed a product that happened to be defective would have no cap.

So if I was distributing a product, and it's in the back of my truck, and I am in a car accident, there would be no cap that would apply to me because I apply -- I am a distributor of a product that is defective.

Now, you have got to look at what we are really talking about in the meaning of that.

You know, I had an oral argument once in the Ninth Circuit where Judge Kozinski said, you know, I would either give the Nevada Legislature a D- for writing or an A- for creative writing.

If we look at the language of the statute, it's pretty clear what it is that the legislature is trying to do. And we are looking at coverage, and we are looking at the idea of an insured, and we are looking at bad faith. So --

And we are doing that in the context of the 1989 tort reforms. Remember, 1989 was a huge year for tort reform. And there were a lot of proposals in the legislature, and only two got through that I can figure out.

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One was NRS 41.141, the elimination of several liability with some exceptions; and the other one is here under NRS 42.005, a cap on punitive damages with some exceptions. And I think those exceptions have to be interpreted in light of the legislative intent to do tort reform.

And if you look at the specific legislative history, you know, it is a fascinating legislative history, if you read it. Our friends, Gene Porter and Matt Callister, both abstained from the vote because they were attorneys and, therefore, had a conflict of interest.

But Bob Sader did talk. Apparently he was a different kind of lawyer. So he made the remarks that everybody is quoting.

And so when he is talking about bad faith, it is clear that he is talking about insurance bad faith, not just any breach of the duty of good faith and fair deal. And he is talking about insurers. He is talking about most of the bad faith claims are small damages to the insurers -- health benefits, burglary benefits, disability benefits.

It is clear that the legislature is talking about

insurance bad faith claims by insurers.

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And I think we could look at the idea of bad faith -the words of bad faith in 42.005(2)(b), in light of the
evolved body of case law.

Let me give you another example of what I am talking about. In *State Farm versus All Electric*, and I guess that is about 1983, the Nevada Supreme Court declared the statutes of repose, saying you can't exclude the owners; you can't exclude product manufacturers and suppliers, because that violates equal protection.

Ten years later, in *Wise versus Bechtel*, the Nevada Legislature reenacted -- that year, reenacted the statutes of repose, added owners, kept out material men -- which is a gender bias word -- let's say product suppliers, and it went to the Nevada Supreme Court.

In Wise versus Bechtel, the Supreme Court said we can look at our established evolving law to get the meaning and intent of a statute.

So it makes sense in the '90s for the legislature to have -- when the Supreme Court is interpreting the 1983 legislative change -- to have excluded products manufacturers, because there is a whole body of law that has evolved about products liability.

So let's look at the history of bad faith and insurance bad faith. Now, they take me to task saying that

I've clearly forgotten that bad faith is not just insurance bad faith.

Well, you know, anybody who has been practicing less than I have, when they hear bad faith, they probably think of insurance bad faith. We've had insurance bad faith in Nevada since 1975, U.S. F&G versus Peterson. We saw a big boon in those types of cases in the '80s. In 1984, Shernoff and Levine moved into Las Vegas. And they had their seminars and their law office and their books, and it became a burgeoning practice of law.

So when we hear bad faith, we think of insurance bad faith. It is clear that Bob Sader and the legislative history is talking the peculiar idea of bad faith -- that is insurance bad faith.

Is there another -- is there another form of bad faith? Well, yeah. There is a general idea of a breach of the covenant of good faith and fair dealing. We can see that in *Butch Lewis*, which is actually way after *Peterson*. But that was the case where the Hilton and a boxer had a contract. And the Hilton claimed that they didn't breach the contract, because it wasn't expressly excluded that they couldn't do the particular act. And the Supreme Court said, No. It was the spirit and the concept of the commercial -- even though it was a commercial policy.

So the covenant of good faith and fair dealing was

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used as a way to establish the breach. It's not the same thing as insurance bad faith. Insurance bad faith is a type of tortious breach of a special kind of contract. An insurance policy is a special type of contract. And the relationship between an insured and an insurer is a special relationship.
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You can see that on page 14 of our reply brief, our original reply brief. You can see it in *Insurance Company of the West versus Gibson Tile*. You can see it in *Powers versus USAA*, where the Court said, and the defendant conceded, that an insurance company is akin to a fiduciary to an insured. So there are special duties in those.

I think you can have -- there might be three types of breaches that we are talking about here. In bad faith, you can have a first-party breach that would be bad faith. That's where the insured is bringing the claim. It's either in the first party claim, UM, Med Pay; or it's in a third-party claim where the claimant is suing the insured -- and we all know from Nautilus this is a hot topic right now -- where the claimant is suing the insured, and the insurance company isn't properly defending the insured. That's the first-party relationship between the insured and the insurer. The claimant doesn't have a bad faith claim.

The Supreme Court has repeatedly rejected that in Gunny and Torres.

And here I think we are even in a more remote type of claim. They don't have a claim against the insured. They've disclaimed that notion. They are like a vendor.

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If the insurance company in an auto claim were to send the car out to be repaired, what they owed the mechanic is not a claimant's claim. It's a vendor claim. And bad faith clearly doesn't apply here. The plaintiffs are not insureds -- let me try to zip through some of this.

So even if there is a contract here, the contract is the implied contract for them to be paid. As they say, this isn't a case about benefits. It's a case about rates. So they don't have that kind of special relationship.

In their surreply, they raise the argument about legislative history. Well, you know, they used -- I just -- December, I had a Supreme Court argument while we were in trial. And I used the phrase about the canon of construction, expressio one thing est exclusio everything else.

And they raised that doctrine, but that's not what we are talking about here. We are not talking about the Supreme Court has exactly said certain things fit in here and left out something else. It is implicit. The only way to read the statute is to say that the claim for bad faith has to be by an insured.

I meant it when we argued that their argument seems to be that any action against an insurer would not be subject to

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the cap, would fall under the exclusion.
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You know, now they are coming in and they are saying, what I think amounts to, is any action against an insurer with punitive damages is not subject to the cap.

But, you know, even in -- I rely a lot on *Pioneer*Chlor Alkali, and I've said before why. I mean, we discussed the Unfair Claims Practices Act an awful lot during this trial. I mean, there are very few cases that have stayed in Nevada State Court having to do with the Unfair Claims

Practices Act. Most of those get moved to federal court.

I had a case, ironically called *Federal*, that got to the Nevada Supreme Court, I was hoping they would explain the Unfair Claims Practices Act. They didn't, so we have to rely on the District of Nevada cases.

But in *Pioneer Chlor Alkali*, the federal court made clear that the definition of bad faith is an insurer's denial of cover -- denial or refusal to pay an insured's claim. It is all the interrelationship between the insurer and the insured.

And it has to do with coverage. It just can't be any claim against an insurer. It has to be about coverage.

If you look at the cases, the leading cases on bad faith, we are talking -- just as *Pioneer Chlor* talked about the denial or refusal to pay; *Powers*, it was whether the sinking of the sailboat was a covered event; *Federal*, in the

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case I just mentioned, it had to do whether it fell under property damage or business interruption because they have different policy limits. In Hires, it was a false claim.
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So the issue in a bad faith case has to be that it -that something falls within the policy terms. It doesn't have
to do with value.

And Bartgis is a classic coverage case. Now, in that case, it had to do with an association insurance. That is the worst kind of medical insurance. Because if you belong to an association, like the Clark County Bar Association, you will only opt into that insurance if you can't get it anywhere else by being employed. So that's a bad pool.

So there it was, they wrote the policy to lower the premium. And so as a result, it didn't cover ancillary charges, which meant that if you were in the hospital for a certain period of time, the insurance wouldn't cover your operating room. So that's a classic coverage case.

And coverage is different from the Unfair Claims

Practices Act. As I say, it is a loss within the terms of the policy. We see that in *Zurich American*, we see it in *National Auto versus Havas*.

So I don't think their claims would fall under the traditional notion of bad faith. I don't think they fall under the 42.005(2)(b) exception.

Now, third-party administrators. You know,

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42.005(2)(b) says you have to be an insurer. Pioneer Chlor Alkali talks about what an insurer is.
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And I have got two parties and one other party that sometimes falls into this category.

I have got UHS.

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I have got UMR -- they are administrators. They are bound to administer. They have no obligation to provide coverage. So I do not think they are an insurer. I don't think there is an insurer under *Bartgis*.

Now, Bartgis is a funky case. And I am trying to figure out how they're trying to distinguish Bartgis. They seem to be saying if you look at some law review article in Illinois, Wohlers, the administrator, was actually an agent or a broker. Well, I am not sure what their argument was.

But I do know from Wohlers, that the defendant there -- but realize, the administrator was not liable under the Unfair Claims Practices Act because they weren't an insurer. The Supreme Court said that.

Now, they were liable for some other things, but that's because they were so much more. Sure, they could have been an agent or a broker. The Supreme Court said they were a joint venturer.

If you look at 679A.100, it defines an insurer as every person engaged as a principal. So if they were a joint venturer, they had other forms of liability.

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And in Insurance Company of the West versus Gibson

Tile, the Nevada Supreme Court said that Insurance Company of
the West was not subject to bad faith. I mean, they are an
insurance company. They even have the words insurance company
in their name. But they weren't operating as a provider of
insurance coverage in that case and couldn't be liable for bad
faith, because there they were a surety dealing with the
principal.

So the Supreme Court said that faith doesn't even
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So the Supreme Court said that faith doesn't ever apply in those circumstances.

Now to say that they fall under the statute, plaintiffs are doing a little bit of mix and match. They are saying, well, you know, if you take a little bit of the idea of the Unfair Claims Practices Act and then a little idea of the punitive damages, you have got a big pile that's even higher than the pile we would have to have to show bad faith.

THE COURT: So can I interrupt just for a second?

MR. POLSENBERG: Please.

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THE COURT: Because I don't want to cut you off.

I had to status checks at 11:15, they take about a minute each. Let me just pivot to do that so that those parties can be heard.

And that will give you a chance to regroup so you can give us your best argument.

MR. POLSENBERG: You did warn me of that and I

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    appreciate that, Your Honor.
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             THE COURT: That's all right.
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            [Recess taken from 11:35 a.m., until 11:36 a.m.]
             THE COURT: -- my undivided attention and not worry
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    about those two other cases, Mr. Polsenberg.
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 6
             MR. POLSENBERG:
                              Thank you, Your Honor.
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             So let me deviate for a second back to something that
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    I already talked about.
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             I mentioned their paragraph 96, because it -- and this
    fits in with the mix-and-match concept that I'm talking about.
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    They are saying part of their Unfair Claims Practices Act
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    allegation in their complaint brings up a concept from bad
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    faith.
             I don't think that works. I don't think it works
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    because you've got to go with what you went to the jury on, or
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16
    it is a waived and abandoned, a disclaimed cause of action.
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             And if you look at their allegations under
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    paragraph 96, it's the same -- in their original set of the
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    verdict form, that was Question 6. They had it written into
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    what they were going to propose to the Court. And then they
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    withdrew that, so it was never submitted to the jury.
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    had jury instructions on the concept that they -- that they
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    had originally put forward, but then did not propose when we
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So their mix-and-match concept has to do with what

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settled jury instructions.

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they are claiming is mens rea.
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Now, I will admit that there are requisite states of mind that we are talking about. But the Unfair Claims

Practices Act predicates and the bad faith predicates are completely different. They went to the jury, at least in part, and what the jury could have found for them only on this part, on the failure to effectuate prompt, fair, and equitable settlement of claims. And that's under 686A.310. But that doesn't give you bad faith.

And for bad faith, you have to have no basis for your determination, again on a coverage issue, and you know, or reasonably should know, that you have no basis. And this is a Nevada law going all the way back to [indiscernible], so it has to be both wrong and wrongful, and that's not what you have under an Unfair Claims Practices Act.

And you can't graft the punitive damage determination onto one of the underlying bases for the punitive damage to make it, change it, evolve it, warp it, distorted it, into a bad faith claim, because they are there two different things.

You can't --

And the California cases have said fraud is not the same as bad faith. Bad faith is not required to have punitive damages. The jury could have found punitive damages without finding bad faith.

And in Nevada, we say you don't have -- well, at least

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in Pioneer Chlor, the District of Nevada, you don't have to have bad faith to equal punitive damages. So the fact that they recovered punitive damages is not enough to do this. And especially when you look at what the jury should have been instructed on in a bad faith claim.
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Now, in a footnote in *Countrywide*, Chief Justice

Parraguirre talks about how the 1995 statutes on punitive

damages change the concept of what you need for punitive

damages. And he talked about how the prior cases, like *Maduike* where you can have -- you need some deliberate act,

rather than some unthinking irresponsibility -- that that law
has changed.

Well, It hasn't for bad faith cases. It's a much higher standard for bad faith cases. And they can't claim a requisite mens rea when they didn't go to the jury on bad faith and get instructed on the proper standard for bad faith.

Unfair Claims Practices Act can be a predicate for bad faith. It is a different measure of damages. I have already talked about the federal cases and our Nevada Federal case.

There is a line in one of the briefs -- and it may have been one of ours -- where it seems what they are trying to do is make bad faith a lesser included offense on the Unfair Claims Practices Act. It can't be. The Unfair Claims Practices Act is so much broader that it cannot possibly be a step stone to establish bad faith.

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The jury instruction that they proposed was Jury Instruction 16. The verdict form, I already mentioned, was No. 16.
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Let me take a second to talk about Myers Building case from California. I think all that case said is you have to have a tort action. If you don't have a tort action, you can't have punitive damages. And you can't create a tort action.

Now, they took a line, as we said in the brief that we filed at 11:11 last night. They took a line that said there is no indication of fraud -- a finding of fraud expressed or implied. That is not an open door that says, Well, you can apply the findings of fraud.

Fraud -- they just can't make their bad faith claim when they didn't make the bad faith claim. And under the cases -- under their claim, they don't have a bad faith claim.

Let me end where I picked up, the ERISA waiver, and again, judicial estoppel -- To get out of federal court and to avoid preemption, they kept arguing in their complaint and in papers that this case didn't arise out of a policy. It was arising out of the rate. That the health insurance was irrelevant to their claims because they didn't depend on policies. They were just bringing third-party claims for reimbursement. They denied an assignment of benefits. They denied that they were dependent on coverage.

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So they expressly waived the bad faith claim, and they knew what they were doing. And they can't make out the benefit of the claim, even if they had tried to. So they can't make it out now to fall within the exception for the capital and punitive damages.

Thank you, Your Honor.

THE COURT: Thank you.

The opposition, please.

MR. LEYENDECKER: Thank you, Your Honor. Kevin Leyendecker.

Peas and carrots, Your Honor. Peas and carrots.

When I read the defendant's briefing, whether it was a motion or a reply or the thing last night, and when I hear the presentation today, I think of my childhood and peas and carrots. Because when I was a kid, we had dinner around the table every night. And my mother would put, you need two vegetables, and she liked peas and carrots. I didn't.

And so I would often spread the peas and the carrots to try and confuse her into thinking that I had eaten the peas and carrots, or at least some of the peas and carrots, but she knew better. Kevin, you can't fool me by mixing those things together because I know what's what.

So why am I reminded of that? I am reminded of that because the question before the Court is what is the meaning of the exception of an action against an insurer who acts in

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bad faith regarding its obligation to provide insurance coverage?
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If we heard it once from Mr. Polsenberg, I bet we heard it 100 times -- bad faith claim. They waived their bad faith claim.

The question, Your Honor, that's required by the statute to avoid the cap, is, Have the plaintiffs submitted findings and evidence to support those findings that the defendants engaged in an act of bad faith regarding those obligations?

And the legislature did not say the exception applies to a common law bad faith claim or to this kind of bad faith claim. It is an act of bad faith regarding those obligations.

Now, back to my peas and carrots. Bad faith claim, bad faith claim, bad faith claim -- an act of bad faith. All right. You can't mix things together to make it look like something it's not; right? And that's all that's going on every time we hear, Act of bad claim -- bad faith claim -- excuse me, Your Honor -- bad faith claim.

This idea of a waiver, I gave him high praise for making a run at it, but I think of it in this scenario.

It matters not what I say or Ms. Lundvall says or Ms. Robinson may have said during discussions. Okay? Unless they are going to establish the principles of judicial estoppel which they can't. The first time we heard that

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1 today. And I'm going to address that in a moment.
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I could stand before Your Honor and say, Your Honor, we are not seeking damages or recovery on an Unfair Claims

Practices Act claim. I could say that.

But you know what, if I submit a question on that claim with instructions and the jury says yes and awards damages, the position of the defendants is, Too bad, you said you weren't going to do it.

Actions over words. My words do not prohibit me.

What prohibits me is my actions. And in this case, our

action, consists of the allegation that Ms. Lundvall put way

back when, is defendants have acted in bad faith regarding

their obligation, dah, dah, dah, dah, dah, dah, dah.

That's what the statute says, Acted in bad faith regarding

their obligations.

Now, we characterize that as to pay the reasonable value. But there is no question that those obligations arose out of their having admitted they have an obligation to pay on every single claim. Hard stop. Okay? That's the allegation.

Never withdrawn.

That's the special verdict questions submitted, to which the jury said yes.

And then we actually had to thread three needles here, Your Honor -- three needles.

The first needle arises from paragraph 68 of your

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    order on summary judgment, wherein you said -- and I am
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    paraphrasing -- I am denying your request to dismiss the
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    Unfair Claims Practices Act claim because there is an
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    allegation of an implied fact contract, which effectively puts
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    the plaintiffs in the same position of privity as an insured.
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             So to thread the needle here, we needed that which we
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    threaded, however tight that needle I may be.
             And then we had to thread the needle of, Did they fail
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 9
    to effectuate a prompt, fair, and reasonable settlement, such
    that liability would attach under the insurance code?
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11
             And then we had to thread the needle that says, Did
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    they do that by clear and convincing evidence, with malice,
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    oppression, or fraud in their hearts?
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             Now, it doesn't say in their hearts. That's my
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    characterization. But that's the effect of it.
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             There can be no question that if you thread those
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    three needles, that those are acts of bad faith regarding
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    their obligations to provide insurance coverage.
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             Peas and carrots. Plain reading of the statute.
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             The plaintiff's -- see, I am -- one of the many things
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    I have learned from Mr. Zavitsanos is surround yourself with
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    people who are smarter than you are. Okay?
                                                 At first I was
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    resistant, but then I saw the light. Okay? And so it's true
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    that I am surrounded by an extraordinary group of smart
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people.

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And for me, I have to read and reread and break down things into their plain meaning to understand them.
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So I can understand, okay, this is what we are saying, that's what they are saying. And there is a handful of issues, Your Honor, that illustrate this, I am going to mix the peas and carrots to try and pull over something.

We say just to take the language for what it is, an action brought against an insurer. They want to say, no, no, an action brought against an insurer by an insured. That's not what the statute says.

We say the statute says, Acts in bad faith. They say no, no, that means, Commits common law bad faith in the context of an insured insurance company being sued by an insuree. That's not what the statute says.

They say -- well, let me say this. We say, I readily acknowledge we walked away from the instruction that defined bad faith as the denial of a claim.

Now, people in trial -- there is a lot of moving parts. And the practical reality of being in trial with a group -- and we love our groups -- is that at some point when I am about finished with my witnesses, the same with John or Joe or whoever, we get together with Jane and Pat and whoever, and we work as a team to figure out what is what.

And the idea, when I saw -- I will be honest with you -- when I saw why we resubmit to the jury an instruction

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and a claim premised on the denial of a claim, when Mr. Blalack, lead counsel for the defendants, in opening statement said, We didn't deny anything. We admit we owe.
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So as a legal matter, if I submit two questions, one of which I think establishes the fundamental of acting in bad faith as I have described it, and a separate predicate question that's bad faith that's defined as the denial of a claim, very easy for the jury to say, Well, they didn't deny a claim. The plaintiffs don't dispute that. The defendants admit they didn't deny a claim.

Now I have got an inconsistent verdict, and I have a terrible problem. I can't have that, because I am saying necessarily if I thread the needle of Unfair Claims Practices Act; combined with malice, oppression, and fraud in your heart when you do it; proved by clear and convincing evidence — that necessarily means you have engaged in the lesser form of bad faith. How could it not be? I have proved murder, but that means the defendant is innocent of manslaughter and assault? I don't think so.

That is what we are looking at. Peas and carrots.

Okay. Jury findings. Clear and convincing evidence of the things I just described versus preponderance of the evidence of the breach of the common law duty of good faith and fair dealing.

The truth is both of those things establish bad faith.

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Okay? Both of those would satisfy the statute's requirement of an act of bad faith regarding an insurer's obligations to provide coverage. I acknowledge that.
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The difference is, it's not just the lesser standard. We may have put too big of a burden on our plate, but that is the plate that we made. And if we thread those needles, we have established under the plain meaning an act of bad faith regarding their obligations.

Okay. ERISA. More peas and carrots.

This case is about the rate of payment and not the right to payment. Your Honor has heard many forms of this argument, but the fundamental here is that saying the case is about the rate of payment does not mean that the claim has nothing whatsoever to do with the obligations that ultimately gave rise to the implied in fact contract and ultimately gave rise to the obligations under Nevada law; right? It doesn't.

Their position is, no, no. Since you are saying it is a rate of payment, that means that your claims are unrelated to and can't arise out of or regard an insurer's obligation to provide coverage and pay for the services your client's provided. It's just not that broad; right?

We are not suing over the right, as I say, they have agreed they owe. There is no disputable claim here; right?

Peas and carrots.

42.005, Subsection 5, that is the portion of the

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statute that says, In the action of -- I don't have it in front of me -- but in the action for bad faith, right, you can use the common law. And so this is a classic example of trying to mix things together to confuse what is really going on.
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The legislature has put a high threshold to obtain punitive damages. But to avoid the cap, they are simply saying you don't have to also prove that high threshold.

Proving the lower threshold is enough to avoid the cap.

That's what 42.005 in paragraph 5 means. It would make no sense to put the high threshold to require punitives and also that same high threshold to establish the exception. That's not what the legislature wanted to do when they said we don't want insurance companies, in the context of small dollar claims — and even though ultimately our claims got the big dollars — on an individual basis, they are small dollar claims.

So that's head faith for what I would say are peas and carrots, Your Honor.

I don't really feel the need to respond to what I think are the mischaracterizations of what we say how the statute should be interpreted. And I think that I was very clear -- or that it was very clear when we put in our paper the other day -- let me just a touch on it briefly.

Plaintiffs don't suggest that anyone could sue an

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insurer for bad faith, as defendants are portraying. We have never argued it could be any action of any conceivable nature. It still must meet the statutory requirements of being an action against an insurer who acts in bad faith regarding its obligation to provide insurance coverage, as defendants did here.
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We have never suggested this [indiscernible] for anybody can sue them for anything. You have got to satisfy the statute.

And although I acknowledge that the eyes of the needles may have been small, they were threaded here. No question about that.

Now, judicial estoppel, let me get back to that.

First time we have heard that. And I think there is a reason that we hadn't see that in writing until today, because under Marcuse versus Del Webb Communities, 123 Nev. 278, the Court said, Judicial estoppel should be applied only when a party's inconsistent position arises from intentional wrongdoing or an attempt to obtain an unfair advantage. However, the doctrine of judicial estoppel does not preclude changes in position that are not intended to sabotage the judicial process.

Nothing we did comes remotely close to satisfying that standard. We had an allegation that says, paragraph 96 -- I have covered that. We submitted requests for requests upon

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    that -- upon those very points. That we took out an
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    instruction that was plainly inconsistent with the way the
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    case was tried and the evidence -- there is nothing
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    inconsistent or manipulative about that. That's common sense.
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             You know, I just think that the big -- at 30,000 feet
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    here, the Court, as you know, there is no case out there that
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    fits this pistol, for or against, one direction or the other.
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    There is no secret about that. If there were, we would have
    given them to you or they would have given them to you.
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             What you have got is a statute and clear instructions
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    from a long line of cases that talk about how do you interpret
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12
    a statute, plain and ordinary meaning. You don't get to add
13
    words. You don't get to add limitations. Plain and ordinary
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    meaning.
15
             That's our position. All right. Very
16
    straightforward.
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             I wrote this down because it got my attention.
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    I don't think their claims fall under the traditional notion
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    of bad faith claims.
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             I am not sure that I disagree with that. But I am
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    certain it is entirely irrelevant, because the statute says
    the cap doesn't apply to an insurer who acts in bad faith
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We don't have guidance about what the regarding means.

regarding its obligation to provide insurance coverage; right?

But what we know is we don't have to add words to narrow it

23

24

2.5

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into an area that the defendants would like here. And you don't have to trust me on that. All right?
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2.5

Because if the statute -- if that's really what -- if that's what the statute meant, if the breadth of the statute was limited to claims by insureds, then why would we have all the argument and effort to say, Well, they have waived whatever it is that they have to prove -- because it's undisputed, we are not insureds.

So all -- in my mind, all of the effort to say you have waived this, you have waived that, demonstrates the statute is not limited in the manner in which they say because if that's what the statute was, this would be a very quick and short hearing because, as I say, we are not insureds. That is not a dispute.

On the insurer question, Your Honor, I would just point out, you've heard that before; right? Third-party administrators are not insurers. That issue was decided when you said we're going to submit the claim as to everybody. They are insurers. We have described in the brief why a common sense meaning they are insurers; right?

They rely on a case that says, Well, the insurance agency -- I think that is Wohlers -- Wohlers, the insurance agency, they are not insurers. Well, yes. They are not. They were in a joint venture with the insurer. Okay? So that's not helping them at all.

I would conclude by just saying the last thing that we did, really that Mr. Zavitsanos did before we came, and he told me about it. I had a thing in Oklahoma.

He visited -- so about a year ago, a long-time trial court judge, Daryl Moore, similar to your position but in Houston, joined the firm. And John was describing the case to Judge Moore.

And Judge Moore says, Well, are there cases that speak directly to your point, that go this way in your favor or go that way in the defendant's favor.

John said, Well, no, there is not.

And Judge Moore says, Well, have you made a viable argument that follows the plain, common understanding of the statute? And do you have evidence to back up the findings you have got?

And he said, Well, yes.

He said, Well, John, in that scenario, as a trial judge, I don't have some case that says you've got to go this way or that way. And the plaintiff has made a viable argument, common sense, straightforward argument that follows the statute; and the jury has found in their favor on the relevant issues; then I will let it go. And if the Appellate Court wants to do something about that, so be it.

That's what we ask you to do here, Your Honor. Let the jury's verdict stand. We have got the findings we need.

```
1
    It is a straightforward statute. I wish we had cases to tell
 2
    you what this means or that means, but they don't. All right?
 3
             We know you are charged with understanding and
 4
    interpreting it under its plain language. And when you do
 5
    that, there is no doubt that we satisfied that exception.
             So that's what I've got today.
 6
 7
             If you have questions, I am happy to answer whatever
 8
    they are for as long as you got them.
 9
             THE COURT:
                         Thank you.
10
             And the reply, please.
             MR. POLSENBERG: Thank you, Your Honor.
11
                                                       I will be
12
    brief.
             MS. LUNDVALL: Your Honor, may I make one guick point?
13
14
             THE COURT: You may.
15
                            Invoke the John Zavitsanos's rule of
             MS. LUNDVALL:
16
    argument.
17
                              I'm getting picked on a lot today,
             MR. ZAVITSANOS:
18
    Your Honor.
                 So --
19
             MS. LUNDVALL: One of the things that I couldn't help
20
    but note in the presentation by Mr. Polsenberg is he does a
21
    little bit of inside baseball as to what the Nevada Supreme
22
    Court has or has not done when concerning these cases.
23
             THE COURT: Well, and the historical perspective to be
24
    back to when all of those cases came out and what we thought
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at the time and the push-pull between the legislature and the

2.5

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1 Court.
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2.5

2 Go ahead, please.

MS. LUNDVALL: And I will tell you that, as Justice Pickering was my mentor as a young attorney and I knew the nature of her practice, I followed a lot of those cases across time.

But the argument that I wanted to address, the inside baseball argument that Mr. Polsenberg made, is an argument that I have made -- the exact same argument to the Nevada Supreme Court. They were unimpressed. They were unimpressed and did not accept it.

We had a case in which it --

MR. POLSENBERG: Judge, if she is going to cite unpublished decisions before 2016, I am going to move to strike.

MS. LUNDVALL: It is not an unpublished decision.

THE COURT: I am just going to allow everyone to make their record today.

MS. LUNDVALL: It's not an unpublished decision. And as a matter of fact, there are four published decisions from the Nevada Supreme Court and three from the U.S. Supreme Court dealing with this case.

But what had happened in this case is we had a complaint that did not include a bad faith claim in that. We had jury instruction -- settling of jury instructions. What

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the folks from Texas called their charge, you know, conferences; what we typically refer to as a settling of jury instructions -- for which that they made claims that somehow the statements made during one of those conferences somehow waived then in the argument.
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2.1

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In the case that I tried, when we were settling jury instructions, at that point in time opposing counsel made nearly the exact same statements that were made then in the presentation under those jury instructions.

We are not asserting bad faith claims. Bad faith is not a part of this case. The jury doesn't need to be instructed about bad faith. The jury doesn't need to be made -- have findings -- specific findings on bad faith. Those were the arguments that were made by my opposing counsel.

When we were before the Nevada Supreme Court, their argument focused exclusively on the fact or the claim that they made that my client had acted in bad faith. And so our argument was in response was they had waived that argument. And the Nevada Supreme Court then did not embrace. As I said, it was not impressed with the argument regarding waiver.

What the Nevada Supreme Court looked at was whether or not that the evidence had supported the allegations of bad faith, and whether or not that they could be found implicitly within the jury findings of bad faith.

```
1
             And that's what, in fact, the Nevada Supreme Court
 2
    issued in the FTB versus Hyatt case.
 3
             And so therefore that's kind of the inside baseball
 4
    issue that I wanted to offer to the Court.
                                                 Thank you.
 5
             THE COURT: It's been an hour.
 6
             MR. POLSENBERG: Judge, I am going to be very short.
 7
             THE COURT: You can have all the --
 8
             MR. POLSENBERG: Although I do not appreciate having
9
    somebody come up without it being in the briefs, arguing that
    there is a Nevada decision on point. This is the same thing I
10
    went ballistic over yesterday, so I think that's entirely
11
12
    inappropriate.
             And yeah, I talked about Bartgis. I read the record
13
14
    on Bartgis.
                 I argued Bartgis. But we cited Bartgis in the
15
    sense that we thought it was controlling.
16
             And yeah, in Bartgis, you know, Chief Justice
17
    Pickering and I go way back as appellate lawyers.
18
    know, in 1985, I had a case that said no interest --
19
    prejudgment interest in punitive damages.
20
             And then she had another case that said no
21
    postjudgment interest in punitive damages.
22
             And then in Bartgis, I lost the issue when the Supreme
23
    Court went back to yes, postjudgment interest.
24
             So yeah, she is probably not happy about me -- with me
```

2.5

about Bartgis.

```
Peas and -- we have heard a lot about food today. We have heard about peas and carrots. You know, I was really thinking their argument, while I called it mix and match before, I would think it is apples and oranges, but we really should be talking about meat and potatoes.
```

2.1

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When I was a little boy, I used to go to my Irish grandmother's house. I loved going to her house. She made Irish stew with potatoes, white bread, and butter. Oh, my gosh, it was so amazing. I mean, talk about stick to your ribs. She made it every day, and I only ate there once a week.

My grandfather, not as happy. I heard the story that he once took the Irish stew and threw it against the wall because he had had it with that. But let's have some stick to your meats kind of -- stick to your ribs kind of meat-and-potatoes argument.

Kevin tells us there is no case out there. Yeah, yeah, well, I know. Saying it's a Nevada case at first impression is almost redundant; almost every Nevada case is a case of first impression.

We are looking for the meaning of the statute, and you should take the entire statute into account. They say, I don't get to add words or I don't -- but they don't get to leave words out. We have to look at all of the words. You know, when there's -- until the end of his argument, he wasn't

The standard that he was using, though, about insurance coverage -- I noticed that in their briefs -- the statute says regarding coverage. And -- but they are coming in now and arguing that it's related to or arising out of.

Back when I did worker's compensation, I mean, the classic -- Larson, the classic text on worker's comp, said arising out of and related to is the broadest of causation things.

No. They can't come in here and say, Well, because there was a policy with somebody else, somewhere, that that's enough to fall under the statute.

They said that they took actions, quote, way back when. And then they said they never withdrew them. That's not enough to preserve an issue.

They never submitted it to the jury. They had Question 6 in their original form, that included bad faith, to go to the jury. They withdrew that. They didn't want it to go to the jury.

They had Instruction 16 -- and by the way,

Instruction 16, the way they worded it, they said bad faith

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had to do with a lack of reasonable basis for disputing a
claim.
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They changed the word denial to disputing. They didn't come forward and try to make that argument that that much more liberal approach should be it. Instead they just dropped it all.

Common law, they mentioned should this be a claim under the common law? That's what we have in insurance bad faith. We have the common law. It's established going all the way back to 1975.

And in 42.005, it even says in the last provision that you look at the common law standards for punitive damages.

So yes, looking at the common law of insurance bad faith, that's what we should -- that's what we should be deciding. Wow.

Judge, if you are just going to go with the plaintiffs because that's what some judge in Texas told them to do, I would like you --

Okay. For the record, I just wanted to say, if that is your basis, I would like you to say that that is your basis.

Bartgis -- Bartgis doesn't say agent. They said the person in Bartgis was an agent. And no, Bartgis actually talks about an administrator.

Looks, the cap issue is different from your Unfair

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1
    Claims Practices Act ruling on all of us are insurers.
 2
    That -- this cap issue is much more concentrated and concrete.
 3
             So I am not -- I do not think that your ruling on a
 4
    prior seemingly similar issue controls here.
 5
             You know, they say, well, 42.005(2)(b) would have to
 6
    say, An action by an insured; where (2)(a), which has to do
 7
    with defective products doesn't say that the action has to be
 8
    by someone injured by the product. I mean, it's what I call
9
    passive and personal -- both of those. They are not saying
    who the action is by. But it is clearly implied from the text
10
11
    of both of those provisions.
12
             Let me end with another food reference. They said did
13
    they put too big a burden on their plate? No. They purposely
    put too small a burden by not pursuing the bad faith and by
14
    trying to go with Unfair Claims Practices Act as the
15
16
    substitute.
17
             I don't think they fall under the exception.
18
             Thank you, Your Honor.
19
             THE COURT: All right. So this is the plaintiff's
20
    motion to apply the statutory cap on the --
2.1
             MR. POLSENBERG: Defendant's.
22
             THE COURT: -- punitive damages issue.
23
             Oh, sorry.
24
             MR. POLSENBERG: Defendant's motion. I do it all the
25
    time, Judge.
```

2 the statutory cap. 3 I am going to deny the motion in all respects. 4 First, the plaintiff was so careful about the way they 5 pled this and they way they presented the cases -- the case 6 and the evidence. There was a finding of implied contract. 7 Paragraph 15 of the special verdict form has made a finding. 8 The jury made a finding of malicious fraud, acting with fraud 9 and oppression. That is a much higher standard than bad 10 faith. 11 Finally, the relationship of the parties fits very 12 squarely within the definition of NRS 42.005(2)(b). 13 So the plaintiff's need to prepare findings and 14 conclusions consistent with those findings as well as consistent with your brief. So you may expand my oral 15 16 findings. 17 And, Mr. Polsenberg, of course you'll have the ability 18 to review and approve the form of order. No competing orders. If you have an objection, file that, and I will take it from 19 20 there.

THE COURT: All right. Defendant's motion to apply

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25

THE COURT: So what do we still have to do today? I know there is a cross-motion for entry of judgment. And then they have the redaction issue.

MR. LEYENDECKER: We have the motion on the judgment,

MR. POLSENBERG: Very good. Thank you, Your Honor.

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1
    Your Honor, which I think would be shorter than what we have
 2
    had so far.
 3
             And I will let Mr. McManis raise the other. I think
 4
    perhaps they drilled down to maybe three documents they wanted
 5
    to talk about --
 6
             THE COURT:
                         Great.
 7
             MR. LEYENDECKER: -- before the end of the process to
 8
    be addressed.
 9
             THE COURT: I did see another index that just got
    filed yesterday, but that's from the defendants.
10
11
             MR. LEYENDECKER:
                               Yeah.
12
             THE COURT: All right. So Mr. McManis.
13
             MR. McMANIS: Nothing to say right now, Your Honor,
14
    other than I have been working with Mr. Gordon.
    identified three documents they may want to discuss today.
15
16
             I think there is a decent chance we are all the way
17
    resolved, or virtually all the way resolved with two of those.
18
    And then there may be a third that we have a couple pages to
    talk about. But it is pretty limited, is my understanding.
19
2.0
             THE COURT: Good enough.
2.1
             Mr. Gordon, your response, please.
22
             MR. GORDON: That's correct, Your Honor.
23
             I am corresponding with Mr. McManis today.
24
             What we intended to do today was to show you three
```

documents: Plaintiff's 1001, Plaintiff's 462, and Defendant's

2.5

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5005.
1
 2
             Based on our exchange I am having with Mr. McManis, it
 3
    looks like we are close to being able to make some headway on
    those documents that we may just have a few issues to bring to
 4
    Your Honor's attention with us today, or, you know, later. We
 5
 6
    can figure that out. But we are changing and looking at it
 7
    right now. And we can report back, I think you're going to
 8
    take a lunch break, so we can report back after that break.
 9
             And I also advised Mr. McManis that with respect to
    273 and 288, based on Your Honor's rulings yesterday, I will
10
11
    take a look at the remaining pages on those exhibits, and we
12
    can do a meet and confer on those to try to meet some -- make
13
    some headway on those issues, based on your guidance of
14
    yesterday.
15
             THE COURT: Thank you.
16
             Thank you all for your professional courtesy.
17
             So I would like to -- we have been on the bench since
18
          We have had a few breaks, but not enough. It is 12:18.
19
    Let's be back at 12:50, that gives you half an hour.
```

21 well.22 Does that work for everybody?

And who has flights and when?

MR. POLSENBERG: Don't worry about that, Your Honor.

25 We are fine.

20

23

And I will look at the documents over the break as

```
1
             MR. LEYENDECKER: I think they are, like, 7:20, Judge.
             THE COURT: Oh.
                              Our legal community just lost one of
 2
 3
    our leaders a couple of weeks ago. The funeral is today at
 4
          I had hoped to be able to go, or at least it is being
    streamed from his church. So if we can do that, great. And
 5
 6
    if not, it's fine.
 7
                              I would like to go too, Judge.
             MR. POLSENBERG:
 8
           [Recess taken from 12:18 p.m., until 12:58 p.m.]
 9
             THE COURT: Thanks, everyone. Please be seated.
10
             Now, we don't have everyone. Is that okay?
             MR. LEYENDECKER: I'm sorry, Your Honor. I didn't
11
12
    hear you.
13
             THE COURT: We don't have everyone. Is that okay?
                               That's fine. We are fine. We want
14
             MR. LEYENDECKER:
15
    to move along so that the Court an Mr. Polsenberg can get to
16
    the event.
17
             THE COURT: Well, if we can. You know, I --
18
             MR. LEYENDECKER: Those things are important, so we
19
    are going to -- we are ready to go.
20
             THE COURT: My first obligation is to you guys --
2.1
             MR. LEYENDECKER: We are ready to go.
22
                        -- so I should not have said that.
             THE COURT:
23
             MS. ROBINSON: We appreciate it, Your Honor. Thank
24
          But we are good.
    you.
25
             THE COURT: Okay. So it's the cross-motion for entry
```

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1
    of judgment.
 2
             MR. LEYENDECKER: Yes, Your Honor. May I proceed?
 3
             THE COURT: Please.
 4
             MR. POLSENBERG: Do you want me to go first because I
 5
    can narrow it way down.
 6
             MR. LEYENDECKER: Narrow down what you want. That's
 7
    fine.
 8
             MR. POLSENBERG: So I think the three issues are
9
    election of remedies.
10
             THE COURT: Agree to postjudgment interest, fees, and
11
    costs.
12
             MR. POLSENBERG:
                             Yes. So they have submitted a new
13
    judgment form, which I think raises more issues on the Prompt
14
    Pay Act. But you know what, I can just save that for
    postjudgment briefing. So all of the issues related to the
15
16
    Prompt Pay Act, I can wait for that.
17
             MR. LEYENDECKER: I don't know what those issues are.
18
             MR. POLSENBERG: I have serious doubts whether you get
19
    postjudgment interest on prompt pay. And I haven't raised the
20
    calculation of the prompt pay damages. If we have an issue
21
    with that, we will just raise that in the postjudgment
22
    motions.
23
             MR. LEYENDECKER: Okay. Your Honor, this is the
24
    plaintiff's -- Kevin Leyendecker for the plaintiffs, On our
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cross-motion for entry of judgment.

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I read the defendant's response as not having any objection or contesting the calculations that are culminated in the postjudgment and that are contained on the spreadsheet that I attached as part of the motion.
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And so hearing today that, well, we are not sure Kevin's math is right is the first time I have heard that. They certainly didn't lodge that objection or give a hint of it in their opposition.

Perhaps he is saying, Well, there is an issue with you can't sign it until the 23rd. And when I modified it to correctly reflect that Nevada law says postjudgment interest is owed, as provided by law, until paid, as opposed to specific amounts, which is what I am accustomed to -- I fixed that. So I followed their complaint there and fixed it.

The other thing I did, Your Honor, was to say, Okay, this judgment is entered and effective as of the 23rd.

I am just trying to make it clear that this judgment, the calculations are through February 23rd, that I understand they are not complaining about it -- at least at this point.

And so all I was trying to do -- it matters not to me whether you wait until the 23rd to sign it. It just matters not. The calculations are through the 23rd.

The inconsistent remedy point, Your Honor, I think is controlled by the case J.A. Jones Construction. And I apologize, I didn't write the full cite down. It is a 2004

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Nevada Supreme Court case that says, The concept of election of remedies only applies -- excuse me -- yeah. Election remedies only applies to -- when there is an inconsistent remedy.
```

There is no inconsistent remedy being sought here. The remedy for the prompt pay of those statutory interest damages which are reflected on the attachment to the motion for judgment.

I am not asking for more than -- for double recovery, if you will, of the actuals. We have asked for the actual damages one time that are fairly -- those, in my judgment, is that fair remedy, whether it's the implied contract, the unjust enrichment, or the Unfair Settlement Practices Claim. And so there's nothing inconsistent about that.

The rule is not if you have different theories of recovery. It is inconsistent remedy; right? And the remedy is the same for all three.

And in light of the -- so I think the J.A. Jones case controls. And there is no inconsistent remedy problem.

The only other thing that I recall the defendants were objecting to is that I had a commentary at the end that essentially said the Court was finding that the plaintiffs would be entitled to fees and costs in the amount to be determined later.

I don't have a lot of heartburn over whether it says

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it or not. I don't think there is any harmful error there.
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Because I expect, in light of this morning's ruling and in light of the jury's findings, prevailing on the prompt pay that the plaintiffs are going to be entitled to some attorney's fees and costs.

And so I think the form of the judgment that I have submitted is consistent with Nevada law. And in light of this morning's rulings ought to be entered on the 23rd, which is the date that the calculations run through, just so everything is tied down to the penny.

And on that basis, we would move that the Court do so. THE COURT: Thank you.

MR. POLSENBERG: Judge, you know, and we have set out the block quote from the transcripts where we have talked about the waterfall approach.

And, you know, I had never heard that expression in this context before. And -- but that is, I mean, we all agreed that was Nevada law, that you elect a remedy at the point the judgment is entered.

There could be -- it's not an inconsistency that I am arguing about. It could be different approaches. In other words, some remedies might be -- just as an example, some could be dischargeable and others wouldn't be dischargeable.

There could be all kinds of implications. I've always --

THE COURT: Well, dischargeable like in a Chapter 11

```
1
    context?
 2
             MR. POLSENBERG:
                              Yeah.
 3
             THE COURT: They would be reorganized.
 4
             MR. POLSENBERG: Well, I am just talking about -- I am
 5
    not saying this is going to happen to my clients. I mean,
    there is no way that is happening to our client -- my clients.
 6
 7
             THE COURT: I don't know. I did an Exxon file --
 8
             MR. POLSENBERG: Excuse me?
 9
             THE COURT: Exxon file for strategic reasons back in
10
    the '80s.
11
             MR. POLSENBERG: Well, yeah. And sure. And General
12
    Motors did.
13
             But I don't think there is any risk of that happening
14
    here. I was just raising that -- I mean, everybody should
    forget I raised it. I am just talking in the abstract about
15
16
    there are different consequences based on causes of action.
17
             So that's why I think they have to elect a remedy.
18
             THE COURT: And I don't believe they have to.
19
    going to overrule your objection.
20
             Do you have more for the record on that?
21
             MR. POLSENBERG:
                             Just on the Prompt Pay Act, I will
22
    reserve any issue I have on that until postjudgment motions.
23
    I may not have any.
24
             THE COURT: Good enough.
25
             MR. POLSENBERG: And yeah, I do have a problem with
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1
    you saying you're awarding fees when you haven't decided that.
 2
    I mean, not to be --
 3
             THE COURT: You can say you are going to make a
 4
    request for fees and costs.
 5
             MR. LEYENDECKER: That's fine, Your Honor.
             I mean, as I say, I don't have a lot of heartburn over
 6
 7
    that language.
 8
             I have a little bit of heartburn over the suggestion
    by Mr. Polsenberg that he can essentially impliedly consent to
9
    the accuracy of the prompt pay damages, in his response.
10
11
    come in here and say, Well, I might later contest those.
12
    think that's going to be a day late and a dollar short, if he
13
    wants to say Kevin's math is no good.
             MR. POLSENBERG: Well, I don't think it would be late,
14
15
    because most judgments are submitted to the judge.
16
             But the main problem I have is I have -- the way they
17
    have reworded the interest issue, I have doubts whether they
18
    get postjudgment -- the way they worded it, whether they get
19
    postjudgment interest on prompt pay interest. So I have to
20
    research that.
21
             So -- and all I am saying -- you know -- we are
22
    obviously making a lot of postjudgment motions. I may make
23
    that; I may not make that.
24
             THE COURT: Good enough. All right. So normally we
```

wouldn't have a hearing on the entry of a judgment --

2.5

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1
             MR. POLSENBERG: Right.
             THE COURT: -- because the winning party would prepare
 2
 3
    it, give the other side a chance to review it, and if there is
 4
    an objection.
 5
             So I would suggest that make the revisions we talked
 6
    about here today. And make sure that Mr. Polsenberg or
 7
    someone on his team has the ability to review and approve the
 8
    form of that -- whoever he designates.
 9
             And if -- again, if you have an objection in the form,
    file the objection, preserve your record. And I will take it
10
11
    from there.
12
             MR. POLSENBERG: Thank you, Your Honor.
13
             MR. LEYENDECKER: Understood. And we'll do.
14
    you.
15
             THE COURT: Thank you.
16
             All right. Now, Mr. Gordon and Mr. McManis? Put it
17
    back to --
18
             MR. McMANIS: Yes, Your Honor. There may be one
    document that Mr. Gordon wants to discuss.
19
20
             THE COURT: Sure.
21
             MR. McMANIS: I will leave that to him. But I think
22
    we have worked through the rest of the issues, at least for
23
    the time being.
24
             And the plan, if Your Honor is okay with this, would
```

be to submit -- once we applied Your Honor's rulings so far to

2.5

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1
    the documents, if there are any remaining disputes, to submit
 2
    those on an index with the parties' position for Your Honor to
 3
    break the tie on and leave it at that.
 4
             THE COURT: Good enough.
 5
             All right. So, Mr. Gordon, walk me through what do we
    need to talk about.
 6
 7
             MR. GORDON: Your Honor, I think Mr. McManis and I
 8
    agree on the procedure. And what we are proposing is to table
9
    any presentation to you today.
10
             He and I will continue to meet and confer. I will get
11
    him some comments to documents. And he and I have to go back
12
    and forth on some proposed redactions and responses.
13
    intend to do that next week.
             And as he stated, he and I will agree on a form of
14
    submission and get that to you the week after next, which puts
15
16
    me around the first week of March.
17
             THE COURT: That's great.
18
             MR. GORDON: And if there is something that, in
19
    between, where we need to raise to Your Honor's attention, we
20
    will do so.
21
             But I think we have an agreement, in theory, for that
22
    kind of proposal which would alleviate the need to do anything
23
    before you today.
24
             THE COURT: Anything at all to do today?
```

MR. GORDON: Is that accurate, Kevin? I mean, Jason.

25

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1
    I'm sorry.
 2
             MR. McMANIS: I think the only question is whether you
 3
    wanted to raise Plaintiff's Exhibit 1001 today or not, and
 4
    that is up to you. So --
 5
             MR. GORDON: No. Let's hold that. Let's see where
 6
    you and I can make headway on that.
 7
             THE COURT: Thank you both for your professional
 8
    courtesy.
9
             MR. McMANIS: I think it would be ideal if we could
    work out a time frame on this to provide the submission. We
10
11
    do the written -- provide the written submission on anything
12
    that's remaining by the end of next week.
13
             THE COURT: Is that date acceptable to you,
14
    Mr. Gordon?
15
             MR. GORDON: I prefer the week after, Kevin -- I mean,
16
    I keep calling him Kevin. I am so confused with peas and
17
    carrots.
             MR. LEYENDECKER: I have that effect on a lot of
18
19
    people there.
20
             MR. GORDON: Yes, you do. Yes, you do.
21
             With Jason, I think next week, you know, holiday
22
            He and I will work to see if we can continue our meet
    Monday.
23
    and confer. The following week, we will then have a
```

submission to you, which I think is, doing lawyer math here,

the 3rd or 4th of March, around then.

24

2.5

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1
             That works for defendants, if that works for Your
 2
    Honor.
 3
             THE COURT:
                         That's fine with me. It's your case.
 4
    When you guys agree, I say okay.
 5
             MR. GORDON: Thank you, Your Honor.
 6
             THE COURT: All right.
 7
             Reduce that to writing if you will, please.
 8
    that to writing, please.
 9
             MR. McMANIS: Yes, Your Honor. We will.
             THE COURT: Thank you.
10
             MR. POLSENBERG: And, Judge, you and Mr. Roberts
11
    talked about a stay. I just want to clarify.
12
             THE COURT: My thought on it, after sleeping on it --
13
    on the reductions, is to enter an interim order which I would
14
    stay for 30 days for what's decided now, at least to give you
15
16
    a jump on making sure it gets to a higher court.
17
             And if they decide to entertain it, they will give you
18
    a longer stay.
19
             MR. POLSENBERG: Very good. Thank you, Your Honor.
20
             THE COURT: All right. Let's talk about transcript.
             MR. POLSENBERG: Just so I can be clear, that would be
21
22
    30 days from the entry of the interim order.
23
             THE COURT: Notice of the entry of the order.
24
             MR. POLSENBERG: Thank you, Your Honor.
25
             THE COURT: Okay. Let's talk about the transcript
```

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1 from yesterday and today.
```

Do any of you think that you will need to redact any part of it?

MR. McMANIS: I think certainly not from today.

From the plaintiff's position, as to yesterday, I would say the same. But they may have -- if anything is to be redacted, that would be at United's request.

THE COURT: And, Mr. Gordon, do you -- have you had a chance to confer with co-counsel or do you want that chance?

MR. GORDON: Yeah. I haven't conferred with co-counsel on that. But we can do that and provide an answer.

I mean, my sense is the transcript with respect to the motion to seal, we probably would not want to make that public, but I will defer to Dan on his thoughts.

MR. POLSENBERG: Yeah. I don't think -- I think we would have to, at least in the interim, stay the transcript from yesterday. I can't imagine there is anything today we need to seal.

THE COURT: All right. So if the two of you can agree on something, great. If not, I will make time for you next week to get in. Even though I expect to be in jury selection Tuesday and Wednesday and probably Thursday, those would be the most challenging days. But the other thing we can also do is do it after hours, if you need to, and you are willing to pay for the overtime.

```
1
             Just give us a heads up if you're going to go that
 2
    way, because I have to -- these guys have families.
 3
             MR. POLSENBERG: Thank you, Your Honor.
 4
             THE COURT: I do too, but I don't have kids.
 5
             MR. POLSENBERG: I have a dog.
             THE COURT: I have three cats.
 6
 7
             All right. What else do we have to take up today?
 8
             Nothing.
 9
             MR. POLSENBERG: I think that's it.
10
             THE COURT: I see that blank look on everybody's face.
11
    Oh, my gosh.
12
             MR. LEYENDECKER: Well, I am still a little dazed from
13
    the two Coney dogs I had at lunch, so it could be that.
14
             MR. POLSENBERG: Food. Food. Food. Food.
15
             THE COURT: Stay safe and healthy, everybody, if you
16
    are traveling or whatever.
17
                               Thank you, Your Honor.
             MR. LEYENDECKER:
18
             MR. POLSENBERG: Thank you, Your Honor.
19
                  [Proceedings concluded at 1:12 p.m.]
20
21
22
23
24
25
```

ATTEST: I do hereby certify that I have truly and correctly transcribed the audio/video proceedings in the above-entitled case to the best of my ability.

Katherine McNally

Katherine McNally

Independent Transcriber CERT**D-323 AZ-Accurate Transcription Service, LLC

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FREMONT EMERGENCY SERVICES (MANDAVIA), LTD., a Nevada professional corporation; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C., a Nevada professional corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST EMERGENCY MEDICINE, a Nevada professional corporation,

Plaintiffs,

vs.

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LEWIS ROCA

Case No.: A-19-792978-B Dep't 27

[Hearing Requested]

OBJECTION TO PLAINTIFFS' PROPOSED JUDGMENT AND ORDER DENYING MOTION TO APPLY STATUTORY CAP ON PUNITIVE DAMAGES

United HealthCare Insurance Company, a Connecticut corporation; United Health Care Services Inc., dba UnitedHealthCare, a Minnesota corporation; UMR, Inc., dba United Medical Resources, a Delaware corporation; Sierra Health and Life Insurance Company, Inc., a Nevada corporation; Health Plan of Nevada, Inc., a Nevada corporation,

Defendants.

Defendants object to the proposed judgment for the reasons stated in their opposition to plaintiffs' cross-motion for entry of judgment, filed February 10, 2022, and during oral argument on February 16, 2022. Defendants also object to the proposed order denying application of the statutory caps ("proposed order") because the proposed order includes findings that were not raised before the Court.

I.

THE JUDGMENT DOES NOT ELECT A REMEDY

The amount judgment is now clear: plaintiffs' recovery in this action is the face value of the proposed judgment, along with post-judgment interest under NRS 17.130(2) (i.e., at the prime rate plus 2%).

But still a mystery is under *which* theory plaintiffs are awarded judgment. "[A] plaintiff can recover only once for a single injury even if the plaintiff asserts multiple legal theories." *Elyousef v. O'Reilly & Ferrario, LLC*, 126 Nev. 441, 443–44, 245 P.3d 547, 549 (2010). And while a plaintiff is not required to choose between alternative remedies before the verdict (in case the jury awards more under one theory than another), the plaintiff must do so after. *J.A. Jones Const. Co. v. Lehrer McGovern Bovis, Inc.*, 120 Nev. 277, 289, 89 P.3d

¹ Defendants also reserve all rights to challenge the judgment—as well as all orders merged therein and all issues leading to its entry—in post-judgment motions and on appeal.

1009, 1017 (2004).

Here, plaintiffs asked the jury to award damages under multiple theories—contract, unjust enrichment (i.e., in the absence of a contract),² the Unfair Claims Practices Act, and Nevada's Prompt Pay Acts. Yet months after the verdict, plaintiffs have yet to elect a remedy. If plaintiffs are unwilling, this Court should pick the theory for them.

LEWIS 🔲 ROCA

II.

THE PROPOSED ORDER GOES BEYOND THE SCOPE OF DEFENDANTS' MOTION

Following the oral ruling denying defendants' motion to apply the statutory cap on punitive damages, this Court instructed plaintiffs to prepare findings of fact and conclusions of law. However, plaintiffs' proposed order asks this Court to enter an order that exceed the breadth of the motion at issue.

First, the proposed order suggests that under a theory of unjust enrichment, plaintiffs were required to prove, and did in fact prove, defendants' actions lacked any reasonable basis. (See proposed order, ¶ 10.) Yet nothing in the jury instructions even hinted that unjust enrichment required that sort of proof. (TR11/29/21 126-132.) And the jury did not make such a finding. (Ex. 1, App'x in Support of Plf's Opposition.) For the proposed order to issue such a finding would be inconsistent with the jury's actual findings. Consequently, neither the opposition nor sur-reply to defendants' motion addressed unjust enrichment as a basis for escaping application of the cap in NRS 42.005(1). Any findings on this basis ask the Court to issue an order based on arguments that were not considered or addressed by either party.

² "The doctrine of unjust enrichment or recovery in quasi contract applies to situations where there is no legal contract." *Leasepartners Corp. v. Robert L. Brooks Tr. Dated November 12, 1975*, 113 Nev. 747, 756, 942 P.2d 182, 187 (1997) (internal quotation marks and citation omitted).

Second, the proposed order asks this Court to draw inferences from the evidence presented that the jury could determine constituted malice, oppression, and/or fraud. (See proposed order, ¶ 21.) None of this evidence was raised in the briefs or presented during oral argument. Indeed, even the order does not specify the evidence: it just states the conclusions plaintiffs hope to draw from what plaintiffs assure us was "expressly or inferentially" testified to. In other words, plaintiffs ask this Court to issue an order based on evidence and inferences it did not consider in its ruling. Moreover, the inclusion of these specific findings at this juncture denies defendants any meaningful opportunity to contest these inferences. Including this evidence is particularly inappropriate given that it also includes assertions regarding compensatory damages—such as the assertion that "United has an obligation to pay billed charges"—that the jury expressly rejected in their compensatory award.

The proposed order asks this Court to draw inferences to issue a written order that exceeds the scope of the arguments raised in the briefing and at oral argument. The court should decline to issue an order that addresses legal arguments and factual findings that were not properly raised before it. For the foregoing reasons, defendants object to plaintiffs' proposed order.

LEWIS ROCA

Dated this 3rd day of March, 2022.

D. LEE ROBERTS, JR. (SBN 8877)

Brittany M. Llewellyn

(SBN 13527)

COLBY L. BALKENBUSH, (SBN 13066)

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LEWIS ROCA

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By /s/ Abraham G. Smith _

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Attorneys for Defendants

CERTIFICATE OF SERVICE

I hereby certify that on the March 4, 2022, service of the above and foregoing "Objection to Plaintiffs' Proposed Judgment" was made upon each of the parties via electronic service through the Eighth Judicial District Court's Odyssey E-file and Serve system.

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Judge David Wall, Special Master Attention: Mara Satterthwaite & Michelle Samaniego **JAMS** 3800 Howard Hughes Parkway, 11th Floor Las Vegas, NV 89123 msatterthwaite@jamsadr.com msamaniego@jamsadr.com

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LEWIS ROCA

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Steven D. Grierson CLERK OF THE COURT **NJUD** 1 Joseph Y. Ahmad (admitted *pro hac vice*) Pat Lundvall (NSBN 3761) 2 Kristen T. Gallagher (NSBN 9561) John Zavitsanos (admitted *pro hac vice*) Amanda M. Perach (NSBN 12399) Jason S. McManis (admitted pro hac vice) 3 McDONALD CARANO LLP Michael Killingsworth (admitted *pro hac vice*) 2300 West Sahara Avenue, Suite 1200 Louis Liao (admitted *pro hac vice*) 4 Las Vegas, Nevada 89102 Jane L. Robinson (admitted *pro hac vice*) Telephone: (702) 873-4100 P. Kevin Leyendecker (admitted *pro hac vice*) 5 plundvall@mcdonaldcarano.com Ahmad, Zavitsanos, Anaipakos, Alavi & kgallagher@mcdonaldcarano.com Mensing, P.C. 1221 McKinney Street, Suite 2500 aperach@mcdonaldcarano.com 6 Houston, Texas 77010 7 Justin C. Fineberg (admitted *pro hac vice*) Telephone: 713-600-4901 Rachel H. LeBlanc (admitted pro hac vice) joeahmad@azalaw.com Jonathan E. Siegelaub (admitted pro hac vice) jzavitsanos@azalaw.com 8 Lash & Goldberg LLP jmcmanis@azalaw.com Weston Corporate Centre I 9 mkillingsworth@azalaw.com 2500 Weston Road Suite 220 lliao@azalaw.com Fort Lauderdale, Florida 33331 jrobinson@azalaw.com 10 Telephone: (954) 384-2500 kleyendecker@azalaw.com jfineberg@lashgoldberg.com 11 rleblanc@lashgoldberg.com jsiegelaub@lashgoldberg.com 12 Attorneys for Plaintiffs 13 DISTRICT COURT 14 CLARK COUNTY, NEVADA 15 FREMONT EMERGENCY SERVICES Case No.: A-19-792978-B (MANDAVIA), LTD., a Nevada professional Dept. No.: XXVII 16 corporation; TEAM PHYSICIANS OF NEVADA-MANDAVÍA, P.C., a Nevada professional 17 corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST EMERGENCY NOTICE OF ENTRY OF 18 MEDICINE, a Nevada professional corporation, **JUDGMENT** 19 Plaintiffs, 20 VS. 21 UNITED HEALTHCARE INSURANCE COMPANY, a Connecticut corporation; UNITED 22 HEALTH CARE SERVICES INC., dba UNITEDHEALTHCARE, a Minnesota corporation; 23 UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA 24 HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF 25 NEVADA, INC., a Nevada corporation, 26 Defendants 27 Please take notice than a Judgement was entered on March 9, 2022, a copy of which is 28 attached hereto.

013168

DATED this 9th day of March, 2022. 1 2 McDONALD CARANO LLP 3 By: /s/ Kristen T. Gallagher Pat Lundvall (NSBN 3761) 4 Kristen T. Gallagher (NSBN 9561) Amanda M. Perach (NSBN 12399) 5 2300 West Sahara Avenue, Suite 1200 Las Vegas, Nevada 89102 6 plundvall@mcdonaldcarano.com 7 kgallagher@mcdonaldcarano.com aperach@mcdonaldcarano.com 8 P. Kevin Leyendecker (admitted pro hac vice) 9 John Zavitsanos (admitted pro hac vice) 10 Joseph Y. Ahmad (admitted pro hac vice) Jason S. McManis (admitted pro hac vice) 11 Michael Killingsworth (admitted pro hac vice) Louis Liao (admitted pro hac vice) 12 Jane L. Robinson (admitted pro hac vice) Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing, P.C 13 1221 McKinney Street, Suite 2500 14 Houston, Texas 77010 kleyendecker@azalaw.com 15 joeahmad@azalaw.com jzavitsanos@azalaw.com 16 jmcmanis@azalaw.com mkillingsworth@azalaw.com 17 lliao@azalaw.com 18 jrobinson@azalaw.com 19 Justin C. Fineberg (admitted *pro hac vice*) Rachel H. LeBlanc (admitted pro hac vice) 20 Jonathan E. Siegelaub (admitted pro hac vice) Lash & Goldberg LLP 21 Weston Corporate Centre I 22 2500 Weston Road Suite 220 Fort Lauderdale, Florida 33331 23 Telephone: (954) 384-2500 jfineberg@lashgoldberg.com 24 rleblanc@lashgoldberg.com jsiegelaub@lashgoldberg.com 25 26 Attorneys for Plaintiffs Fremont Emergency Services (Mandavia), Ltd., Team Physicians 27 of Nevada-Mandavia, P.C. & Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine

CERTIFICATE OF SERVICE

2	I HEREBY CERTIFY that I am an emp	oyee of McDonald Carano LLP, and that on this 9tl	h		
3	day of March, 2022, I caused a true and correct copy of the foregoing NOTICE OF ENTRY OF				
4	JUDGMENT to be served via this Court's Electronic Filing system in the above-captioned case,				
5	upon the following:				
6 7 8 9 10 11	D. Lee Roberts, Jr., Esq. Colby L. Balkenbush, Esq. Brittany M. Llewellyn, Esq. Phillip N. Smith, Jr., Esq. Marjan Hajimirzaee, Esq. WEINBERG, WHEELER, HUDGINS, GUNN & DIAL, LLC 6385 South Rainbow Blvd., Suite 400 Las Vegas, Nevada 89118 lroberts@wwhgd.com cbalkenbush@wwhgd.com bllewellyn@wwhgd.com psmithjr@wwhgd.com mhajimirzaee@wwhgd.com	Paul J. Wooten, Esq. (admitted pro hac vice) Amanda Genovese, Esq. (admitted pro hac vice) Philip E. Legendy, Esq. (admitted pro hac vice) O'Melveny & Myers LLP Times Square Tower, Seven Times Square, New York, New York 10036 pwooten@omm.com agenovese@omm.com plegendy@omm.com			
113 114 115 116 117 118 119	Dimitri Portnoi, Esq. (admitted pro hac vice) Jason A. Orr, Esq. (admitted pro hac vice) Adam G. Levine, Esq. (admitted pro hac vice) Hannah Dunham, Esq. (admitted pro hac vice) Nadia L. Farjood, Esq. (admitted pro hac vice) O'MELVENY & MYERS LLP 400 South Hope Street, 18th Floor Los Angeles, CA 90071-2899 dportnoi@omm.com jorr@omm.com alevine@omm.com hdunham@omm.com nfarjood@omm.com	Daniel F. Polsenberg, Esq. Joel D. Henriod, Esq. Abraham G. Smith, Esq. LEWIS ROCA ROTHGERBER CHRISTIE LLP 3993 Howard Hughes Parkway, Suite 600 Las Vegas, Nevada 89169 dpolsenberg@lewisroca.com jhenriod@lewisroca.com asmith@lewisroca.com Attorneys for Defendants	045470		
20 21 22 23 24 25 26	<u> </u>	Judge David Wall, Special Master Attention: Mara Satterthwaite & Michelle Samaniego JAMS 3800 Howard Hughes Parkway, 11th Floor Las Vegas, NV 89123 msatterthwaite@jamsadr.com msamaniego@jamsadr.com // Marianne Carter n employee of McDonald Carano LLP			
<u>'</u> '					

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JUDG

DISTRICT COURT **CLARK COUNTY, NEVADA**

FREMONT EMERGENCY SERVICES (MANDAVIA), LTD., a Nevada professional corporation; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C., a Nevada professional corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST EMERGENCY MEDICINE, a Nevada professional corporation,

Plaintiffs,

JUDGMENT

Case No.: A-19-792978-B

Dept. No.: XXVII

vs.

UNITED HEALTHCARE INSURANCE COMPANY, a Connecticut corporation; UNITED HEALTH CARE SERVICES INC., dba UNITEDHEALTHCARE, a Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

Defendants.

This action came on for trial before the Court and a jury, the Honorable Nancy L. Allf, District Court Judge, presiding, and the issues having been duly tried and the jury having duly rendered its verdicts,

IT IS HEREBY ORDERED, ADJUDGED AND DECREED that Plaintiff Fremont Emergency Services (Mandavia) Ltd. recover a total of \$23,169,133.81 from the Defendants listed below, in the respective amounts listed below, with post-judgment interest thereon as provided by law from the date of written notice of this Judgment being entered until paid, together with its costs of action and attorneys' fees, if any, in amounts to be determined hereafter.

	Actual	Prompt Pay	Punitive	
Defendant	Damages	Damages	Damages	Judgment
United Healthcare Insurance Company	\$478,686.26	\$157,046.68	\$4,500,000	\$5,135,732.94
United Health Care Services Inc.	\$771,406.35	\$251,359.37	\$4,500,000	\$5,522,765.72
UMR, Inc.	\$168,949.51	\$49,891.88	\$2,000,000	\$2,218,841.39

Sierra Health and Life Insurance Company Inc.	\$1,007,374.49	\$254,978.14	\$5,000,000	\$6,262,352.63
Health Plan of Nevada Inc.	\$23,765.68	\$5,675.45	\$4,000,000	\$4,029,441.13

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that Plaintiff Team Physicians of Nevada-Mandavia P.C. recover a total of \$20,111,844.85 from the Defendants listed below, in the respective amounts listed below, with post-judgment interest thereon as provided by law from the date of written notice this Judgment being entered until paid, together with its costs of action and attorneys' fees, if any, in amounts to be determined hereafter.

	Actual	Prompt Pay	Punitive	
Defendant	Damages	Damages	Damages	Judgment
United Healthcare Insurance Company	\$42,803.36	\$13,836.81	\$4,500,000	\$4,556,640.17
United Health Care Services Inc.	\$40,607.19	\$10,875.36	\$4,500,000	\$4,551,482.55
UMR, Inc.	\$485.37	\$137.83	\$2,000,000	\$2,000,623.20
Sierra Health and Life Insurance Company	\$1,783.85	\$512.04	\$5,000,000	\$5,002,295.89
Inc.				
Health Plan of Nevada Inc.	\$598.83	\$204.21	\$4,000,000	\$4,000,803.04

IT IS FURTHER ORDERED, ADJUDGED AND DECREED that Plaintiff Crum Stefanko and Jones Ltd. dba Ruby Crest Emergency Medicine recover a total of \$20,148,895.30 from the Defendants listed below, in the respective amounts listed below, with post-judgment interest thereon as provided by law from the date of written notice of this Judgment being entered until paid, together with its costs of action and attorneys' fees, if any, in amounts to be determined hereafter.

	Actual	Prompt Pay	Punitive	
Defendant	Damages	Damages	Damages	Judgment
United Healthcare Insurance Company	\$32,972.03	\$10,442.16	\$4,500,000	\$4,543,414.19
United Health Care Services Inc.	\$69,447.39	\$20,845.46	\$4,500,000	\$4,590,292.85
UMR, Inc.	\$7,911.57	\$2,353.04	\$2,000,000	\$2,010,264.61
Sierra Health and Life Insurance Company	\$3,438.63	\$1,089.67	\$5,000,000	\$5,004,528.30
Inc.				
Health Plan of Nevada Inc.	\$281.49	\$113.87	\$4,000,000	\$4,000,395.36

IT IS SO ORDERED.

Dated this 9th day of March, 2022.

Dated this 9th day of March, 2022

TW

519 56D 37C6 D5AF Nancy Allf District Court Judge

CERTIFICATE OF SERVICE

I certify that on this 4th day of March, 2022, I caused a true and correct copy of the foregoing to be served via this Court's Electronic Filing system in the above-captioned case, upon the following:

D. Lee Roberts, Jr., Esq.
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/s/

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Joel Henriod

1 **CSERV** 2 DISTRICT COURT 3 CLARK COUNTY, NEVADA 4 5 Fremont Emergency Services CASE NO: A-19-792978-B 6 (Mandavia) Ltd, Plaintiff(s) DEPT. NO. Department 27 7 VS. 8 United Healthcare Insurance 9 Company, Defendant(s) 10 11 **AUTOMATED CERTIFICATE OF SERVICE** 12 This automated certificate of service was generated by the Eighth Judicial District 13 Court. The foregoing Judgment was served via the court's electronic eFile system to all recipients registered for e-Service on the above entitled case as listed below: 14 Service Date: 3/9/2022 15 16 Michael Infuso minfuso@greeneinfusolaw.com 17 Keith Barlow kbarlow@greeneinfusolaw.com 18 Frances Ritchie fritchie@greeneinfusolaw.com 19 Greene Infuso, LLP filing@greeneinfusolaw.com 20 Audra Bonney abonney@wwhgd.com 21 Cindy Bowman cbowman@wwhgd.com 22 D. Lee Roberts 23 lroberts@wwhgd.com 24 Raiza Anne Torrenueva rtorrenueva@wwhgd.com

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Punitive Damages was entered on March 9, 2022, a copy of which is attached hereto.

Please take notice than an Order Denying Defendants' Motion to Apply Statutory Cap on

DATED this 9th day of March, 2022. 1 2 McDONALD CARANO LLP 3 By: /s/ Kristen T. Gallagher Pat Lundvall (NSBN 3761) 4 Kristen T. Gallagher (NSBN 9561) Amanda M. Perach (NSBN 12399) 5 2300 West Sahara Avenue, Suite 1200 Las Vegas, Nevada 89102 6 plundvall@mcdonaldcarano.com 7 kgallagher@mcdonaldcarano.com aperach@mcdonaldcarano.com 8 P. Kevin Leyendecker (admitted pro hac vice) 9 John Zavitsanos (admitted pro hac vice) 10 Joseph Y. Ahmad (admitted pro hac vice) Jason S. McManis (admitted pro hac vice) 11 Michael Killingsworth (admitted pro hac vice) Louis Liao (admitted pro hac vice) 12 Jane L. Robinson (admitted pro hac vice) Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing, P.C 13 1221 McKinney Street, Suite 2500 14 Houston, Texas 77010 kleyendecker@azalaw.com 15 joeahmad@azalaw.com jzavitsanos@azalaw.com 16 jmcmanis@azalaw.com mkillingsworth@azalaw.com 17 lliao@azalaw.com 18 jrobinson@azalaw.com 19 Justin C. Fineberg (admitted *pro hac vice*) Rachel H. LeBlanc (admitted pro hac vice) 20 Jonathan E. Siegelaub (admitted pro hac vice) Lash & Goldberg LLP 21 Weston Corporate Centre I 22 2500 Weston Road Suite 220 Fort Lauderdale, Florida 33331 23 Telephone: (954) 384-2500 jfineberg@lashgoldberg.com 24 rleblanc@lashgoldberg.com jsiegelaub@lashgoldberg.com 25 26 Attorneys for Plaintiffs Fremont Emergency Services (Mandavia), Ltd., Team Physicians 27 of Nevada-Mandavia, P.C. & Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine 28

CERTIFIC	ATE OF	SERVICI	\mathbb{E}
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2	I HEREBY CERTIFY that I am an emplo	yee of McDonald Carano LLP, and that on this 9th
3	day of March, 2022, I caused a true and correct	copy of the foregoing NOTICE OF ENTRY OF
4	ORDER DENYING DEFENDANTS' MOT	TION TO APPLY STATUTORY CAP ON
5	PUNITIVE DAMAGES to be served via this	Court's Electronic Filing system in the above-
6	captioned case, upon the following:	
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ICT COURT

CLARK COUNTY, NEVADA

	REMONT EMERGENCT BERTIEES
16	(MANDAVIA), LTD., a Nevada professiona
	corporation; TEAM PHYSICIANS OF
17	NEVADA-MANDAVIA, P.C., a Nevada
	professional corporation; CRUM,
18	STEFANKO AND JONES, LTD. dba RUBY
	CREST EMERGENCY MEDICINE, a
19	Nevada professional corporation,
20	Plaintiffs,
21	vs.
22	UNITED HEALTHCARE INSURANCE
	COMPANY, a Connecticut corporation;
23	UNITED HEALTH CARE SERVICES INC.
	dba UNITEDHEALTHCARE, a Minnesota
24	corporation; UMR, INC., dba UNITED
	MÉDICAL RESOURCES, a Delaware
25	corporation; SIERRA HEALTH AND LIFE
	INSURANCE COMPANY, INC., a Nevada
26	corporation; HEALTH PLAN OF NEVADA
	INC., a Nevada corporation,

Defendants.

FREMONT EMERGENCY SERVICES

Case No.: A-19-792978-B Dept. No.: XXVII

ORDER DENYING DEFENDANTS' MOTION TO APPLY STATUTORY CAP ON PUNITIVE DAMAGES

Hearing Dates: February 16, 2022 February 17, 2022 Hearing Time: 1:00 p.m.

This matter came before the Court on February 16, 2022 and February 17, 2022 on defendants UnitedHealthcare Insurance Company; United HealthCare Services, Inc.; UMR, Inc.; Sierra Health and Life Insurance Co., Inc.; and Health Plan of Nevada, Inc.'s (collectively, "Defendants") Motion To Apply Statutory Cap On Punitive Damages (the "Motion"). Pat Lundvall, McDonald Carano LLP; and John Zavitsanos, Joe Ahmad, Jane Robinson, Kevin Leyendecker, Jason McManis, Michael Killingsworth, Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing, P.C., appeared on behalf of plaintiffs Fremont Emergency Services (Mandavia), Ltd. ("Fremont"); Team Physicians of Nevada-Mandavia, P.C. ("Team Physicians"); Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine ("Ruby Crest" and collectively the "Health Care Providers"). Colby Balkenbush, Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC; Jeffrey E. Gordon, O'Melveny & Myers LLP; and Dan Polsenberg and Abe Smith, Lewis Roca Rothgerber Christie LLP appeared on behalf of Defendants

The Court, having considered the Motion, the Health Care Providers' opposition and the argument of counsel at the hearing on this matter, and good cause appearing, finds and orders as follows:

- 1. The Plaintiffs carefully plead and presented their claims and evidence in support thereof. The jury's findings to the special verdict questions are supported by legally and factually sufficient evidence and establish that the Health Care Providers brought an action against insurers who acted in bad faith regarding their obligation to provide insurance coverage. Consequently, as discussed more fully below, the statutory caps on punitive damages found in NRS 42.005(1) do not apply to the punitive damages awarded by the jury in response to the special verdict questions.
- 2. The central issue in this case was whether Defendants allowed the Health Care Providers a reasonable out-of-network reimbursement rate for thousands of health insurance claims.
- 3. Generally, the Health Care Providers asserted that Defendants were obligated to them for compensatory damages under four causes of action and were liable for punitive

damages based on Defendants' malicious, oppressive and fraudulent conduct. The jury's verdicts agreed with the Health Care Providers' assertions.

- 4. Specific to this Motion, in October 2021, Health Care Providers sought leave to file a Second Amended Complaint. The Court granted leave to amend after Defendants filed a Notice of Non-Opposition. In the Second Amended Complaint, Health Care Providers alleged that Defendants acted in bad faith by failing to effectuate a prompt, fair and equitable settlement of claims with respect to the emergency services Health Care Providers provided to Defendants' insureds.
- 5. Later that month, on October 25, 2021, the Court called the case to trial at which time the parties appeared through counsel, announced ready and preceded to voir dire the jury panel. Voir dire continued thereafter until the jury was seated on November 1, 2021. The parties made opening statements on November 2, 2021. The jurors heard evidence through November 23, 2021, after which they began deliberating. The jury continued its deliberations on November 24, 2021, broke for the Thanksgiving holiday and resumed deliberations on November 29, 2021. On that date, the jury reached a unanimous special verdict concerning compensatory damages in Health Care Providers' favor on all questions presented to them, including:
 - Awarding Health Care Providers the following sums against Defendants as a result of the Defendants forming with each Plaintiff and then failing to comply with an implied contract;

	Fremont	Team Phys	Ruby Crest
United Healthcare Insurance Company	\$478,686.26	\$42,803.36	\$32,972.03
United Health Care Service	\$771,406.35	\$40,607.19	\$69,447.39
UMR	\$168,949.51	\$485.37	\$7,911.57
Sierra Health and Life	\$1,007,374.49	\$1,783.85	\$3,438.63
Health Plan of Nevada	\$23,765.68	\$598.83	\$281.49

 Awarding Health Care Providers the following sums against Defendants as a result of the Defendants unfair claims practices in violation of NRS 686A.020 and 686A.310;

	Fremont	Team Phys	Ruby Crest
United Healthcare Insurance Company	\$478,686.26	\$42,803.36	\$32,972.03
United Health Care Service	\$771,406.35	\$40,607.19	\$69,447.39
UMR	\$168,949.51	\$485.37	\$7,911.57
Sierra Health and Life	\$1,007,374.49	\$1,783.85	\$3,438.63
Health Plan of Nevada	\$23,765.68	\$598.83	\$281.49

- Finding that all of the Defendants failed to fully pay Health Care Providers within 30 days of the date Health Care Providers submitted claims that were approved and fully payable;
- Finding, by clear and convincing evidence, that all of the Defendants were guilty of oppression, fraud or malice in conduct that constituted unjust enrichment that damaged each Plaintiff and wished to impose punitive damages against each Defendant;
- Finding, by clear and convincing evidence, that all of the Defendants were guilty of oppression, fraud or malice in conduct that constituted an unfair claims practice that damaged each Plaintiff and wished to impose punitive damages against each Defendant.
- 6. In light of the jury's finding of oppression, fraud or malice, the Court scheduled the jury to return and hear evidence in connection with Health Care Providers' punitive damage claims. On December 7, 2021 the parties presented evidence related thereto. Later that day, the jury returned a unanimous special verdict that awarded punitive damages against each of the Defendants in favor of Health Care Providers in the following amounts.

	Fremont	Team Phys	Ruby Crest
United Healthcare Insurance Company	\$4,500,000	\$4,500,000	\$4,500,000
United Health Care Service	\$4,500,000	\$4,500,000	\$4,500,000
UMR	\$2,000,000	\$2,000,000	\$2,000,000
Sierra Health and Life	\$5,000,000	\$5,000,000	\$5,000,000
Health Plan of Nevada	\$4,000,000	\$4,000,000	\$4,000,000

- 7. Defendants' Motion raises the issue of the application and construction of NRS 42.005(2) (b) (the "Statute"), which generally provides that certain limitations on the amount of punitive damages do not apply in certain actions.
- 8. None of the parties contend the Statute is unclear or ambiguous. The Statute is not unclear or ambiguous.
- 9. When a statute's language is plain, clear and unambiguous the Court is obliged to "give that language its ordinary meaning" and "not look beyond a statute's plain meaning". *McGrath v. State Dep't of Pub. Safety*, 123 Nev. 120, 123, 159 P.3d 239, 241 (2007); *White-Hughley v. State*, 137 Nev. Adv. Op. 47, 495 P.3d 82, 84 (2021).
- 10. The plain meaning of the language found in Statute requires the Court to determine if this case was:
 - an action brought against an insurer,

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- who acted in bad faith,
- regarding its obligation to provide insurance coverage.
- 8. The evidence and the jury's findings satisfy all three elements of the Statute which requires the Court to not apply any statutory cap found within NRS Chapter 42.
- 9. At varying times during the pendency of this action the Court has found that all Defendants are insurers within its usual and natural meaning of that term. For all the same reasons the Court made that previous finding, it applies perforce here too.
- 10. Moreover, the jury's verdicts meet and actually exceed the standard for proving acts of bad faith under the Statute. The key to a determination of bad faith is the mens rea component of knowing or reckless intent which can be evidenced by a lack of any reasonable basis to support an insurer's conduct. See Pioneer Chlor Alkali Co. v. Nat'l Union Fire Ins. Co. of Pittsburgh, Pennsylvania, 863 F. Supp. 1237, 1242-43 (D. Nev. 1994); Countrywide Home Loans, Inc. v. Thitchener, 124 Nev. 725, 743, 192 P.3d 243, 255 (2008); Valdez v. Am. Fam. Mut. Ins. Co., No. 208CV01574RCJLRL, 2009 WL 10693592, at *9 (D. Nev. June 23, 2009). Here, both the unfair claims practices claim and unjust enrichment claim required the Health Care Providers to prove that Defendants' acts lacked any reasonable basis. The Health Care Providers made that proof. Because of this, and additionally because of the findings of statutory fraud, oppression or malice, Defendants' unfair claims practices and unjust enrichment conduct constitutes acts of bad faith within the plain and ordinary meaning required by NRS 42.005(2) (b). The jury's findings demonstrate Defendants acted with the *mens rea* that lies at the heart of bad faith. To hold otherwise would exclude from the statute only the least egregious form of bad faith (i.e., common law bad faith that only requires proof by a preponderance of the evidence), while allowing insurers to benefit from the statutory cap even when a jury finds, by clear and convincing evidence, that an insurer engaged in a more egregious form of bad faith.
- 11. The jury's verdicts also demonstrate that the obligations breached or violated by Defendants concern or are regarding the Defendants' obligation to provide insurance coverage.
- 12. While Defendants urge the Court to read into or insert additional language not found within the Statute so to require the Court to apply the statutory caps found within NRS

Chapter 42, the Court cannot do so. The attempt to add language that appears nowhere in the statute runs contrary to black letter statutory construction principles. See, for example, Echeverria v. State, 137 Nev. Adv. Op. 49, 495 P.3d 471, 476 (2021), quoting Zenor v. State, Dep't of Transp., 134 Nev. 109, 110, 412 P.3d 28, 30 (2018) (refusing to imply provisions not expressly included in the legislative scheme). As noted in Echeverria, "it is not the business of [the Court] to fill in alleged legislative omissions based on conjecture as to what the Legislature would or should have done." Id. (quoting Zenor, 134 Nev. at 111; McGrath, 159 P.3d at 241); See also, Carter v. Richland Holdings, Inc., No. 216CV02967RFBVCF, 2018 WL 4566667, at *8 (D. Nev. Sept. 24, 2018); White-Hughley v. State, 137 Nev. Adv. Op. 47, 495 P.3d 82, 84 (2021); Endo Health Sols., Inc. v. Second Jud. Dist.Ct. in & for Cty. of Washoe, 137 Nev. Adv. Op. 39, 492 P.3d 565, 569 (2021).

- 13. As discussed above, the statute's plain language does not limit the exception to actions brought by insureds. Nor is the exception limited to claims for relief that "seek to enforce an insurer's obligation to provide insurance coverage to an insured." Both of these points were urged by Defendants.
- 14. As to Defendants' additional contentions, Defendants cite no authority for the suggestion that Health Care Providers must plead an exception to the statutory cap; the Court has found no such requirement. Second, Defendants cite to various statements in pleadings and hearings and assert that Health Care Providers necessarily abandoned all claims and reliance whatsoever related to Defendants' obligations to provide insurance because this dispute is a "rate of payment" case rather than a "right to payment" case. The lack of a dispute over the right to payment, however, does not mean that Health Care Providers' claims are unrelated to Defendants' obligations to provide insurance coverage. Here, as discussed above, Defendants' obligation to provide insurance coverage led to an obligation to effectuate a prompt, fair and equitable settlement of the 11,563 claims once Defendants concluded those claims were covered under the policies; i.e., once Defendants' liability had become reasonably clear. Third,

¹ See June 24, 2020 Order Denying Defendants' Motion to Dismiss, pp. 13-14, finding that Plaintiffs' claims are not preempted by ERISA because they concern a dispute over the rate of payment, as opposed to the right of payment.

Defendants lodge a variety of arguments for why the Court should apply the statutory cap, each of which is predicated on a misreading of the statute or a misrepresentation of the underlying record. For example, Defendants contend the cap should apply because:

- Health Care Providers "denied they were seeking to enforce coverage obligations through any assignment of benefits from their patients;" (p. 3)
- Health Care Providers' "claims for relief does not seek to enforce an insurer's obligation to provide insurance coverage to an insured;" (p. 4)
- "insurance coverage must be disputed for NRS 42.005(2) (b) to apply;" (p. 7)
- the implied contract is "evidently not an insurance policy, so the implied contract cannot vindicate any right to insurance coverage on behalf of any insured;" (p. 11)
- "[b]ecause bad faith by the insurer acting as an insurer is the predicate for the statutory exception in NRS 42.005(2)(b), there must be an applicable insurance policy that extends insurance coverage to the plaintiff;" (p. 12) (emphasis added)
- Health Care Providers are not insureds and "the exception to the punitive damages cap ... can only be triggered if the plaintiff is privy to an insurance policy...;" (p. 12)
- "the jury was not presented with any evidence that any insured was denied coverage under any applicable policy of insurance;" (p. 14) and
- "neither TeamHealth Health Care Providers nor Defendants proposed any instructions on 'Insurance Bad Faith.'" (p. 17)

As discussed above, accepting any of these arguments, or their derivatives, would require the Court to violate long standing statutory interpretation principles and revisit certain arguments the Court previously considered and rejected. See, e.g., Order on Defendants' Motion for Judgment as a Matter of Law.

15. Defendants also urged the Court to find that the Health Care Providers abandoned any and all claims that might satisfy the exception to the cap in NRS 42.005(2) (b). As referenced above, the Health Care Providers' Third Claim for Relief in the Second Amended Petition – Violation of NRS 686A.020 and 686A.310 – alleges an act of bad faith. The Health Care Providers' never abandoned that allegation of bad faith. Instead, they merely abandoned a proposed instruction (and its' incorporation into a separate punitive damage instruction) that said "'Bad Faith' means that the insurer had no reasonable basis for disputing the claim; and the

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insurer knew or recklessly disregarded the fact that there was no reasonable basis for disputing the claim." Withdrawal of that proposed instruction was consistent with the evidence because Defendants admitted that they had not *disputed* any claim, but agreed they were obligated to pay on every claim.

- 15. Relatedly, Defendants urged the Court to find that the Health Care Providers' interpretation of the exception to the cap would mean that anyone could sue an insurance company for bad faith. But, as discussed above, the Health Care Providers' proffered interpretation merely demonstrates that they could sue Defendants for *acting in bad faith regarding their obligations to provide insurance coverage*.
- Finally, NRS 42.005(1) provides: "[e]xcept as otherwise provided in NRS 42.007, in an action for the breach of an obligation not arising from contract, where it is proven by clear and convincing evidence that the defendant has been guilty of oppression, fraud or malice, express or implied, the plaintiff, in addition to the compensatory damages, may recover damages for the sake of example and by way of punishing the defendant." Although the Nevada Supreme Court has held that punitive damages are not available for breach of contract claims, no such restriction exists for a claim of unjust enrichment, which, by its terms and United's own arguments throughout the course of this litigation, is not based on a contract. See Ins. Co. of the West v. Gibson Title Co., Inc., 122 Nev. 455, 464, 134 P.3d 698, 703 (2006) ("[T]he award of punitive damages cannot be based upon a cause of action sounding solely in contract.") (emphasis added); see also Peri & Sons Farms, Inc. v. Jain Irr., Inc., 933 F. Supp. 2d 1279, 1294 (D. Nev. 2013) ("Punitive damages are not available under Nevada law for contract-based causes of action); Leasepartners Corp. v. Robert L. Brooks Tr. Dated Nov. 12, 1975, 113 Nev. 747, 755–56, 942 P.2d 182, 187 (1997) ("[a]n action based on a theory of unjust enrichment is not available when there is an express, written contract, because no agreement can be implied when there is an express agreement."). Federal court decisions are in accord. See e.g. Hester v. Vision Airlines, Inc., 687 F.3d 1162 (9th Cir. 2012); Bavelis v. Doukas, No. 2:17-CV-00327, 2021 WL 1979078, at *3 (S.D. Ohio May 18, 2021) (affirming punitive damages award based on a theory of unjust enrichment). Unjust enrichment

"is grounded in the theory of restitution, not in contract theory." *Schirmer v. Souza*, 126 Conn. App. 759, 765, 12 A.3d 1048 (2011), and therefore the Health Care Providers do not seek punitive damages solely based upon a contract theory. Similarly, for the reasons already expressed herein, the cause of action under the Unfair Claims Practices Act does not sound in contract and punitive damages are available under that claim as well, and the claim is applicable to all Defendants.

- 17. NRS 42.001(1) defines "conscious disregard" as "the knowledge of the probable harmful consequences of a wrongful act and a willful and deliberate failure to act to avoid those consequences."
- 18. NRS 42.001(2) defines "fraud" as "an intentional misrepresentation, deception or concealment of a material fact known to the person with the intent to deprive another person of his or her rights or property or to otherwise injure another person."
- 19. NRS 42.001(3) defines "malice, express or implied" as "conduct which is intended to injure a person or despicable conduct which is engaged in with a conscious disregard of the rights or safety of others."
- 20. NRS 42.001(4) defines "oppression" as "despicable conduct that subjects a person to cruel and unjust hardship with conscious disregard of the rights of the person."
- 21. The Health Care Providers introduced evidence at trial that a jury could deem to constitute malice, oppression and/or fraud, express or implied, including but not limited to:
- United's representatives testified that United has a duty to pay a reasonable reimbursement amount and the origin of the duty is found in the legal claims that the Health Care Providers asserted and prevailed on.
- The United representatives' testimony, expressly or inferentially, that United did not pay a reasonable value in accord with the Affordable Care Act because the Affordable Care Act sets the minimum, and that Affordable Care Act has language concerning usual and customary rates. Each and every one of the Defendants have identified, expressly by Ms. Hare, Mr. Ziemer, Mr. Haben and Ms. Paradise, that, in fact, they did not include usual and customary in the analysis determining reimbursement rates under United's various out-of-network

- United's representatives testified, expressly or inferentially, that the motivation
 for reducing out-of-network reimbursement rates was to underscore and to increase the amount
 of profits that United was enjoying or to try to save money allegedly for their administrative
 services clients and keep it for themselves in the context of third party administrator fees from a
 shared savings program.
- The Health Care Providers presented evidence that there are negative consequences if United underpays emergency room providers, including potentially jeopardizing what is defined as the safety net of our community: emergency department doctors, practitioners and clinicians. If they are underpaid, the quality of emergency services is diminished according to the testimony that has been elicited.
- Further, written documentary evidence presented to the jury states that United has an obligation to pay billed charges.
- United received advice from their internal regulatory and compliance department; i.e. United's provider services department. PX 314. Ms. Hare testified that SHL and HPN also received provider services. Mr. Ziemer identified that UMR also received support from United's provider services. In that email, United identified the obligation under the Affordable Care Act and how the law provides a minimum floor, yet United representatives' testimony demonstrates United did something different and inconsistent with what the law required.
- The Health Care Providers have introduced evidence that a jury could conclude that Defendants were deliberately placing United's interest over that safety net of community. Based on the testimony and other evidence, the Court concludes that there were sufficient facts presented at trial of this action brought against insurers such that the jury could find Defendants acted in bath faith regarding their obligations to provide insurance coverage. For those reasons,

the statute provides an exception to Nevada's statutory cap on punitive damages. 1 2 Accordingly, 3 4 **ORDER** 5 IT IS HEREBY ORDERED that the Motion is DENIED in full for all reasons stated herein, on the record at the February 16 and 17, 2022 hearings, and contained in the Health Care 6 7 Providers' briefing in opposition to Defendants' Motion. 8 March Signed this 9th day of 9 . 2022. 10 Dated this 9th day of March, 2022 11 TW 12 CC9 0E6 5B58 6665 13 Nancy Allf Submitted by: **District Court Judge** 14 AHMAD, ZAVITSANOS, ANAIPAKOS, O'MELVENY & MYERS LLP ALAVI & MENSING, P.C. 15 16 Joseph Y. Ahmad D. Lee Roberts, Jr. 17 John Zavitsanos Colby L. Balkenbush Jason S. McManis Brittany M. Llewellyn Michael Killingsworth Phillip N. Smith, Jr. 18 Louis Liao Marjan Hajimirzaee 19 Jane L. Robinson WEINBERG, WHEELER, HUDGINS, P. Kevin Leyendecker **GUNN & DIAL, LLC** 1221 McKinney Street, Suite 2500 6385 South Rainbow Blvd., Suite 400 20 Houston, Texas 77010 Las Vegas, Nevada 89118 joeahmad@azalaw.com lroberts@wwhgd.com 21 cbalkenbush@wwhgd.com jzavitsanos@azalaw.com jmcmanis@azalaw.com bllewellyn@wwhgd.com 22 mkillingsworth@azalaw.com psmithjr@wwhgd.com lliao@azalaw.com mhajimirzaee@wwhgd.com 23 jrobinson@azalaw.com kleyendecker@azalaw.com Dimitri Portnoi 24 (admitted *pro hac vice*) Jason A. Orr Adam G. Levine 25 Pat Lundvall (NSBN 3761) Hannah Dunham Nadia L. Farjood Kristen T. Gallagher (NSBN 9561) 26 Amanda M. Perach (NSBN 12399) O'MELVENY & MYERS LLP 400 South Hope Street, 18th Floor 27 McDONALD CARANO LLP 2300 West Sahara Avenue, Suite 1200 Los Angeles, CA 90071-2899

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DISTRICT COURT CLARK COUNTY, NEVADA

Fremont Emergency Services (Mandavia) Ltd, Plaintiff(s)

VS.

United Healthcare Insurance Company, Defendant(s)

CASE NO: A-19-792978-B

DEPT. NO. Department 27

AUTOMATED CERTIFICATE OF SERVICE

This automated certificate of service was generated by the Eighth Judicial District Court. The foregoing Order Denying Motion was served via the court's electronic eFile system to all recipients registered for e-Service on the above entitled case as listed below:

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DISTRICT COURT

CLARK COUNTY, NEVADA

(MANDAVIA), LTD., a Nevada professional corporation; TEAM PHYSICIANS OF NEVADA-MANDAVIA, P.C., a Nevada professional corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST EMERGENCY MEDICINE, a Nevada professional corporation,
Plaintiffs,
vs.
UNITED HEALTHCARE INSURANCE COMPANY, a Connecticut corporation; UNITED HEALTH CARE SERVICES INC., dba UNITEDHEALTHCARE, a Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation; HEALTH PLAN OF NEVADA, INC., a Nevada corporation,

Defendants

Case No.: A-19-792978-B Dept. No.: XXVII

HEALTH CARE PROVIDERS' VERIFIED MEMORANDUM OF COSTS

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Pursuant to NRS 18.110 and the Court's March 9, 2022 Judgment, plaintiffs Fremont Emergency Services (Mandavia), Ltd. ("Fremont"); Team Physicians of Nevada-Mandavia, P.C. ("Team Physicians"); Crum, Stefanko and Jones, Ltd. dba Ruby Crest Emergency Medicine ("Ruby Crest" and collectively the "Health Care Providers") submit the following Memorandum of Costs incurred in connection with the prosecution of this action. The Health Care Providers, as the prevailing parties, are entitled to costs pursuant to NRS 18.020(3) as they sought recovery of money or damage, in excess of \$2,500 in this action. This request is timely pursuant to NRS 18.110(1). Each requested cost is authorized by NRS 18.005. Each requested cost is substantiated by the backup documents attached hereto. Each requested cost was actually incurred. Each requested cost was paid. Each requested cost was necessary to prosecution of this action only. Each requested cost is reasonable in value.

THE HEALTH CARE PROVIDERS ARE PREVAILING PARTIES.

The term "prevailing party' for the purposes of cost is broad, encompassing plaintiffs, counterclaimants and defendants." Smith v. Crown Financial Services of America, 111 Nev. 2775 284, 890 P.2d 769, 773 (1995). A party prevails "if it succeeds on any significant issue in litigation which achieves some of the benefit it sought." Valley Elec. Ass'n v. Overfield, 121 Nev. 7, 10, 106 P.3d 1198, 1200 (2005) (defining "prevailing party" under NRS 18.010 (internal quotation marks omitted)). A prevailing party "need not succeed on every issue." LVMPD v. Blackjack Bonding, 131 Nev. 80, 90, 343 P.3d 608, 615 (2015) (quoting Hensley v. Eckerhart, 461 U.S. 424, 434 (1983) and observing that "a plaintiff [can be] deemed 'prevailing' even though he succeeded on only some of his claims for relief"). When analyzing a prevailing party,

> a lawsuit should not be viewed as a series of discrete claims. Rather, the focus should be on the significance of the relief obtained by the [party] in relation to the hours reasonably expended on the litigation.... Thus, the extent of the party's success is a crucial factor.

Women's Federal Sav. and Loan Ass'n of Cleveland v. Nevada Nat. Bank, 623 F.Supp. 469, 471 (D. Nev. 1985) (holding that plaintiff who succeeded on 9 of 12 and 8 of 14 issues was a prevailing party); see also Cole-Monahan v. Salvo, 2014 WL 5686290, at *2 (2014) (party prevailed when she "obtained most of the remedies she sought and received favorable verdicts on the causes of action

that were decided by the jury."). Additionally, prevailing party analysis does not stop at "claims asserted in...complaints" and may encompass issues the parties submitted to the Court. *I. Cox Constr. Co. v. CH2 Invs., LLC*, 129 Nev. 139, 143, 296 P.3d 1202, 1204 (2013).

Here, there is no dispute that the Health Care Providers are prevailing parties in light of the jury's verdict and the Court's Judgment.

II. STATEMENT OF COSTS INCURRED.

NRS 18.005 permits recovery of the following categories of costs to the prevailing party. Consistent with NRS 18.005, the Health Care Providers incurred the following recoverable costs:

Cost Type		Total	
NRS 18.005(1). Clerk's Fees.	\$	6,742.19	
NRS 18.005(2). Reporters' fees for depositions, including a reporter's fee for one copy of each deposition.	\$	139,941.94	
NRS 18.005(3). Jurors' fees and expenses, together with reasonable compensation of an officer appointed to act in accordance with NRS 16.120.	\$	7,035.93	
NRS 18.005(4). Fees for witnesses at trial, pretrial hearings and deposing witnesses	\$	1,517.00	
NRS 18.005(5). Reasonable fees of not more than five expert witnesses in an amount of not more than \$1,500 for each witness, unless the court allows a larger fee after determining that the circumstances surrounding the expert's testimony were of such necessity as to require the larger fee.	\$	264,050.83	
NRS 18.005(7). The fee of any sheriff or licensed process server for the delivery or service of any summons or subpoena used in the action.	\$	12,220.10	
NRS 18.005(8). Compensation for the official reporter or reporter protempore.	\$	35,502.12	
NRS 18.005(10). Fees of a court bailiff or deputy marshal who was required to work overtime.	\$		
NRS 18.005(12). Reasonable costs for photocopies.	\$	46,304.27	
NRS 18.005(13). Reasonable costs for long distance telephone calls.	\$	898.58	
NRS 18.005(14). Reasonable costs for postage	\$	9,381.67	
NRS 18.005(15). Reasonable costs for travel and lodging incurred taking depositions and conducting discovery.	\$	358,600.37	

Page 3 of 11

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Cost Type			Total
NRS 18.005(16). Fees charged pursuant to NRS 19.0335 (Additional fees in civil action involving multiple parties).			
NRS 18.005(17). Any other reasonable and necessary expense incurred in connection with the action, including reasonable and necessary expenses for computerized services for legal research:			\$ 211,335.73
	eDiscovery Fees	\$ 78,315.20	
	Courier Mileage	\$ 15,388.27	
	Fees	Ψ 13,300.27	
	Westlaw	\$ 49,935.28	
	• Parking	\$ 1,032.15	
•	• Recording Fees	\$ 237.54	
	Business Meals	\$22,938.40	
•	Special Master	\$15,350.00	
•	NV State Bar Fees (Pro hac vice)	\$11,419.88	
•	Out of State Deposition Fees	\$7,272.52	
•	Video Tape depositions	\$6,183.00	
	Investigation Fees	\$3,263.49	
		otal	\$1,093,530.73

III. REQUIRED VERIFICATION AND SUBSTANTIATION.

To recover costs, the Health Care Providers provide this memorandum verified by its counsel "stating that to the best of her knowledge and belief the items are correct, and that the costs have been necessarily incurred in the action or proceeding." NRS 18.110(1). These costs are "actual and reasonable," *Bobby Berosini, Ltd. v. People for the Ethical Treatment of Animals*, 114 Nev. 1348, 1352, 971 P.2d 383, 385 (1998), and are all substantiated in the backup documents attached hereto, *Cadle Co. v. Woods & Erickson, LLP*, 131 Nev. 114, 345 P.3d 1049, 1054 (2015). The back-up documentation is attached hereto as **Exhibits 1-4** and are authenticated through the Declaration of ///

Pat Lundvall Additionally the deci	laration outlines the reasonableness and necessity of certain costs
when required.	taration outlines the reasonableness and necessity of certain costs
Dated this 14 th day of March	n 2022
Dated this 14 day of March	
	McDONALD CARANO LLP
	By: /s/Pat Lundvall Pat Lundvall (NSBN 3761) Kristen T. Gallagher (NSBN 9561) Amanda M. Perach (NSBN 12399) 2300 West Sahara Avenue, Suite 1200 Las Vegas, Nevada 89102 plundvall@mcdonaldcarano.com kgallagher@mcdonaldcarano.com aperach@mcdonaldcarano.com P. Kevin Leyendecker (admitted pro hac vice) John Zavitsanos (admitted pro hac vice) Joseph Y. Ahmad (admitted pro hac vice) Jason S. McManis (admitted pro hac vice) Michael Killingsworth (admitted pro hac vice) Louis Liao (admitted pro hac vice) Jane L. Robinson (admitted pro hac vice) Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing, P.C 1221 McKinney Street, Suite 2500 Houston, Texas 77010 kleyendecker@azalaw.com joeahmad@azalaw.com jzavitsanos@azalaw.com mkillingsworth@azalaw.com lliao@azalaw.com jrobinson@azalaw.com
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DECLARATION OF PAT LUNDVALL

- I, Pat Lundvall, declare under penalty of perjury:
- I am over the age of 18 years. I have personal knowledge of the facts stated in this declaration and those stated in the Health Care Providers' Verified Memorandum of Costs.
- 2. I am an attorney with the law firm of McDonald Carano LLP, and one of the trial counsel representing the Health Care Providers in this matter. The items which are incorporated in Health Care Providers Verified Memorandum of Costs and in Exhibits 1-4 in Appendix Volumes 1 through 9, are true and correct to the best of my knowledge and belief. All requested costs were necessary to this matter. All requested costs are reasonable in the value provided. All requested costs were incurred at market rates in effect at the time and billed to Health Care Providers without upcharge or premium. While Health Care Providers incurred and paid for additional substantial amount of out-of-pocket costs in this case, those costs are not being sought since they do not fall within the scope of NRS 18.005.
- 3. Clerk's Fees (NRS 18.005(1)) refer to filing fees incurred in filing various pre-trial pleadings, briefs, motions and memoranda. These filing fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 4. Reporter's Fees for Depositions (NRS 18.005(2)) refer to reporters' fees for depositions, including a reporter's fee for one copy of each deposition, sought herein. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 5. Juror's Fees (NRS 18.005 (3)) refer to juror fees and juror meals incurred during trial. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 6. Witness Fees (NRS 18.005(4)) refer to fees incurred for witnesses who were either deposed or presented at trial by the Health Care Providers. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 7. Expert Witness Fees (NRS 18.005(5)) refer to fees incurred for expert witness review and testimony at depositions and trial. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter. As the Court is well aware, the issues upon which

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the experts testified and the assistance they provided in preparing cross-examinations of defendants' witnesses were unique and sophisticated. The issues were well outside the common knowledge of an average juror, requiring specialized expertise to detail and explain those issues. Recovery of all such costs incurred is commensurate with the verdicts obtained and the Judgment. The Health Care Providers respectfully submit they should not be limited to the statutory default rate of \$1,500.00.

- 8. Process Server Fees (NRS 18.005(7)) refer to fees that were necessary to complete service of process on the defendants and to command the production of documents and appearance of witnesses at depositions. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 9. Official Reporter or Reporter Pro Tempore Fees (NRS 18.005(8)) refer to fees that were necessary for obtaining the transcript from the Court's official reporter. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 10. Photocopies (NRS 18.005 (12) refer to fees that were necessary in copying documents for maintaining the file, preparing for depositions, hearings, and trial. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter,
- 11. Long Distance (NRS 18.005 (13) refers to fees that were necessary in teleconference meetings communicating with client representatives, opposing parties, and expert witnesses. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter
- 12. Postage (NRS 18.005(14)) refers to fees expended in mailing certain documents related to this matter. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 13. Travel (NRS 18.005(15)) refers to costs that were necessary to take the depositions, and attend hearings and trial. These fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter.
- 14. Other Reasonable and Necessary Costs (NRS 18.005(17)) refers to fees relating to eDiscovery, couriers, online legal research, parking, business meals, Special Master, Nevada State Bar, Out-of-State depositions, videotape depositions, and investigation fees.

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a.	eDiscovery fees were both reasonable and necessary in preserving and
defending the	Health Care Providers' interests in this matter because the Health Care
Providers paid	for electronic storage of the documents disclosed in this matter on a platform
that allowed th	e Health Care Providers' counsel to time-effectively review and manage the
discovery in th	is matter.

- b. Courier fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter because the Health Care Providers had to deliver various items to and from the courthouse and to other places in Las Vegas.
- c. Online legal research fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter because the Health Care Providers' counsel researched specific legal issues in support of its case.
- d. Parking fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter because the Health Care Providers' counsel had to drive to the courthouse to attend hearings and trial.
- Business meals were both reasonable and necessary for Health Care Providers e. to feed counsel and witnesses as they prepared for trial and hearings.
- f. Special Master fees were both reasonable and necessary for the parties to resolve discovery disputes.
- g. NV State Bar fees were both reasonable and necessary for Health Care Providers to retain out of state counsel specifically familiar with the health care issues unique to this action.
- h. Out-of-State Deposition fees were both reasonable and necessary in prosecuting the Health Care Providers' claims in this matter as several witnesses were located outside of Nevada and some demanded in-person depositions.
- Videotape deposition fees were both reasonable and necessary to preserve witness testimony, especially those depositions taken virtually.
 - j. Investigation fees were both reasonable and necessary in locating witnesses.
- The law firms involved in prosecution of this action used various cost recovery 15.

systems to electronically track various out-of-pocket expenses, to include long distance, photocopy or facsimile charges. The systems required that the operator first include a client number and matter number before the transaction can be made therefore providing an electronic count. Each transaction is accounted for electronically to ensure that it is accurately billed to the proper client and matter number. These costs are then uploaded to the respective firm's billing system, before being sent to the client.

- 16. I certify that the documents attached hereto are true and correct copies, are business records that have been kept in the normal course of business and do not indicate a lack of trustworthiness.
 - 17. I declare under penalty of perjury that the foregoing is true and correct.
- 18. To the best of my knowledge and belief the items requested as recoverable costs are correct and that the costs have been necessarily incurred in this action.

Executed on the 14th day of March, 2022.



McDONALD CARANO 2300 WEST SAHARA AVENUE. SUITE 1200 • LAS VEGAS, NEVADA 89102 PHONE 702.873.4100 • FAX 702.873.9966

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that I am an employee of McDonald Carano LLP, and on this 14th day of March, 2022, I caused a true and correct copy of the foregoing **HEALTH CARE PROVIDERS' VERIFIED MEMORANDUM OF COSTS** to be served via this Court's Electronic Filing system in the above-captioned case, upon the following:

D. Lee Roberts, Jr., Esq. Colby L. Balkenbush, Esq. Brittany M. Llewellyn, Esq. Phillip N. Smith, Jr., Esq. Marjan Hajimirzaee, Esq. WEINBERG, WHEELER, HUDGINS, GUNN & DIAL, LLC 6385 South Rainbow Blvd., Suite 400
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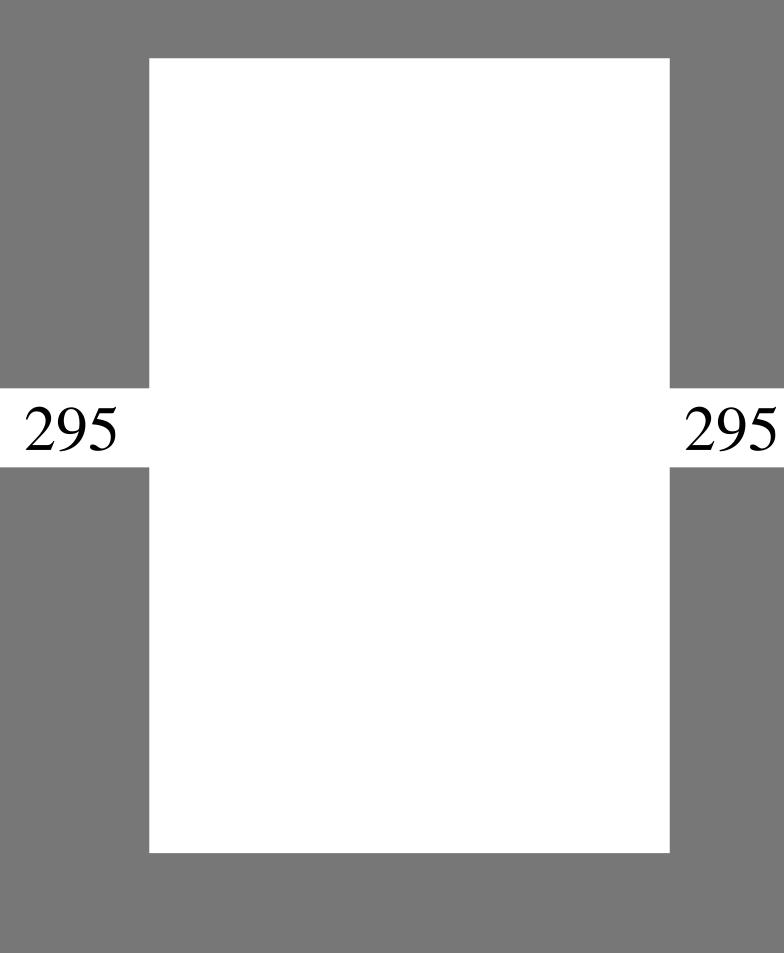
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Attorneys for Defendants

Attorneys for Defendants

/s/ Beau Nelson

An employee of McDonald Carano LLP



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Joseph Y. Ahmad (admitted pro hac vice) John Zavitsanos (admitted pro hac vice) Jason S. McManis (admitted *pro hac vice*) Michael Killingsworth (admitted *pro hac vice*) Louis Liao (admitted *pro hac vice*) Jane L. Robinson (admitted *pro hac vice*) P. Kevin Leyendecker (admitted *pro hac vice*) Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing, P.C. 1221 McKinney Street, Suite 2500 Houston, Texas 77010 Telephone: 713-600-4901 joeahmad@azalaw.com jzavitsanos@azalaw.com imcmanis@azalaw.com mkillingsworth@azalaw.com lliao@azalaw.com jrobinson@azalaw.com klevendecker@azalaw.com

Attorneys for Plaintiffs

jsiegelaub@lashgoldberg.com

FREMONT EMERGENCY SERVICES

(MANDAVIA), LTD., a Nevada professional

corporation; TEAM PHYSICIANS OF NEVADA-

DISTRICT COURT

CLARK COUNTY, NEVADA

MANDAVIA, P.C., a Nevada professional corporation; CRUM, STEFANKO AND JONES, LTD. dba RUBY CREST EMERGENCY MEDICINE, a Nevada professional corporation,
Plaintiffs,
VS.
UNITED HEALTHCARE INSURANCE COMPANY, a Connecticut corporation; UNITED HEALTH CARE SERVICES INC., dba UNITEDHEALTHCARE, a Minnesota corporation; UMR, INC., dba UNITED MEDICAL RESOURCES, a Delaware corporation; SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC., a Nevada corporation,
ind vada, find., a indiada corporation,

Defendants.

Case No.: A-19-792978-B Dept. No.: XXVII

APPENDIX OF EXHIBITS IN SUPPORT OF HEALTH CARE PROVIDERS' VERIFIED MEMORANDUM OF COSTS

VOLUME 1

Exhibit No.	Exhibit Description	Volume	Bates No.
1	McDonald Carano Costs Backup	1-4	001-1122
	 Clerk's Fees 	1-3	0001-0580
	Reporter's Fees	3	0581-0659
	 Juror's Fees 	3	0660-0689
	Witness Fees	3	0690-0752
	Sheriff or license process server	4	0753-0767
	Official Reporter	4	0768-0812
	 Photocopies 	4	0813-0839
	 Long Distance 	4	0840-0935
	• Postage	4	0936-0946
	• E-Discovery	4	0947
	 Courier/Mileage 	4	0948-0957
	Legal Research	5	0958-1014
	 Parking 	5	1015-1032
	 Recording Fees 	5	1033-1037
	Business Meals	5	1038-1046
	 Special Master 	5	1047-1052
	 Pro Hac Vice 	5	1053-1088
	 Out of State Depositions 	5	1089-1094
	Videotape Depositions	5	1095-1122
2	Ahmad, Zavitsanos, Anaipakos, Alavi & Mensing P.C.'s Costs Backup	5-9	1123-1990
	• Clerk	5	1134-1187
	• Photocopies	6	1188-1211
	Sheriff or license process server	6	1212-1215
	Courier/Mileage	6	1216-1233
	Postage	6	1234-1261
	• Travel	6-8	1262-1836
	Meals	8-9	1837-1974
	Trial Transcripts	9	1975-1985
	• Experts	9	1986-1990
3	Napoli Shkolnik PLLC Costs Backup	9	1991-2042
	Photocopies	9	1993-1998
	Postage	9	1999-2000
	• Travel	9	2001-2015
	• Clerk	9	2016-2028
	Process Server	9	2029-2039
	Investigation Fees	9	2040-2042
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Exhibit No.	Exhibit Description	Volume	Bates No.
4	Lash & Goldberg	9	2043-2117
	 Courier/.Mileage 	9	2045-2056
	 Clerk's Fees 	9	2057-2059
	 Transcripts 	9	2060-2089
	Travel	9	2090-2116
	 Investigation 	9	2117

Dated this 14th day of March, 2022.

McDONALD CARANO LLP

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CERTIFICATE OF SERVICE

I HEREBY CERTIFY that I am an employee of McDonald Carano LLP, and on this 14th day of March, 2022, I caused a true and correct copy of the foregoing **APPENDIX OF EXHIBITS IN SUPPORT OF HEALTH CARE PROVIDERS' VERIFIED MEMORANDUM OF COSTS- VOLUME 1** to be served via this Court's Electronic Filing system in the above-captioned case, upon the following:

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/s/ Beau Nelson

An employee of McDonald Carano LLP

EXHIBIT 1

EXHIBIT 1

NRS 18.005(1) Cleri Date	Description	Amount
05/03/2019	Filing Fee-Court	1,530.00
05/03/2019	Filing Fee-Court	49.40
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07/02/2019	Certificate of Good Standing	25.00
03/13/2020	Filing Fee-Court	3.50
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06/01/2021	Filing Fee-Court	3.50	
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06/08/2021	Filing Fee-Court	14.00	
06/09/2021	Filing Fee-Court	3.50	
06/10/2021	Filing Fee-Court	3.50	
06/15/2021	Filing Fee-Court	14.00	
06/17/2021	Filing Fee-Court	7.00	
06/22/2021	Filing Fee-Court	10.50	
06/24/2021	Filing Fee-Court	3.50	
06/25/2021	Filing Fee-Court	77.60	
06/30/2021	Filing Fee-Court	3.50	
07/01/2021	Filing Fee-Court	7.00	
07/07/2021	Filing Fee-Court	3.50	
07/09/2021	Filing Fee-Court	3.50	
07/12/2021	Filing Fee-Court	3.50	
07/22/2021	Filing Fee-Court	3.50	
07/26/2021	Filing Fee-Court	10.50	
07/27/2021	Filing Fee-Court	3.50	
08/02/2021	Filing Fee-Court	40.00	
08/02/2021	Filing Fee-Court	3.50	
08/04/2021	Filing Fee-Court	3.50	
08/04/2021	Filing Fee-Court	3.50	
08/06/2021	Filing Fee-Court	3.50	

Date	Description	Amount
08/09/2021	Filing Fee-Court	3.50
08/09/2021	Filing Fee-Court	3.50
08/09/2021	Filing Fee-Court	3.50
08/10/2021	Filing Fee-Court	3.50
08/11/2021	Filing Fee-Court	3.50
08/16/2021	Filing Fee-Court	3.50
08/23/2021	Filing Fee-Court	3.50
08/24/2021	Filing Fee-Court	3.50
08/24/2021	Filing Fee-Court	3.50
08/30/2021	Filing Fee-Court	3.50
08/30/2021	Filing Fee-Court	3.50
09/01/2021	Filing Fee-Court	3.50
09/07/2021	Filing Fee-Court	3.50
09/16/2021	Filing Fee-Court	3.50
09/16/2021	Filing Fee-Court	3.50
09/16/2021	Filing Fee-Court	3.50
09/21/2021	Filing Fee-Court	3.50
09/21/2021	Filing Fee-Court	3.50
09/21/2021	Filing Fee-Court	3.50
09/22/2021	Filing Fee-Court	3.50
09/24/2021	Filing Fee-Court	3.50
09/25/2021	Filing Fee-Court	3.50
09/29/2021	Filing Fee-Court	3.50

Date	Description	Amount	
09/29/2021	Filing Fee-Court	3.50	
09/29/2021	Filing Fee-Court	3.50	
09/29/2021	Filing Fee-Court	3.50	
09/29/2021	Filing Fee-Court	3.50	
09/30/2021	Filing Fee-Court	3.50	
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11/08/2021	Filing Fee-Court	3.50	
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11/08/2021	Filing Fee-Court	3.50	
11/12/2021	Filing Fee-Court	3.50	
11/12/2021	Filing Fee-Court	3.50	
11/12/2021	Filing Fee-Court	3.50	
11/15/2021	Filing Fee-Court	14.00	
11/18/2021	Filing Fee-Court	3.50	

Date	Description	Amount	
11/19/2021	Filing Fee-Court	3.50	
11/22/2021	Filing Fee-Court	3.50	
01/06/2022	Filing Fee-Court	3.50	
01/20/2022	Filing Fee-Court	3.50	
01/20/2022	Filing Fee-Court	2,440.00	
		5,862.41	·



Envelope # 4148374

Envelope Information

Envelope Id 4148374

Submitted Date 4/15/2019 5:42 PM PST **Submitted User Name**

kgallagher@mcdonaldcarano.com

Case Information

Location

Clark District Criminal/Civil

Category

Civil

Case Type

Other Tort

Filings

Filing Type

EFile

Filing Code

Complaint (Business Court) -COMPB (CIV)

Filing Description

Complaint

Client Reference Number

19438-3

Courtesy Copies

kgallagher@mcdonaldcarano.com, plundvall@mcdonaldcarano.com, mcarter@mcdonaldcarano.com

Filing on Behalf of

Fremont Emergency Services (Mandavia), Ltd.

Filing Status

Submitting

Lead Document

File Name Description Complaint (Business Complaint.pdf

Security

Download Original File

Court) - COMPB (CIV)

Filing Type

EFile

Filing Code

Civil Cover Sheet - CCS (CIV)

Initial Appearance Fee Disclosure.pdf

Initial Appearance Fee Disclosure - IAFD (CIV)

Fees

Complaint (Business Court) - COMPB (CIV)

Description

Amount

Filing Fee

\$1,530.00

Filing Total: \$1,530.00

Civil Cover Sheet - CCS (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Initial Appearance Fee Disclosure - IAFD (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Total Filing Fee

\$1,530.00

Payment Service Fee

\$45.90

E-File Fee

\$3.50

Envelope Total: \$1,579.40

Party Responsible

Fremont Emergen...

Transaction

\$1,579.40

for Fees

Amount

Order Id

5070291

Payment Account

Kristen Gallagher

Transaction Id

004148374-0

Filing Attorney

Kristen Gallagher

Transaction

Authorized

Response

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Envelope Information

Envelope Id

4159106

Submitted Date

4/17/2019 11:38 AM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 11

Category

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case #

A-19-792978-B

Assigned to Judge

Gonzalez, Elizabeth

Filings

Filing Type

EFileAndServe

Filing Code

Peremptory Challenge - CHLG

(CIV)

Filing Description

Peremptory Challenge of Judge

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services

Mandavia Ltd

Filing Status

Submitting

Lead Document

File Name

Peremptory Challenge of

Judge.pdf

Description

Peremptory Challenge -

CHLG (CIV)

Security

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eService Details

Status

Name

Firm

Served

Date Opened

4
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2
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Status	Name	Firm	Served	Date Opened
Not Sent	Pat Lundvall	McDonald Carano LLP	No	Not Opened
Not Sent	Kristen T. Gallagher	McDonald Carano LLP	No	Not Opened
Not Sent	Amanda M. Perach	McDonald Carano LLP	No	Not Opened
Not Sent	Beau Nelson	McDonald Carano LLP	No	Not Opened
Not Sent	Marianne Carter	McDonald Carano LLP	No	Not Opened
Not Sent	Karen Surowiec	McDonald Carano LLP	No	Not Opened

Parties with No eService

Name

Address

United Healthcare Insurance

Company

Name

Address

United Healthcare Services Inc

Name

Address

UMR Inc

Name

Address

Oxford Health Plans Inc

Name

Address

Sierra Health and Life Insurance

Company Inc

Name

Address

Sierra Health-Care Options Inc

Name

Address

Health Plan of Nevada Inc

Fees

Peremptory Challenge - CHLG (CIV)

Description

Filing Fee

Amount

\$450.00

Filing Total: \$450.00

Total Filing Fee Payment Service Fee \$450.00

\$13.50

E-File Fee

\$3.50

Envelope Total: \$467.00

Party Responsible

for Fees

Fremont Emergen...

Transaction

\$467.00

Payment Account

Kristen Gallagher

Transaction Id

5082592

Filing Attorney

Kristen Gallagher

Order Id

Amount

004159106-0

Transaction

Authorized

Response

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Envelope Information

Envelope Id

4165015

Submitted Date

4/18/2019 10:27 AM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Category

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case #

A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Summons Electronically Issued -Service Pending - SEI (CIV)

Filing Description

Summons - Health Plan of Nevada,

Inc.

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services

Mandavia Ltd

Filing Status

Submitting

Lead Document

File Name

Summons - Health Plan of

Nevada, Inc..pdf

Description

Summons

Electronically Issued -

Service Pending - SEI

(CIV)

Security

Download

Original File

eService Details

Summons Electronically Issued - Service Pending - SEI (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Summons Electronically Issued - Service Pending - SEI (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Summons Electronically Issued - Service Pending - SEI (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Summons Electronically Issued - Service Pending - SEI (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Summons Electronically Issued - Service Pending - SEI (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Summons Electronically Issued - Service Pending - SEI (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Total Filing Fee

\$0.00

E-File Fee

\$3.50

Envelope Total: \$3.50

Party Responsible

Payment Account

Fremont Emergen...

Transaction

Amount

\$3.50

for Fees

Kristen Gallagher

Transaction Id

5089473



Envelope Information

Envelope Id

4202633

Submitted Date

4/25/2019 3:15 PM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Category

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case #

A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Proof of Service - PSER (CIV)

Filing Description

Proof of Service - UMR, Inc. dba **United Medical Resources**

Client Reference Number

19439-3

Filing on Behalf of

Fremont Emergency Services (Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

Summons - UMR, Inc. dba United

Medical Resources - version

1.pdf

Description

Proof of Service -

PSER (CIV)

Security

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eService Details

United Healthcare Insurance Company

Name

Address

United Healthcare Services Inc

Name

Address

UMR Inc

Name

Address

Oxford Health Plans Inc.

Name

Address

Sierra Health and Life Insurance

Company Inc

Name

Address

Sierra Health-Care Options Inc

Name

Address

Health Plan of Nevada Inc

Fees

Proof of Service - PSER (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Proof of Service - PSER (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Proof of Service - PSER (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Total Filing Fee

\$0.00

E-File Fee

\$3.50

Envelope Total: \$3.50

Party Responsible

Fremont Emergen...

Transaction

\$3.50

for Fees

Amount



Envelope Information

Envelope Id

4220735

Submitted Date

4/30/2019 10:59 AM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Category

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case #

A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Affidavit of Service - AOS (CIV)

Filing Description

Declaration of Service - Health Plan

Nevada, Inc.

Client Reference Number

19438-3

Filing Status

Submitting

Lead Document

File Name

AOS - HPN.pdf

Description

Affidavit of Service -

AOS (CIV)

Security

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eService Details

Status

Name

Firm

Served

Date Opened

Not Sent

Pat Lundvall

McDonald Carano LLP

No

Not Opened

Not Sent

Kristen T. Gallagher

McDonald Carano LLP

No

Not Opened

Name

Address

Oxford Health Plans Inc.

Name

Address

Sierra Health and Life Insurance

Company Inc

Name

Address

Sierra Health-Care Options Inc

Name

Address

Health Plan of Nevada Inc

Fees

Affidavit of Service - AOS (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Affidavit of Service - AOS (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Affidavit of Service - AOS (CIV)

Description

Amount

Filing Fee

\$0.00

Filing Total: \$0.00

Total Filing Fee

\$0.00

E-File Fee

\$3.50

Envelope Total: \$3.50

Party Responsible

Fremont Emergen...

Transaction

\$3.50

for Fees

Kristen Gallagher

Transaction Id

5153100

Payment Account Filing Attorney

Kristen Gallagher

Order Id

Amount

004220735-0

Transaction

Authorized

Response

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Envelope Information

Envelope Id

4247239

Submitted Date

5/6/2019 9:33 AM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Category

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case # A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Affidavit of Service - AOS (CIV)

Filing Description

Affidavit of Service - Oxford Health Plans, Inc.

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services

(Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

AOS - Oxford Health Plans,

Inc..pdf

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Original File

eService Details

Status

Name

Firm

Served

Date Opened

Envelope Total: \$3.50

Party Responsible

for Fees

Fremont Emergen...

Transaction Amount \$3.50

Payment Account

Kristen Gallagher

Transaction Id

5183902

Filing Attorney

Kristen Gallagher

Tarisactio

Order Id

004247239-0

Transaction Response

Authorized

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Version: 2017.2.5.7059



Date:

Order#:

07/02/2019 5422

AMP CC c/m 19438-3

Additional Information:

Please Enter Your Bar Number 12399

Bill To: (Customer ID#3227)

Ship To:

McDonald Carano LLP Amanda Perach P.O. Box 2670 Reno, NV 89505 United States 702-257-4538 aperach@mcdonaldcarano.com McDonald Carano LLP Amanda Perach 2300 West Sahara Avenue Suite 1200 Las Vegas, NV 89102 United States 702-257-4538

Payment Method:

Shipping Method:

Credit Card: Visa Amanda M. Perach *********0114

Pickup at Las Vegas Office

Qty Price Code Description Total COGS-COGS Certificate of Good Standing - Standard: \$25, $_1$ \$25.00 \$25.00 2-5 days to process

Subtotal: \$25.00

Tax: \$0.00

Shipping & Handling: \$0.00

Grand Total: \$25.00



Envelope Information

Envelope Id

5717007

Submitted Date

2/27/2020 5:16 PM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case #

Category

A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Notice of Entry of Order - NEOJ

(CIV)

Filing Description

Notice of Entry of Order Re:

Remand

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services

(Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

Notice of Entry of Order of

Remand.pdf

Description

Notice of Entry of Order

- NEOJ (CIV)

Security

Download

Original File

eService Details

Status	Name	Firm	Served	Date Ope
Not Sent	Cindy Bowman	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Cindy Bowman	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opens
Not Sent	Cindy Bowman	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opens
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
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Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Beau Nelson	McDonald Carano LLP	No	Not Opene
Not Sent	Marianne Carter	McDonald Carano LLP	No	Not Opene
Not Sent	Karen Surowiec	McDonald Carano LLP	No	Not Opens
Not Sent	Kimberly Kirn	McDonald Carano LLP	No	Not Opene

Fees

Notice of Entry of Order - NEOJ (CIV)

Description	Amount
Filing Fee	\$0.00
	Filing Total: \$0.00

Total Filing Fee	\$0.00
E-File Fee	\$3.50
	Envelope Total: \$3.50

Party Responsible for Fees	Fremont Emergen	Transaction Amount	\$3.50
Payment Account	Kristen T. Gallagher	Transaction Id	6842818
Filing Attorney	Kristen Gallagher	Order Id	005717007-0

Authorized Transaction

Response



Envelope Information

Envelope Id

5717022

Submitted Date

2/27/2020 5:19 PM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Category

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case #

A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Request - REQT (CIV)

Filing Description

Request for Status Check

Client Reference Number

19438-3

Comments to Court

Hearing Requested

Filing on Behalf of

Fremont Emergency Services

(Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

Request for Status Check.pdf

Description

Request - REQT (CIV)

Security

Download

Original File

eService Details

Status

Name

Firm

Served Date Oper

Not Sent Pat Lundvall

McDonald Carano LLP

No

Not Opens

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Status	Name	Firm	Served	Date Ope
Not Sent	Cindy Bowman	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Cindy Bowman	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opens
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
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Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Opene
Not Sent	Beau Nelson	McDonald Carano LLP	No	Not Opene
Not Sent	Marianne Carter	McDonald Carano LLP	No	Not Opens
Not Sent	Karen Surowiec	McDonald Carano LLP	No	Not Opens
Not Sent	Kimberly Kirn	McDonald Carano LLP	No	Not Opene
Fees				

Request - REQT (CIV)

Response

Description	Amount
Filing Fee	\$0.00
	Filing Total: \$0.00

Total Filing Fee	\$0.00
E-File Fee	\$3.50

Envelope Total: \$3.50

Party Responsible for Fees	Fremont Emergen	Transaction Amount	\$3.50
Payment Account	Kristen T. Gallagher	Transaction Id	6842833
Filing Attorney	Kristen Gallagher	Order Id	005717022-0
Transaction	Authorized		



Envelope Information

Envelope Id

5798692

Submitted Date

3/13/2020 3:29 PM PST

Submitted User Name

Case Type

NRS Chapters 78-89

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Case Initiation Date

4/15/2019

Category

Civil

A-19-792978-B

Case #

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Notice of Intent to Take Default -

NITD (CIV)

Filing Description

Notice of Intent to Take Default as to: (1) Defendant UnitedHealth Group, Inc. on All Claims, and (2) All Defendants on the First Amended Complaint's Eighth Claim for Relief

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services (Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

Notice of Intent to Take

Default.pdf

Description

Notice of Intent to Take

Default - NITD (CIV)

Security

Public Filed Document

Download

Original File

Status	Name	Firm	Served	Date (
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not O
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not O _I
Not Sent	Raiza Anne Torrenueva	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not O
Not Sent	Brittany Llewellyn	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not O _j
Not Sent	Flor Gonzalez-Pacheco	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Kelly Gaez	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not O
Not Sent	Beau Nelson	McDonald Carano LLP	No	Not Op
Not Sent	Marianne Carter	McDonald Carano LLP	No	Not O
Not Sent	Karen Surowiec	McDonald Carano LLP	No	Not Op
Not Sent	Kimberly Kirn	McDonald Carano LLP	No	Not Op

Fees

Notice of Intent to Take Default - NITD (CIV)

Description	Amount
Filing Fee	\$0.00
, mig i ee	Filing Total: \$0.00

Total Filing Fee	\$0.00
E-File Fee	\$3.50
E-1 110 1 00	Envelope Total: \$3.50

Party Responsible	Fremont Emergen	Transaction	\$3.50
for Fees		Amount	
Payment Account	Kristen T. Gallagher	Transaction Id	6932363
Filing Attorney	Kristen Gallagher	Order Id	005798692-0
Transaction	Authorized		

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Response



Envelope Information

Envelope Id

5872438

Submitted Date

3/31/2020 9:11 AM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Filings

Filing Type

EFileAndServe

Filing Code

Audiovisual Transmission Equipment Appearance Request -

ATEAR (CIV)

Filing Description

Audiovisual Transmission Equipment Appearance Request Re: April 3, 2020 Status Check

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services (Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

Audiovisual Transmission Equipment Appearance

Request.pdf

Description

Audiovisual Transmission

Equipment Appearance

Request - ATEAR (CIV)

Security

Public Filed Document

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eService Details

Status	Name	Firm	Served	Date (
Not Sent	Pat Lundvall	McDonald Carano LLP	No	Not Op
Not Sent	Kristen T. Gallagher	McDonald Carano LLP	No	Not Op

Status	Name	Firm	Served	Date (
Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Raiza Anne Torrenueva	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Brittany Llewellyn	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Flor Gonzalez-Pacheco	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Kelly Gaez	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
Not Sent	Beau Nelson	McDonald Carano LLP	No	Not Op
Not Sent	Marianne Carter	McDonald Carano LLP	No	Not Op
Not Sent	Karen Surowiec	McDonald Carano LLP	No	Not Op
Not Sent	Kimberly Kirn	McDonald Carano LLP	No	Not Op

Fees

Audiovisual Transmission Equipment Appearance Request -ATEAR (CIV)

Description	Amount
Filing Fee	\$0.00
	Filing Total: \$0.00

Total Filing Fee	\$0.00
E-File Fee	\$3.50

Envelope Total: \$3.50

Party Responsible	Fremont Emergen	Transaction	\$3.50
for Fees		Amount	
Payment Account	Kristen T. Gallagher	Transaction Id	7006746
Filing Attorney	Kristen Gallagher	Order Id	005872438-0
Transaction	Authorized		

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Response



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Case # A-19-792978-B - Fremont Emergency Services (Mandavia)

Envelope Information

Envelope Id

5859697

Submitted Date

3/26/2020 8:09 PM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Category

Civil

Case Type

NRS Chapters 78-89

Case Initiation Date

4/15/2019

Case #

A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Opposition to Motion to Dismiss - OMD (CIV)

Description

Filing Fee

Amount

\$0.00

Filing Total: \$0.00

Appendix - APEN (CIV)

Description

Filing Fee

Amount

\$0.00

Filing Total: \$0.00

\$0.00

Total Filing Fee

E-File Fee

\$3.50

Envelope Total: \$3.50

Party Responsible for Fees

Fremont Emergency Services (Mandavia) Ltd

Transaction Amount

\$3.50

Payment Account

Kristen T. Gallagher

Transaction Id

6994190

Filing Attorney

Kristen Gallagher

Order Id

005859697-0

Transaction Response

Payment Complete

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Version: 2019.0.6.8724





Page 2 of 2

013245



Envelope Information

Envelope Id

6014681

Submitted Date

5/5/2020 3:03 PM PST

Submitted User Name

Case Type

NRS Chapters 78-89

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Case Initiation Date

4/15/2019

Category

Civil

Case #

A-19-792978-B

Assigned to Judge

Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Notice of Entry of Order - NEOJ

(CIV)

Filing Description

Notice of Entry of Order Shortening Time Re: Plaintiffs' Motion to Compel Defendants' Meet and Confer Participation and Related

Action

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services (Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

Notice of Entry of Order Shortening Time re Plaintiffs' Motion to Compel Defendants' Description

Notice of Entry of Order

- NEOJ (CIV)

Security

Public Filed Document

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\$3.50

E-File Fee

Envelope Total: \$3.50

Party Responsible

for Fees

Fremont Emergen...

Transaction

\$3.50

Payment Account

Kristen T. Gallagher

Amount Transaction Id

7144897

Filing Attorney

Transaction

Kristen Gallagher

Authorized

Order Id

006014681-0

Response

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Envelope Information

Envelope Id

6035670

Submitted Date

5/11/2020 1:07 PM PST

Submitted User Name

Case Type

NRS Chapters 78-89

kgallagher@mcdonaldcarano.com

Case Information

Location

Department 27

Case Initiation Date

4/15/2019

Category

Civil

Case #

A-19-792978-B

Assigned to Judge Allf, Nancy

Filings

Filing Type

EFileAndServe

Filing Code

Audiovisual Transmission

Equipment Appearance Request -

ATEAR (CIV)

Filing Description

Audiovisual Transmission **Equipment Appearance Request** Re: May 14, 2020 Hearings

Client Reference Number

19438-3

Filing on Behalf of

Fremont Emergency Services (Mandavia) Ltd

Filing Status

Submitting

Lead Document

File Name

Audiovisual Transmission **Equipment Appearance Request** re May 14, 2020 Hearings.pdf

Description

Audiovisual Transmission

Equipment Appearance Request - ATEAR (CIV) Security

Public Filed Document

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	Status	Name	Firm	Served	Date (
-	Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Audra Bonney	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Raiza Anne Torrenueva	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Brittany Llewellyn	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Flor Gonzalez-Pacheco	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Kelly Gaez	Weinberg, Wheeler, Hudgins, Gunn & Dial, LLC	No	Not Op
	Not Sent	Beau Nelson	McDonald Carano LLP	No	Not Op
	Not Sent	Marianne Carter	McDonald Carano LLP	No	Not Op
	Not Sent	Karen Surowiec	McDonald Carano LLP	No	Not Op
	Not Sent	Kimberly Kirn	McDonald Carano LLP	No	Not Op

Fees

Audiovisual Transmission Equipment Appearance Request - ATEAR (CIV)

Description	Amount
Filing Fee	\$0.00
	Filing Total: \$0.00

Total Filing Fee	\$0.00
E-File Fee	\$3.50
	E . T . 1 00 50

Envelope Total: \$3.50

Party Responsible for Fees	Fremont Emergen	Transaction Amount	\$3.50
Payment Account	Kristen T. Gallagher	Transaction Id	7166654
Filing Attorney	Kristen Gallagher	Order Id	006035670-0
Transaction	Authorized		
Pachanca			



Envelope Information

Envelope Id

6043793

Submitted Date

5/12/2020 5:05 PM PST

Submitted User Name

kgallagher@mcdonaldcarano.com

Case Information

Filings

Filing Type

EFileAndServe

Filing Code

Reply Points and Authorities - RPA (CIV)

Filing Description

Plaintiff's Reply in Support of Motion to Compel Defendants' Meet and Confer Participation and Related Action on Order Shortening Time

Client Reference Number

19438-3

Fremont Emergency Services (Mandavia) Ltd

Filing Status

Filing on Behalf of

Submitting

Lead Document

File Name

Plaintiffs' Reply in Support of Motion to Compel Defendants' Meet and Confer Participation and Related Action on Order Shortening Time.pdf

Download

Original File

eService Details

Status Name Firm

Served Date (