Case	No.	

In the Supreme Court of Nevada

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

Nov 17 2022 10:58 AM Elizabeth A. Brown Clerk of Supreme Court

Electronically Filed

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,

and

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

Real Parties in Interest.

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	Motion to Seal Certain Confidential Trial Exhibits – Volume 15 of 18 (FILED UNDER SEAL)			
70	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 16 of 18 (FILED UNDER SEAL)	12/24/21	28 29	6738–6817 6818–6854
71	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 17 of 18 (FILED UNDER SEAL)		6855-7024	
72	Supplemental Appendix of Exhibits to Motion to Seal Certain Confidential Trial Exhibits – Volume 18 of 18 (FILED UNDER SEAL)	12/24/21	29 30	7025–7067 7068–7160
82	82 Transcript of Hearing Regarding Unsealing 10/05/22 33 Record (FILED UNDER SEAL)		7825–7845	
75	Transcript of Proceedings Re: Motions (FILED UNDER SEAL)	01/12/22	31	7403–7498
76	Transcript of Proceedings Re: Motions (FILED UNDER SEAL)	01/20/22	31	7499–7552
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79	Transcript of Proceedings Re: Motions Hearing (FILED UNDER SEAL)	02/10/22	32	7575–7695
80	Transcript of Proceedings Re: Motions Hearing (FILED UNDER SEAL)	02/16/22	32	7696–7789
83	Transcript of Status Check (FILED UNDER SEAL)	10/06/22	33	7846–7855
98	Transcript of Status Check (FILED UNDER SEAL)	10/11/22	46	11,150–11,160

CERTIFICATE OF SERVICE

I certify that on November 15, 2022, I submitted the foregoing "Petitioners' 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:

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MR. BLALACK: Strike that.

BY MR. BLALACK:

- Q So according to UMR's claim data, UMR allowed payment of almost the exact same amount, that's off by one penny, on both claims, just as Mr. Ziemer testified he would have expected, right?
 - A Yes, I believe that's accurate.
- Q All right. Let's look at the other example that Mr. McManis showed Mr. Ziemer.

MR. BLALACK: So Shane, could you pull up Mr. Ziemer's testimony from November 15th again? On page 231, line 12. Pull it up a little bit.

BY MR. BLALACK:

- Q And so instead of reading it like I did before, I'm going to ask you and the jury, sir, to start on page 12 and read down to the next page, page 232 at line 11.
 - A You meant row 12; is that right?
 - Q Line 12. Yes, starting line 12.
 - A Line 12? Line 12, yeah.
- Q At the question, "All right, Mr. Ziemer".
- A Yeah.
- Q Read to the bottom of the page, and then go to the next page, and read to line 11 of the next page. Once you're done and the jury's done, if you could now skip to page 233, line 11?
 - A Okay, I'm done.
 - Q And read line 11 to 25, so the bottom of the page.

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- Q And go to page 235. There's a final Q and A I want to show you and the jury. Line 10 to 13 on page 235. Do you see that, sir?
 - A I do, yes.
- Q All right. Mr. Deal, based on the testimony from Mr. Ziemer and the questioning from Mr. McManis, what did you understand Mr. McManis was purporting to show with this summary, Plaintiffs' Exhibit 473-A?

A So basically, the same point, which is perhaps casting aspersions or doubts on the adjudication of the claims by saying, same employer, same year, same codes, same seeming things that one would expect to similar allowed amounts, same bill charges. And yet, he sees some varying allowed amounts across these different claims. In this case, I think it was three different amounts that he referenced across four claims.

Q In fact, the Plaintiffs' Exhibit, PX 473-A, is up on the screen now. If you look at the allowed about row, row 9, how many different values are there?

A There's three unique values there. \$230.30 that shows up twice, \$253.33 shows up once, and \$315.25 shows up once.

Q Do you know if these four claims on Plaintiffs' Exhibit 473-A can also be found on Plaintiffs' disputed claims list, Plaintiffs' Exhibit 473?

A Yes, they can.

MR. BLALACK: Shane, would you bring up Plaintiffs'

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1	disputed o	claims list? 473, and in the bottom half. I'll represent that this
2	is exactly	the same data as Plaintiffs' Exhibit 473. I've just done some of
3	the I thi	nk we've got some highlight beforehand. Do you have that,
4	Shane? T	here we go.
5	BY MR. B	LALACK:
6	Q	Now, you see, Mr. Deal, that I've highlighted
7	pre-highli	ghted those four claims?
8	А	I see that, yes.
9	Q	Now, can you
10		MR. BLALACK: Shane, please scroll down to 6773. Do you
11	have it?	
12		MR. GODFREY: Yes, sir.
13	BY MR. B	LALACK:
14	Q	All right. If you can, Mr. Deal, confirm whether that first row,
15	the demo	nstrative Mr. McManis showed you or excuse me showed
16	Mr. Zieme	er and the jury Plaintiffs' Exhibit 473-A; is that the same claim as
17	row 9130	on the disputed claims list? If you want, I can take you through
18	some of t	he data?
19	А	Yeah, I should be able to do it. If you can scroll so I can see
20	date of se	rvice? Just pause there for a moment. Yes, I see all four of the
21	dates of s	ervice match. I see all four of the billed CPT codes match. I see
22	all four of	the charges match.
23	Q	Okay.
24	А	So these appear to be the same claims.

Mr. Deal, does the claim on row 11202 of the disputed claims

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1	list, Plaintif	fs' Exhibit 473, correspond to the second claim on Mr.
2	McManis' d	demonstrative?
3	А	Yes, it does.
4	Q	What are you relying on for that?
5	А	Again, the data of service, the CPT code, the charge, and the
6	allowed am	nounts. I believe the employer also if we can scroll to the
7	employer?	I'll just verify that as well. Yes, yes.
8	Q	Okay. Mr. Deal, does this claim on row 10817 of the disputed
9	claims list o	correspond to the third claim on Mr. McManis' demonstrative
10	473-A using	g the same criteria you just described?
11	Α	It does. Yes.
12	Q	Finally, Mr. Deal, does the claim on row 6774 on the disputed
13	claims list o	correspond to the fourth claim his demonstrative, again, using
14	the same c	riteria?
15	А	Yes, it does.
16	Q	Mr. Deal, were you able to locate all four of these claims and
17	underlying	claims data that UMR produced in this lawsuit which is
18	contained i	n Defense Exhibit 4006?
19	А	I was, yes.
20	Q	I want to start by looking more closely at the third claim on
21	the demon	strative that Mr. McManis used.
22		MR. BLALACK: Shane, could you please keep the
23	demonstra	tive open, but close Plaintiffs' 473? And then pull up Defense
24	Exhibit 400	6, again, the UMR claims data. If you would go to row 949
25	and highlig	tht that row?

1	BY MR. BL	ALACK:
2	Q	Okay. Mr. Deal, were you able to determine whether the
3	third claim	on Mr. McManis' demonstrative, 473-A, and the
4	correspon	ding claim on the disputed claims list, Exhibit 473, are the
5	same clair	n as shown on row 949 of the UMR claims data?
6	А	Yes, the third one is October 23rd of 2019, and that's
7	highlighte	d up above as well. Same bill charges.
8	Q	Well, let me just ask it this way. What is the employer listed
9	in column	D?
10	А	Scroll to the left there. Las Vegas Sands.
11	Q	And what's the group number in column E?
12	А	76411 excuse me. 76410018.
13	Q	And on the is the employer with the new number the same
14	as in the d	lemonstrative that Mr. McManis used?
15	А	Yes, they are.
16	Q	And the date of service; is it the same?
17	А	It is.
18	Q	Is the charge amount 1,428 the same?
19	А	Yes.
20	Q	Look at this, Mr. Deal. When we get to column S, the
21	allowed a	mount, what does the actual historical data the UMR claims
22	system sh	ow was the amount that UMR allowed for this claim?
23	А	\$230.30.
24	Q	And that's for, again, claim number three, row which is
25	5893 in the	e demonstrative?

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	А	That's right.	So that would	match the	first and	the fou	rth
row	, the all	owed amoun	ts for this.				

- Q Now, whereas before you had two claims that were reimbursed at 230.30. Now, you have three?
 - A That's correct. Yes.
- O Now, does the third claim on Mr. McManis' demonstrative and the corresponding claim on Plaintiffs' disputed claims list, Exhibit 473, accurately report the amount that UMR actually allowed for the disputed claim as reflected in the claims data produced by UMR?
 - A No, it doesn't.
 - Q According to UMR's data, the amount was the 230?
 - A And 30 cents. That's right. \$230.30.
- Q Now, let's look at that second claim on the demonstrative.
- The one that has allowed amount 315.25. Do you see that?
- 15 A I do. Yes.

MR. BLALACK: Now, please pull up Defense Exhibit 4006 again, Shane. That's the underlying UMR claims data. Go to row 3 and highlight row 3. You got that?

19 BY MR. BLALACK:

- Q And Mr. Deal, are you able to tell me whether the second claim on Mr. McManis' demonstrative, the one that's got the amount of \$315.30 as the allowed. Are you able to determine whether that claim and the corresponding claim on the Plaintiffs' disputed claims list are the same claim as the one shown in row 3 of UMR's claims data?
 - A Yes.

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1	Q	How can you confirm that they are the same?
2	А	Again, looking at the charge, the code, the date of service.
3	Q	Mr. Deal, at this time, we're going right to left. Right to left,
4	starting wi	th column S. Is the allowed amount of UMR's claims data
5	insist on th	e same allowed amount that's in Mr. McManis'
6	demonstra	tive?
7	А	It is. Yes.
8	Q	As \$315.25?
9	А	That's correct.
10	Q	And going to column R. Is the charge amount the same?
11	А	It is. \$1,428.
12	O.	And is the date of service in column O of UMR data also the
13	same date	of service in Plaintiffs' demonstrative?
14	А	Yes. June 21st of 2019 in both data sets.
15	Q	Well, looky here, sir. Look what we found. What's in column
16	D of UMR	data? What is the employer listed for this claim in the UMR
17	claims syst	tem?
18	А	Switch, Ltd.
19	Q	Mr. Deal, for this claim, do you see any reference anywhere
20	in the UMF	R claims data, Las Vegas Sands?
21	А	I didn't well, not for this claim. For the ones we just looked
22	at, the othe	er three, yes. But for this claim, no.
23	Q	For the claim that's in UMR data, row 2 that corresponds to
24	the demon	strative claim in the second line of Mr. McManis'
25	demonstra	tive. Mr. McManis' demonstrative refers to the employer as

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1	being Las	Vegas Sands, correct?
2	А	That's correct.
3	Q	Which is the same employer sponsor identified for the other
4	three clain	ns, right?
5	А	That's correct.
6	Q	Which might lead one to think that the allowed amount
7	would be	the same as the other three claims, right?
8	А	That's what I understand the line of questioning was sort of
9	implying t	hat it should have been the same and it wasn't.
10	Q	But in fact, when you go to the underlying raw data that UMR
11	produced	in this case, the employer sponsor is not Las Vegas Sands.
12	А	That's correct.
13	Q	What's the name of the employer again, sir?
14	А	Switch, Ltd.
15	Q	And just so that there's no confusion and it's not just a typo.
16	When you	went to see whether the group number in column E of UMR
17	data is diff	erent from the group number that Mr. McManis showed Mr.
18	Ziemer an	d the jury in the summary?
19	А	It's different. Yeah. The first three digits, I think, are the
20	same. But	then it's 12707 for Switch, Ltd. And it's 10018 for Las Vegas
21	Sands.	
22	Q	You have two different employers are listed in these
23	document	s, is the fact that you have different group numbers surprising?
24	А	It's not at all surprising.
25	Q	That would be surprising if they weren't different group

| numbers?

A It wouldn't surprise me one way or the other. It could occur, it couldn't, it could be different. But certainly, there would be no reason to think they'd be the same.

Q Okay. After your review of the underlying claims data for UMR here, did you have a view about whether the demonstrative PX 473-A and the corresponding claims referenced in the demonstrative and disputed claims list, Plaintiffs' 473, accurately captured employer information listed in the underlying claims data produced by UMR in this case?

A It got it right for three of the four claims, but not the fourth one.

Q Now, Mr. Deal, given that there are different employers for these claims, Las Vegas Sands and Stitch, Ltd., is there anything surprising to you about the fact that this claim has a different allowed amount from the other three claims on Mr. McManis' demonstrative?

A No, it's not surprising at all.

Q Is there anything in the data you have discussed with the jury about these claims that Mr. McManis showed Mr. Ziemer which led you to conclude that the reimbursements reflected here are arbitrary?

A No, in fact, they look quite consistent. When it's the same employer and the same code and the same year, all the alloweds are the same. When it's a different employer, same code, different amount; not surprising at all.

MR. BLALACK: Okay. I'm going to run through quickly just a

handful of other examples, and then I can wrap up, Your Honor.	Do you
want to take a break?	

THE COURT: We're close. I would say can you go till 3:45?

Or do you want to take a break now?

MR. BLALACK: I've got about -- I've got about 10 minutes, but I'm fine to come back and tie it off and juts give it to Mr. Leyendecker.

THE COURT: Everybody okay with taking a break now and then having a one last hour? Okay. So let's take a recess. We'll be back at 3:55.

During the recess, don't talk with each other or anyone else on any subject connected with the trial. Don't read, watch or listen to any report of or commentary on the trial. Don't discuss this case with anyone connected to it by any medium of information, including without limitation; newspapers, television, radio, internet, cell phones or texting.

Don't conduct any research on your own relating to the case.

Don't consult dictionaries, use the internet or use reference materials.

Don't talk, text, tweet, Google issues or conduct any other book or computer research, and don't post on any social media with regard to any issue, party, witness or attorney involved in the case. Most importantly, do not form or express any opinion on any subject connected with the trial until the matter is submitted to you.

Have a good break. See you at 3:55.

THE MARSHAL: All rise for the jury.

[Jury out at 3:38 p.m.]

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	[Outside the presence of the jury]
	THE COURT: You may step down.
	THE WITNESS: Thank you, Your Honor.
	THE COURT: Okay. Room is clear. Plaintiff, anything for the
record?	
	MR. ZAVITSANOS: I'm sorry, Your Honor?
	THE COURT: Anything for the record?
	MR. LEYENDECKER: No, Your Honor.
	THE COURT: Defendant?
	MR. BLALACK: I have something, Your Honor. As I
previewed	when we were at the sidebar, I'm almost at the end of my
examinatio	on now, so I'd like to raise what I'd like to do to conclude my

So what I'd like to do is, as I mentioned, Mr. Deal's reasonable value opinion is based on two things. It's based on a range that he had, which was the range of the median range in the out of the network rates that UnitedHealthcare had with other ER providers. And then the median rates that TeamHealth claims had with other health insurance. That was his definition of what is a fair market rate and reasonable value, which he basically laid the predicate for, but did not articulate the basis for it.

examination in forming my basis for it.

Based on the in limine rulings that the Court had before the beginning of trial, it's my view that that top value is not admissible, and I'm not asking to revisit that. That's been resolved and ruled on. We've made our record, and there's no need to -- we'll put in our offer of proof,

but no need to revisit the [indiscernible]. The bottom measure though is still an available option, and here's why.

When Plaintiffs moved to exclude in motion in limine number 3 the offering of evidence regarding network rates, I objected to that argument and made a number of points. One of which was that Mr. Deal, our primary expert, I explained, would be relying on this benchmarking value as a core opinion for our liability in the case. And I explained why it was sound in economics, independent of any legal analysis, and that it should be admitted on that basis.

Your Honor did not grant the motion at that time. Your Honor specifically said -- and I'm quoting here. This is at page 211 of the transcript on October 19th, line 25 written over to 212. The Court said, "Okay, you know, I'm going to defer this to the time of trial only because I want to see how the Plaintiffs' evidence comes in". You did say, "I'm inclined to say that in-network just are relevant. But if I preclude your witness from testifying on that, I'll make sure you have an offer of proof on the record, and an objection on the record, and we'll take it on its time in front of the jury". So where we left it on that argument was you were leaning in that direction but didn't rule and reserved on the issue until the appropriate time. It's my view that now is the appropriate time.

THE COURT: So I'm -- did I interrupt you?

MR. BLALACK: I had one more point to make, Your Honor.

THE COURT: Go ahead, please.

MR. BLALACK: In question of your ruling. Separate from that, Your Honor, we moved in limine concerning Plaintiffs' agreements

with other health insurers. And because of the Court's prior ruling on motion in limine 3 would acknowledge that that was an issue that had been resolved against us and was moot. But we know that we had a paired motion to that, which meant that the Plaintiffs should not be able to consult with evidence, offer evidence of our network rates and agreements with other ER providers.

So I said if we can't offer evidence of their network rates and agreements, they shouldn't be able to offer evidence on our network rates and agreements. Plaintiffs opposed that position, they opposed our motion. And the Court agreed with them and said that they should be able to offer. There should be evidence of our agreements and our rates with other ER providers was admissible and prevented and denied our motion in limine to exclude.

So where we stand as of now is that the expressed question of network rates being relevant to expert opinions was reserved and unresolved at settlement [indiscernible]. Our request to -- if we were going to not be able to offer theirs, then they shouldn't be able to introduce evidence on ours was denied. Meaning the evidence of our network rates and agreements with other providers is fair game. This is not the way I wanted to present my liability defense, but it's better than nothing.

So my request, Your Honor, is that I be able to have Mr. Deal explain the basis of his opinion that he just gave beyond just his experience and knowledge and judgment about why the allowed amounts represent a reasonable value by not referring to the range, but

1	at least explaining that he's got a benchmark for network, union, network
2	rates, and that that represents a reasonable basis for [indiscernible]. So
3	that's my [indiscernible].
4	THE COURT: I need to go and refresh my memory on the
5	issue.
6	MR. BLALACK: Sure.
7	THE COURT: Let's argue this at 3:55. That gives you guys a
8	chance to discuss it too.
9	MR. LEYENDECKER: Sure. Thank you, Your Honor.
10	MR. BLALACK: Thank you, Your Honor.
11	THE COURT: Thank you.
12	[Recess taken from 3:43 p.m. to 3:54 p.m.]
13	[Outside the presence of the jury]
14	THE COURT: Are we going to ask the witness to leave?
15	MR. BLALACK: Oh, sure.
16	THE COURT: Thank you, Mr. Deal.
17	THE WITNESS: Of course.
18	THE COURT: Okay. Plaintiffs?
19	MR. LEYENDECKER: A few things, Your Honor.
20	MR. BLALACK: Hold on.
21	THE COURT: Well, let me make sure that I can see
22	everybody.
23	MR. BLALACK: He's out, Your Honor.
24	MR. LEYENDECKER: Okay. Two things, Your Honor. It's
25	very straightforward.

Number one, we have not put on any evidence of their innetwork contracts, so I'm not sure where that came from. Number two, and honestly, more importantly, I think it was in February of this year that -- whether it was Your Honor or a Master issued a first ruling that said no in-network rights. At least two or three times since then, they've tried to come back to that. And each time you've been consistent in your rulings.

Now, with 100 percent clear knowledge and understanding of Your Honor's rulings on that, they chose to hire an expert and chose to put together an in-network file. And the reason for that is painfully obvious. It's because they pay us less than half of what they pay every other provider in-network.

And so how could they come in here and make a defense if they're going to make an analysis of the most obvious, fifth grader could understand, apples to apples comparison, which is out-of-network -- out-of-network. They can't. And so with full knowledge that you had said no, knowing they didn't want to go their route because it says they owe, they now say, save us from ourselves. And you should not.

MR. ZAVITSANOS: And one other thing, Your Honor. When this issue came up during pretrial, Your Honor, made some kind of a comment like, you don't like the idea of not having a -- of preventing a party from calling an expert. At that point, both Ms. Lundvall and I alerted the Court that we are willing to let him do a new analysis. We're not going to depose him. We just need -- I think Mr. Leyendecker said we just need his work papers, but we gave them plenty of opportunity,

1	without jamming them, without taking their deposition, and they elected
2	to stand pat on what they were doing. So I don't think there's anything
3	to talk about, Your Honor.
4	MS. LUNDVALL: Your Honor, the only additional point that I
5	would make and add to this presentation is this. Topic Number 4 of our
6	very first motion in limine dealt with the in-network negotiations that
7	[indiscernible] contracts
8	MR. ZAVITSANOS: You okay?
9	MS. LUNDVALL: More water.
10	UNIDENTIFIED SPEAKER: Can you get her some water
11	please, gentlemen?
12	THE COURT: So Marshall, will you let the jury know it will be
13	five more minutes?
14	Marshall, let them know it'll be five more minutes.
15	THE MARSHAL: Five minutes?
16	THE COURT: You were very polite to mention you've been
17	triple-teamed.
18	MR. BLALACK: Oh, well, I'm just assuming that Mr. McManis
19	is going to jump in here.
20	MR. ZAVITSANOS: Well, he's three times the lawyer, so
21	that's we're just making it fair.
22	MR. BLALACK: Well, go ahead.
23	MS. LUNDVALL: But the point being is that Topic Number 4
24	of our first motion in limine dealt with the healthcare provider's in-
25	network negotiations as well as the contracts that with United. That

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was granted. That was not going to be part of this trial. As part of the
reason the Court deferred ruling on topic number 3 was based upon
whether or not

THE COURT: Because I didn't know where you were going.

MS. LUNDVALL: -- that their [indiscernible]. We did not.
And so to the extent that we have had this issue does not -- they're
voluntarily trying to stick it in. You should not allow them to do so.

THE COURT: Do you guys want a couple of minutes?

MR. BLALACK: No, I'm ready, Your Honor. I mean, unless there's -- is there anybody else on that side?

MR. ZAVITSANOS: No, sir. No.

MR. BLALACK: Okay. So Your Honor, a couple of things.

One, I don't think the description of the sequence of the discovery rules is accurate, but we do not have a ruling barring us from offering evidence on network rates, network contracts, or anything of the kind at the time we gave Mr. Deal -- just the chronology is off. And, in fact, we have hours and hours and hours of testimony about network rates, network negotiations, network contracts of those [indiscernible].

Plaintiffs produced thousands and thousands of documents about network negotiations and network contracts. And both sides -- both sides in response to discovery requests voluntarily produced claims [indiscernible] showing their network and non-network rates for people other than [indiscernible].

So it's just not an accurate statement to say by the time of engagement we had some fully knowledge that the central premise of

our liability defense was somehow off limits. Now, over time, and particularly with rulings that the Court had in the summer based on rulings from the Special Master, it became more clear to us that that was where it was heading, which is why, obviously, we filed a motion in limine seeking confirmation that we be permitted to do -- to rely on this opinion. And in the event we weren't, making sure that the evidence of network rates involving us that might be used against us would be offered and available.

So that's where the state of the world was at the time of the in limine hearing. And Your Honor heard the arguments on network rates and reserved, which is fine. And as a result the Court has not heard me say one word to this jury in opening or in -- in any witness about network contracts and network rates. And I've got a pile of material this high to do it, and we [indiscernible], but we're at the point where our expert witness has given an opinion which -- and by the way, Your Honor, is an opinion he's been qualified to give in court after court after court from California to Florida.

THE COURT: I don't doubt his qualifications.

MR. BLALACK: And -- well, but it's not just that he's qualified. The opinion that network rates can inform a basis for a reasonable value of an out-of-network service is something he has done many, many times. And he is on record on that. It's not like I went out and got some guy who believes out-of-network rates are the appropriate comparison when they're not even the same network. He's said it courtrooms all over the United States. And then -- qualified to do it by

Honor.

courts, by judges.

So I know that's -- you know -- an open question in this case, but it is not the case that this is some aberrant opinion. It's an opinion given in many other cases from the children's hospital case to everywhere else.

And so our view is given the predicate that's been laid, given that the issue was not ruled out of bounds in the in limine hearing and was left open, and in fact, specifically, the motion in limine we made to give out our network contract rates being offered against us was denied. That was denied. They opposed that so they could offer it.

Now, they may have chosen not to offer it, but it was fair game. And so my view is, given the Court reserved, given the prior ruling, we ought to be able to at least show half of the benchmarks, so the jury has some understanding of the basis. And that's all.

MR. ROBERTS: And --

MR. BLALACK: We're going to tag team too, Your Honor.

MR. ROBERTS: And I did want to briefly add one thing, Your

THE COURT: Come on up, Mr. Gordon.

MR. ROBERTS: Just in fairness to the Court, in case you missed it, this was Slide 37. The demonstrative that was shown to the jury.

THE COURT: Yeah, I don't have access to that, but I have it on my screen here.

MR. ROBERTS: And it does -- and this is what Mr. Deal

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testified to. And as you know, the Plaintiffs have pointed to Fair Health
throughout the trial as the source for what the jury should look to for fair
and reasonable compensation. And Fair Health itself on the Fair Health
database says that there are three possible approaches for payers may
use for out-of-network allowed amounts. "For out-of-network providers
the allowed amount may be, number one, the same as for in-network
providers." And it's one of the accepted industry standards. And that's
already

THE COURT: All right. So --

MR. ROBERTS: -- been read to the jury.

THE COURT: All right.

MR. ROBERTS: Thank you, Your Honor.

THE COURT: I'm going to deny the request, Mr. Blalack. his is a case -- and I know this is a corny way to put it. This is a case about apples and apples, not apples and oranges. I find that should you be allowed to go that -- in that direction, it would be confusing to the jury.

MR. BLALACK: Okay.

THE COURT: Because the Plaintiff didn't go there.

MR. BLALACK: Understood, Your Honor.

THE COURT: And at 5:00 you can make your offer of proof.

MR. BLALACK: Your Honor, on this I think -- I don't want to waste more time. We'll just include that in a big written offer we were going to make and just --

THE COURT: Good enough.

MR. BLALACK: -- put it all in there.

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-	ΓΗΕ COURT: Thanks. So			
Γ	MR. BLALACK: But I can finish up this witness in five or ten			
minutes, You	minutes, Your Honor.			
7	THE COURT: Great. Somebody get the Marshal, please, if			
you will?				
٦	ΓΗΕ MARSHAL: All rise for the jury.			
	[Jury in at 4:05 p.m.]			
-	ΓΗΕ COURT: Thanks. Thank you, everyone. Please, be			
seated. Mr.	Blalack, go ahead, please.			
1	MR. BLALACK: Thank you, Your Honor. All right. Mr. Deal,			
let's try to w	rap it up.			
BY MR. BLA	LACK:			
Q I	want to continue our discussion on the excluded claims list			
and the exte	nt to which it represents a reliable source of information to			
make judger	ments about the arbitrariness or randomness of any			
particular re	imbursement, okay?			
Α (Okay.			
Q I	ndividual reimbursement. All right. So we just went			
through a lis	et of claims that were shown to Mr. Ziemer earlier this week			
by Mr. McM	anis, where the suggestion was that the claims data showed			
that the clair	n had been reimbursed in a random and arbitrary manner			
and Mr. Zien	ner couldn't offer an explanation. And you just now walked			
the jury thro	ugh the underlying claims data for the UMR data related to			
those claims; is that right?				
А	That's accurate, yes.			

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	Q	And do you have a view of whether the data in the UMR
syste	em ref	lects anything arbitrary about the reimbursement for those
clain	ns?	

A I -- generally, I don't have a sense that there's anything arbitrary about it, and the examples we went through were actually consistent.

MR. BLALACK: Now, let's look at two other examples, which we can do at the same time.

And I'm going to ask Shane if we could pull up Plaintiff's disputed claims list and go to -- again, that's 473. And go to row 218. My apologies. Let's go to a different -- my apologies, I jumped ahead. All right. Let's go to Defendants' Exhibit 4005. It's the claims data produced by United Healthcare Insurance Company. UnitedHealthcare for claims submitted.

BY MR. BLALACK:

- Okay. Do you see that, sir?
- A I do, yes.

MR. BLALACK: Okay. Now, that I figured out where I am. All right. Shane, if you could please pull up the disputed claims list? That's Plaintiff's Exhibit 473. And I want you to highlight row 10183 of the disputed claims list.

Okay. Now, in Defendant's Exhibit 4005 -- which again is the data from United Healthcare's claim system for the at issue claims -- would you please go to row 64094 and pull that up?

BY MR. BLALACK:

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I	Q Q	All right, sir. Ivir. Deal, could you tell me if row 64 of from	
2	the disputed claims list, Exhibit 46 473 describes the claim I'm		
3	showing you from the underlying claims data, Defense Exhibit 4005?		
4	А	A Yeah, maybe you could scroll on the lower one to the righ	
5	just a little bit so we can see so it's the same date of service.		
6	Q	If you look at the patient, provider, CPT code, and date of	
7	service		
8	А	Yeah, that's what I was trying to there we go. Oh, that's	
9	the service	e provider. Yeah. Same patient name. Yeah, based on the	
10	variables I've seen so far it does appear to be the same claim.		
11	Q	Okay. If you look at the information in Column W of	
12	Plaintiff's disputed claims list 473 what employer is identified in that		
13	column?		
14	А	Walmart.	
15	Q	That's one of the employer sponsors employer clients of	
16	UnitedHea	Ithcare we've heard testimony about in this trial?	
17	Α	Yes, that's correct.	
18	Q	If you look at Column AO of United's actual claims data in	
19	Defendant	s' Exhibit 4005 that was produced in this case, can you tell	
20	what was	the patient's employer?	
21	А	United States Postal Service.	
22	Q	So the and that's another client of the Defendant's in this	
23	case, corre	ect?	
24	Α	That's my understanding, yes.	
25	Q	So the employer data in Plaintiff's disputed claims list,	

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Exhibit 473, showed the employer as Walmart. But the actual underlying
claims data maintained by United shows that the employee worked for
the Postal Service; is that correct?

- A That's accurate.
- O So does the disputed claims list identify a different employer than the employer reported in United's actual claim system?
- A Yes, it's inconsistent with the underlying United Defendant data.

MR. BLALACK: Shane, before we pull up another example, let's go back to Plaintiff's disputed claims list, 473, and highlight row 4719. Please keep that up. And let's turn back to Defendant's Exhibit 4005, the United claims data. Row 67964. Highlight that. BY MR. BLALACK:

Q Okay. Mr. Deal, were you able to match the claim on Row 4719 from Plaintiff's disputed claims list, Exhibit 473, to the highlighted claim I'm showing you on row 67694 of Defense Exhibit 4005?

- A Yes, it appears -- it -- the same date of service, the CPT code is the same, the --
- Q If you need to move -- need us moving into the row [indiscernible]?
- A Yes, maybe down below if you could just scroll to the left a little bit? Yes, there we go. I see the name. Yes, they're the same claim.
- Q Okay. All right. If you look at the information in Column W of Plaintiffs' Exhibit 473; do you see that? Do you see the employer?
 - A I do, yes.

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1	Q	Another Walmart?
2	А	I yes.
3	Q	But if you look in United's own claims data, Defense Exhibit
4	4005 prod	uced in this case; what employer is listed in Column AO?
5	А	It's not Walmart. It's for excuse me. Full House Resorts.
6	Q	Different company?
7	А	Correct.
8	Q	So once again, Mr. Deal, does the employer data in Plaintiff's
9	disputed o	laims list, Exhibit 473, match the employer data contained in
10	United's c	laim system? The data produced to the Plaintiffs in this case?
11	А	No, the claims in dispute list is inconsistent with the
12	underlying	g United Defendant data.
13		MR. BLALACK: Let's look at another variable. We see two
14	examples	where the employer information in the disputed claims list
15	does not r	natch the employer information in the United claims system.
16	Let's look	at a different type of error now.
17		So let's go back to the disputed claims list, Plaintiffs' 473, and
18	turn to rov	v 1781. 1781. And highlight that if you would, Shane? Keep
19	that up on	the screen and then turn to Defendants' Exhibit 4005, the
20	UnitedHea	althcare claims data. And this one is going to get a bit more
21	complicat	ed, Mr. Deal, so hopefully you, and more importantly, the jury,
22	can follow	along. Shane, please pull up row 30737 and then row 31466.
23	And if you	would then, once you've got them, Shane, hide the rows
24	between 3	0737 and 31466 so they both appear on the screen together.
25	Do you ha	ve those two? Okay.

BY MR. BLALACK:

A I do, yes.

Q

O Now does this row from Plaintiffs disputed claims list Exhibit 473, which is the one that purport to detail the claims I'm showing you from Defendants' Exhibit 4005? Do you want me to move --

You see those, Mr. Deal?

A Yeah. Can you scroll to the left a little bit? Yes. The date of service matches -- if you can scroll the bottom one to the right a little bit. Can you go down to the lower one and scroll to the right? So -- sorry, go to the left a little. Start at the charges. So that's 783 and then if you go to the top one and find the charges. A little bit to the left. Yeah. So it's the sum of those two, yeah. So it's the same one.

Q Okay. And that's what I was going to ask. If you look at the CPT codes that are listed on the disputed claims list row 1781 and compared to the CPT codes listed for the two claims in the United Healthcare data, can you tell me what you see?

A Yeah. So they're organized a little differently so the top one is each row is its own -- if you leave it to the right so we can see it a little bit, you can see in column -- right there. Column M we see a 99283 and a 12001, those two CPT codes. The corresponding claim on the bottom we see 99283 with a modifier .25. That just means there's another code coming. And then 12001. So think of the top one as being sort of flipped into one row on the bottom.

Q And are you able to confirm if these two rows from Defense Exhibit 4005 contain the claims in Plaintiff's disputed claims list Exhibit

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1	473?	
2	А	Yes.
3	Q	Now if you look at the allowed amount on the disputed
4	claims list	Plaintiff's disputed claims list, can you tell the jury what the
5	allowed ar	mount is?
6	А	Yeah, \$235.55.
7	Q	But if you look at the allowed amounts for these claims in the
8	Defendant	's data, United Healthcare's data, Defense Exhibit 4005, do you
9	see 235.55	or no?
10	А	No. You need to add it up, but it's 112.44 plus 83.85. So
11	that's wha	t, 195 or 196 and 20 some cents, I think.
12	Q	Okay. So according to my math you add those two figures
13	together y	ou get \$196.29, is that about right?
14	Α	That sounds right.
15	Q	Okay. Would you expect the combined allowed amounts for
16	these two	rows to match the allowed amount in Plaintiff's disputed list,
17	Plaintiff's	473 if they were accurately capturing the data?
18	Α	I would, yes.
19	Q	So does the allowed amount listed in Plaintiff's Exhibit 473
20	match the	allowed amount for this claim in the United claims system?
21	Α	No, it doesn't.
22	Q	Now let's look at the two last examples, which we can do at
23	the same t	ime. And if you'd please turn to row 218, Plaintiff's disputed
24	claims list	Exhibit 473.
25		MR. BLALACK: And if you would read the column headers at

1	the top of	the page and please highlight that row.
2	BY MR. BL	ALACK:
3	Q	Mr. Deal, if you can, tell me what is the entity listed in
4	column A	for these?
5	А	It's Ruby Crest.
6	Q	And what is the facility listed for these claims in column B?
7	А	The ER at Aliante.
8	Q	And what county is listed in column B?
9	А	Clark County.
10	Q	Where we are right now, right?
11	А	Yes. This is one of the entities typically served by Fremont.
12	Q	Mr. Deal, I'm going to show you and the jury some more tria
13	testimony	from earlier this week.
14		MR. BLALACK: Shane, will you please pull up the trial
15	testimony	from November 15. That was earlier this week, page 171, line
16	2 to 5. I'll	represent to you sir that this is the testimony of Dr. Scheer
17	who is I be	elieve the regional medical director for Fremont, a TeamHealth
18	employee.	He testified to the following if you can see there:
19	"Q	Okay. What about for Ruby Crest? What are some of the
20	[indiscerni	ble]?
21	"A	Well, it's in Elko Nevada, Elko County. There's only one
22	hospital, it	's Northeastern Nevada Regional Hospital."
23	Do y	ou see that?
24	А	Yes.
25	Q	Okay. And based on the testimony of Dr. Scheer you had an

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understanding that Ruby Crest only provides services at one facility	in
Northeastern Nevada?	

- A Yes. That was my understanding before it was confirmed by his testimony, yes.
- Q Okay. And now going back to the disputed claims list, Exhibit 473, look at row 218. Does it indicate that Ruby Crest performed services at a hospital in Clark County?
- A Yes. The entity is Ruby Crest, but again the facility is the ER at Aliante in Clark County, which again is normally serviced by Fremont.
- Q So if you were looking at just this claim, this spreadsheet does it appear that some of the information on row 218 is incorrect?
- A Certainly the entity that provided the service would not have been Ruby Crest. It would have been in Fremont.
 - O So either the entity is wrong, or the facility is wrong?
- A Yes. I suppose if the facility is wrong then the county would also have to be wrong. It would be a number of fields that would have to be wrong if that's the case.
- Q So Mr. Deal, in your professional opinion does the information contained in Plaintiff's disputed claims list Exhibit 473 offer this jury a reliable basis to draw any conclusion about whether the Defendant's claims reimbursements were random or arbitrary?
- A No. I don't -- you couldn't make that conclusion from the data.
- Q Did you rely on the information in Plaintiff's Exhibit 473 when performing your reasonable value analysis?

1	А	I did, yes.
2	Q	If the data in the disputed claims list contains error, and you
3	clearly sh	ow it does, why did you rely on it?
4	А	So for the purposes of what I was analyzing the errors were
5	not mater	ial for that analysis. And of course it's the Plaintiff's burden so
6	I was goir	ng with what the Plaintiffs were asserting to be the basis for
7	their clain	n.
8	Q	Thank you for your time, sir. I'm going to pass you to Mr.
9	Leyendec	ker.
10	А	Thank you.
11		THE COURT: Cross-examination please.
12		MR. LEYENDECKER: Thank you, Your Honor.
13		CROSS-EXAMINATION
14	BY MR. LI	EYENDECKER:
15	Q	Okay. Mr. Deal let's start with what I like to think of are the
16	rules of th	ne road. You've heard that quote before, haven't you, sir?
17	А	Yes.
18	Q	And one of the rules of the road is that good experts don't
19	pick a side	e; do you agree?
20	А	Yes. In the sense that obviously you're being hired by a
21	particular	client, but our job is to analyze the facts.
22	Q	Okay. Let's just be clear. In the first five minutes you told
23	this jury e	even though you have been hired and testified more than 200
24	times on l	behalf of insurance companies, did I get my notes just right?
25	А	Is that a guestion.

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1	Q	Not going to pick a side, right? That's what you told the jury.
2	А	Yeah. That's not exactly what I said, but I'm happy to
3	elaborate.	
4	Q	Well, I wrote it down in quotes and the jury will reflect
5	whether I'r	n wrong or not, okay. Good experts don't pick a side, right,
6	sir?	
7	А	They certainly don't
8	Q	And because of that they're trustworthy?
9		MR. BLALACK: Could he have a chance to answer the
10	question h	e was asked?
11		THE COURT: Okay. Don't interrupt.
12		MR. LEYENDECKER: I thought he said yes. I'm sorry, Your
13	Honor.	
14		THE WITNESS: I said I certainly don't pick a side for the sake
15	of picking	a side.
16	BY MR. LE	YENDECKER:
17	Q	Okay. Good experts and because of that, that makes these
18	good expe	rts trustworthy, right?
19	А	That's the idea, I think.
20	Q	Right. You would agree with me that if a bad experts do
21	the opposi	te, they pick a side?
22	А	I'd say bad experts typically do bad analysis and draw bad
23	conclusion	S.
24	Q	You don't want to agree
25	А	It's not necessarily about picking a side.

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	Q You don't want to agree you're telling me that if an expert					
	picks a side and when given an opportunity to look object first of al					
	should exp	perts be reviewing the data with an independent objective state				
	of mind? A Sure.					
	Q	Okay. Good experts, independent, objective, would you also				
	agree, neu	tral state of mind?				
	А	Sure.				
	Q	Okay. Certainly we can agree that if an expert doesn't have				
	the indepe	ndent objective neutral state of mind that makes them a bad				
	expert?					
	А	It's I'm not even sure exactly what you're getting at, but I				
	think they	should have those things.				
	Q	Well, did you take your medication today?				
	Α	No.				
		MR. BLALACK: Objection. That's argumentative and rude.				
		MR. LEYENDECKER: I'm just trying to I'm not				
		MR. BLALACK: I don't know.				
		MR. LEYENDECKER: give me a little leeway here, Judge.				
		MR. BLALACK: Argumentative captures it.				
		THE COURT: Objection sustained.				
	BY MR. LE	YENDECKER:				
	Q	Well, is there something that's preventing you from				
	understand	ding my questions and answering simple questions in a				
	straightfor	straightforward way?				

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trustworthy.

1 Α I think that's what I'm trying to do. 2 Q Well, here's my question. Do you agree that bad experts are 3 not independent, are not objective and don't put themselves in a neutral 4 state of mind? 5 Α I said I agree with those things. Okay. And a bad expert is not trustworthy? 6 Q 7 I mean if you're a bad expert presumably you shouldn't be Α

Q Right. Bad experts pick a side and advocate on behalf of their client. And that's why you told the jury, even though you've been hired over 200 times, testified over 200 times for insurance companies, you weren't picking a side in this case. That's what you told the jury, right, sir?

A Yeah. Again, your statement about the 200 times for the insurance company is not accurate but.

O Okay. We're going to get to that. So bad experts not trustworthy and pick a side, right, sir? And advocate. Because that means they're not independent, they're not objective and they don't have a neutral state of mind, fair enough?

A Again, I agree with those things.

O Okay. So we just spent about an hour looking at a variety of claim files where there was a comparing contrast, and you gave the opinion that the Plaintiff's claim file is not reliable. That's what you just said, right, sir?

A I think the question was, is that -- is it a basis in which you --

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	Q	Excuse me, sir. Did you just tell this jury in response to Mr.
Blalac	k's op	pinion that in your professional opinion the Plaintiff's claim
file wa	s not	t reliable because we had a different employer name or
becau	se the	ere was a slight modifier code on one of the examples, or
becau	se the	e dollar amounts weren't the same? Isn't that what you just
told th	e jur	y, sir?

- A That wasn't what he asked me. It was a different question.
- O Okay. So you did tell the jury, you spent a bunch of time studying the claim file on the Plaintiff's side and studying the Defendant's files, and in your professional opinion there were about 270 claims that should come out of this case, right, sir? Because you couldn't find them when you looked at Defendant's match file, isn't that what you told them?
 - A There were 270 claims that were unmatched, that's right.
- Q I've got my quotes here again. You said, carefully reviewed and, "I couldn't find a claim in Defendant's data". Did I get that right?

MR. BLALACK: Object to the form, asked and answered.

THE COURT: Overruled.

THE WITNESS: Yes.

BY MR. LEYENDECKER:

- Q So you couldn't find 270 claims in the Defendant's data and your testimony to the jury is, those should come out, right?
 - A That would be my standard approach, yes. Is that --
 - Q Okay.
 - A -- if I can't find them in the underlying data then they

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shouldn't be	considered	to be a	part	of the	set of	claims,	but of	course
presented bo	oth sets of d	ata.						

- Q You mean if you can't find them in the Defendant insurance company's data, right, sir?
- A That's the standard approach on doing these cases all the time, is to look at the claims in dispute and to try and find them in the underlying insurance claim data.
- Q Are you suggesting that TeamHealth and their entities' record keeping is unreliable?
- A It's hard for me to know why they're in the data, but they're not in the underlying Defendant's data.
 - Q Well, how many claims do you think United processes a day?
 - A Which United, Defendant?
 - Q Any of them? Millions?
 - A I doubt it's millions a day, but it's a lot.
- Q Okay. Here's my point. You know that -- you expect TeamHealth is a sophisticated entity, right, sir?
 - A That'd be my expectation.
- Q Right. In fact, they are to use your words, along with sound physicians, and that's where the case is going to get real interesting in a hurry, I promise you that sir. You told this jury that TeamHealth and sound physicians are "some of the biggest staffing companies in the country", right?
- A I think I mentioned MCare [phonetic] as well, but yes, there are.

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Q	And you would expect some of the biggest staffing
companies	in the country would have sophisticated, reliable computer
record keep	oing abilities, wouldn't you, sir?

- A In general, sure.
- Q Just like the Defendants, you would think they would have sophisticated, reliable computer keeping capabilities?
 - A Sure.

- Q And what you did, even though in this case you've seen the testimony from the folks at TeamHealth for example Mr. Ocasio describes an intricate detail, the steps they go to, to collect and maintain that data on a routine basis, right?
 - I don't know if I saw that testimony, but I'm sure they do.
- Q Right. So what you're doing here simply because you couldn't find it in the Defendant's data, you knew it was in the Plaintiff's data. You know that we're sophisticated data keepers, but you're choosing a side, you're picking a side. And you didn't tell this jury well, I found some over here, but I couldn't find them over there. That's for you all to decide. You figure out whose company you think keeps better records. Did you tell them that?
- A I didn't use those words. I certainly presented both numbers, but --
 - Q Right. No. You said, take them out. They should come out.
- A That based on my experience that's exactly what I would recommend doing, but it's up to them to decide what to do.
 - O Did you tell them that earlier? Did you tell them, that I

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understand TeamHealth has sophisticated record keeping and they have
a record of those 270 cases? I couldn't find them in United's, but I know
that the sophisticated record keepers over here at TeamHealth, they have
them. Jury, you all figure out whether they should stay or not. Did you
tell them that? No, sir. You said, take them out.

MR. BLALACK: Object to form. It's compound.

THE COURT: Objection sustained.

BY MR. LEYENDECKER:

Q Mr. Deal, you could have sat in that chair right there if you truly were not picking a side, if you truly were trustworthy, if you truly put yourself in an independent, objective, neutral state of mind, you could have said, ladies and gentlemen, there were 270 claims that I know the Plaintiffs had the record of and I know they have a sophisticated system. I couldn't find those same 270 on United's side. That's for you to decide whether you want to count them or not. You could have done that, but you didn't, did you?

MR. BLALACK: Your Honor, that's another compound -- it's a speech actually. It's not even a question.

THE COURT: Objection sustained.

BY MR. LEYENDECKER:

Q Why didn't you just tell the jury, you all decide? They've got it over here; they don't have it here. Why didn't you just tell the jury to decide? Why did you tell them, take them out, they should come out?

A Because that is my experience is that's what they should do.

That you start with the -- all the claims data that we have from the United

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Defendants. Not just the claims in dispute. We have all of their data.
And that is a discovery. That's typically done as a complete set of data.
So it represents the totality of everything they receive. So when I can't
find them from the other entity, that to me is sufficient evidence to say
that they didn't receive them.

- Q Are you saying these Defendants that in tens of thousands if not hundreds of thousands of claims have never made a mistake in their claim system?
 - Α I'm sure they've made mistakes in their claim system.
 - Q Okay.
- But this is a more basic point of, did they even receive the Α claim and is it in the data.
 - So you just think it came out of thin air from the Plaintiffs? Q
- I don't know where it came from. I'm certainly -- mistakes Α are made on all sides on these things so.
- Q That's my point, sir. Okay. You could have said in a very simple way, I couldn't find these. They're over here. I couldn't find them over here. You all figure it out. You could have said, couldn't you have?
 - Α **I** ---
 - MR. BLALACK: Objection; calls for speculation.
- 21 THE COURT: Overruled.
 - THE WITNESS: I could have used those words, but it's -- that wouldn't be my opinion. My opinion is that they should come out.
- 24 That's my consistent opinion in all these cases.
 - BY MR. LEYENDECKER:

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1	Q	Because you pick a side sir. You pick the side of the
2	insurance	companies each and every time they've hired you to testify on
3	the more t	han 200 occasions in your career, right, sir?
4	А	I disagree with that.
5	Q	Okay. Since you're so concerned and believe our records are
6	so unrelia	ble, go ahead and tell the jury how much you totaled, how
7	much the	when you found for the matched claims, when you did all of
8	this record	keeping to figure out whether our stuff was reliable, go ahead
9	and tell th	em what was the total amount of charges on what you thought
10	were the c	laims you found on the Defendant's record keeping side.
11	А	I'm sorry; I'm not understanding your question.
12	Q	Yes, sir. It's real simple. We've got \$13.2 million in charges
13	and \$2.8 ii	n allowed amount.
14	А	Okay.
15	Q	Did you lift one finger to see whether the Defendant's
16	records w	ere \$10,000 difference in one direction or the other?
17	А	Oh, between the two data sets?
18	Q	Yes, sir.
19	А	I don't remember the exact number. They certainly weren't
20	\$8 million	different. No.
21	Q	Well, what were they? Go ahead and tell them just go
22	ahead and	tell them how much they were apart.
23	А	I don't recall off the top of my head.
24	Q	Is there a single word in any of your hundreds of pages of
25	reports an	d work papers that would identify there is any meaningful

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difference in the total charges or the total allowed amount on the claims								
at issue in t	at issue in this case?							
Α	I think we talked about this with Mr. Blalack that for my							
analysis, I a	assumed the data from the claims in dispute.							
Q	No, sir.							
	MR. BLALACK: Could he be allowed to finish?							
	THE COURT: Don't interrupt him. Did you finish your							
answer?								
	THE WITNESS: Yes. I didn't put a difference of calculation in							
my reports	. I ultimately assumed the numbers in the claims in dispute							
list were	I used those for the basis of my analysis.							
BY MR. LEY	BY MR. LEYENDECKER:							
Q	So our file's not reliable, but you did not did not check to							
see if any n	neaningful difference in total charges or total allowed. Is that							
a true state	ment?							
Α	Not quite. I do I did look at it. I don't remember what the							
difference v	was. It was not anything close to 8 million. It was							
Q	Okay. Was it 10,000?							
Α	I don't recall off the top of my head. It wasn't a huge							
difference.	I just don't remember how much it was.							
Q	Of the of the \$13.2 million that TeamHealth records say are							
the charges	s, how big of a difference did you find on the United side?							
Α	I think I've answered that question. I don't remember.							
Q	Was it 100,000?							
	MR. BLALACK: Objection. Asked and answered.							

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Α	You can ask it again, but I'm not going to remember because
you asked	it again.

THE COURT: He can explore the -- his memory. So overruled.

BY MR. LEYENDECKER:

- Q Was it less than 10,000?
- A I don't remember.
- Q How about -- how about in the 2.8 million in allowed, was the difference less than 10,000?
 - A Again, I don't remember.
- Q Did the United file have a greater amount in charges than our file?
 - A Again, I don't remember.
 - Q Did the United file have a greater amount of allowed?
- A Same answer. I don't remember. I just remember -- I do remember looking at it, and it wasn't a big difference. And ultimately, I used the claims in dispute.
- Q Okay. There we go. And when you say wasn't a big difference, you -- what you mean by -- what that means in expert talk, sir, is that it's not enough to get your attention to come in and say, this data's not reliable because I'm showing significant differences between the charges and allowed. That's what you mean when you say that, wasn't a big difference, right, sir?
- A No. There's a lot of thoughts in that statement there. But it certainly wasn't big enough to suggest to me that I -- that for purposes of

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my analys	sis, I couldn'	t assume	that the	claims in	dispute	was	largely
accurate.							

- Q Let's just stay on this subject for a second. Remember all of those two to three examples Mr. Blalack showed you when he was putting up the UMR claim file?
 - A Yes.

- Q Tell the jury what the coinsurance column said on the UMR file on those claims where you said, no, no, this -- it's not 409, it's 315. Go ahead and tell the jury what the coinsurance file, that -- that column on the UMR spreadsheet for the ones you said were different numbers, what did that coinsurance column say on these claims?
 - A I don't have it memorized.
 - Q Did you even look?
 - A I was looking at the allowed amounts.
- Q Do you think a good expert just says yes to whatever the lawyer asks?
 - A Of course not.
- Q Did you bother to look before you said, yes, yes, yes, these are all wrong, these are all different, did you bother to look even if the UMR file identifies the coinsurance? Did you even look for that?
- A It wouldn't particularly be relevant for the analysis of the allowed amounts. But I did -- I did -- as we were looking through it, there were other amounts for coinsurance and copay and deductibles and things like that.
 - Q Did you bother to see if the difference between -- in those

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1	occasions, where there was a slightly different number between the									
2	Plaintiffs' claim file and the Defendants' UMR's claim file, did you									
3	bother to check to see if the difference was the coinsurance, sir?									
4	А	That wouldn't make sense in a in a general way because								
5	the coinsu	rance is underneath the allowed amounts. So you want to								
6	compare the allowed to allowed. And that what you're talking about is									
7	the breakdown of the allowed into patient responsibility and									
8	Q	Did you check it out?								
9		MR. BLALACK: Will you please let him finish, Your Honor?								
10		THE COURT: You have to stop interrupting him.								
11	BY MR. LE	YENDECKER:								
12	Q	Did you check those examples before you told this jury there								
13	was a prol	olem?								
14	А	I'm not sure exactly what you mean. I think I've described								
15	what I did.									
16	Q	Did you check the math? Before you told the jury there's a								
17	problem, o	did you check the math on the coinsurance, what the UMR								
18	coinsuran	ce said, to see if that lined up? Maybe there was none. Did								
19	you check	it?								
20	А	I'm not quite sure what you're asking. But I compared								
21	allowed to	allowed. I think it was clear from								
22	Q	Okay.								
23	А	the analysis.								
24	Q	Did you								
25		MR. BLALACK: Could he finish, please, Your Honor?								

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	THE COURT: Yeah. Stop interrupting, please, Mr.							
Leyendecker.								
	MR. LEYENDECKER: Okay.							
BY MR. LE	YENDECKER:							
Q	Do you know whether the UnitedHealthcare file that was							
displayed,	did it have coinsurance in it?							
А	My recollection is it did. But I don't remember the exact							
amounts.								
Q	And do you know if the UMR file had coinsurance I it?							
А	It typically would. Yes.							
Q	I'm asking you if you know that it did. You just went through							
testifying k	pefore the jury about different amounts. And I just want to							
know, do y	ou know for a fact sitting there, did that UMR file have a							
coinsuranc	ce column?							
А	That's my recollection is it did. Yes.							
Q	Okay. Do you think it would be common or uncommon							
whether it	whether it's TeamHealth's claim system or the Defendant's claim system,							
that there	might be a mistake about who the employer is?							

A Certainly in theory there could be mistakes on either party.

In my experience, it'd be much more likely to be on the provider side.

Q Okay. Does a differing employer have any impact on whether the charges or the allowed amounts are accurate, sir?

A Sure. In terms of the accuracy because I mean, we -- I'm happy to elaborate if you -- if you'd like.

Q Go on, please.

	Α	That	the	allow	ed a	mou	nts a	re de	pend	dent	upoi	n the	ind	ividu	ual
plan	s. So	of co	urse	, you	knov	v, Wa	ılmaı	t ver	sus t	he po	osta	l syst	em,	tha	t
coul	d certa	inly l	oe di	fferer	nt.										
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Q I asked a poor question. What I mean to say is if I'm looking at any particular claim and it says charge \$145, allowed amount \$245, does it matter whether the employer is correctly or incorrectly identified on either of the two spreadsheets if both of them have the same charge and same allowed?

A It depends on the point you're trying to make. I mean, in terms of the dollars of charge and allowed, no. But if you're trying to say that there's a problem with the adjudication of the claims, then the employer could matter a lot.

Q And you know this case is not about the adjudication. It's about the amounts, right, sir?

A That's been my view. But that wasn't my understanding of the demonstrative that was being shown and that we were talking about with Mr. -- with Mr. Blalack.

Q Now, I wrote something else down that you said. One of the examples -- one of the examples I think was 99283:25, and then another CPT code, right, sir?

- A Yes.
- Q And you told the jury that that -- was it colon or semicolon?
- 23 A I believe it was a colon.
 - Q That's the two dots?
 - A That's right.

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	Q	Okay.	You told the j	ury that that	modifier	of two	dots	25
mear	nt anot	her cod	le was cominç	g, right?				

- A That's my general understanding. Yes.
- Q Well, do you have training in coding?
- A Not formal training in the sense of being a formal coder. But I've worked with insurance claims data for a long time.
- Q And it was your point to the jury that that -- the two -- the two claim files are different because one had that colon 25? Is that what you said?
 - A Oh, no, no, no. Not at all. Not at all.
- Q Do you know whether the colon 25 actually represents when the nurse practitioner is providing a service?
 - A I don't think the point -- the 25 does. No.
 - Q Okay.
- A No. It was -- I was -- I'm happy to elaborate. It was -- the one is shown on a row, and the other one was showing two different lines. So I was just noting the fact that you see the two codes on the row in a .25 is simply noting there's -- it's -- you would -- you would expect to see two codes.
- Q So my question is do you know one way or the other whether when that colon 25 appears, if in fact that's an indication that a physician's assistant or a nurse practitioner?
 - A I don't believe that code is. No.
- O Okay. Well, go ahead and tell the jury if it's a straight 99283 that's performed by a nurse practitioner on a United insured, go ahead

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and tell the jury how that g	ets identified on the claim fil
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- A You'd have to look at the service provider.
- O Okay. Do you know whether United issued instructions a few years ago -- about a year ago to our clients that said whenever a nurse practitioner performs a service, we want you to put a colon 25 after the code?
 - A I don't know.
 - Q Did you do any investigation into that?
 - A No.
- Q Okay. Now, let's get to the -- honestly, I have [indiscernible] Mr. Deal, for three weeks to get to the real issue in the case. Sound physician. The jury has not heard anything about Sound Physicians, who they are. A little bit yesterday from Dr. Frantz. You know who they are, right?
 - A A little bit.
- Q Well, do you know that they are one of the largest physician services companies in the U.S., along with TeamHealth, right?
- A They are a large -- yeah. We talked about that a few minutes ago. I do know that.
- Q And you know that in 2019, they started doing business in Nevada?
 - A I didn't know that.
- Q Okay. All these charts that you were showing the jury where the charges were sky -- use their words, skyrocket into 2019, did you bother to look to see whether that's when Sound Physicians came into

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1	state?		
2	Δ	A	Like I said, I'm not aware of when and how they came into
3	the stat	te.	
4	C)	Okay.
5	Д	A	I'm aware they're providing service.
6			MR. LEYENDECKER: Brandon, may I please have the Elmo?
7	BY MR	. LEY	/ENDECKER:
8	C)	Okay. Can you see this okay?
9	Δ	A	Yes, I can.
10	C)	This is a summary of one of the claim files produced in the
11	case. [Defer	ndant 097900, you recognize that as a base number, right, sir?
12	Δ	A	That is a base number. Yes.
13	C)	You studied lots of claim files in the case, didn't you?
14	Δ	A	I did. Yes.
15	C)	Did you study the Defendant's 097900 Sound Physician's
16	claim fi	ile?	
17	Δ	A	I don't recall off the top of my head.
18	C)	This is an excerpt from it, sir. You see, it's got two claims on
19	here. [Date	of service, April of '19. What's the amount charged?
20	Δ	A	\$1,761.
21	C)	What's the CPT code?
22	Δ	A	The 99285.
23	C)	\$1,761, is that egregious?
24	Δ	A	I'm not sure what you mean by egregious. It's sort of it's
25	C)	Well, you I know you didn't, you know, study it with a fine-

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tooth com	b. But I heard you tell the jury that you studied the underlying
document	s and things of that nature, right, sir?
А	I've reviewed some of the underlying documents and things.
Yeah. Mo	stly my
Q	And depositions?
	MR. BLALACK: Can he please be allowed Your Honor, I'm
going to a	sk for the last time
	MR. LEYENDECKER: It was an accident.
	MR. BLALACK: could I ask for the last time that opposing
counsel no	ot interrupt the witness? Show just the slightest courtesy as a
human be	ing to another person who's giving testimony.
	THE COURT: All right. You have to
	MR. LEYENDECKER: Mr. Deal, I apologize.
	THE COURT: you have to dial it back.
BY MR. LE	YENDECKER:
Q	I apologize, Mr. Deal.
А	Okay.
Q	Let me ask you again. Did you see here on 297A, August of
'19, one cl	aim for a non-provider and one claim for a contract provider?
А	I see that.
Q	Okay. Here in Las Vegas?
А	Yes.
Q	All right. Let's just look at how the Sound Physicians claim
charged a	mount compares to the Plaintiffs. You've have you seen my
summary	here of the Freemont charges?

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	Q	Okay. I notice that when you put your slides together with all
those	e Fair H	lealth charges, you didn't also chart what the Plaintiffs' actual
charg	ges we	ere?

I have not seen it before. No.

A Yeah. That's right. I remember I said I did all the Fair Health ones to illustrate the impact of using Fair Health and the overall inflation in the market. And then I separately analyzed the charges from TeamHealth.

Q Now, the Plaintiffs -- the Freemont Plaintiff, their charges in 2019 were somewhere between -- somewhere a little under \$1,400, would you agree?

A I'll take your representation. I'd have to go back and look at the data. But I'll take your representation.

Q Okay. Do you recall reading any of the emails or any of the documents or depositions Mr. Haben's and Ms. Paradise and the out-of-network programs reference to egregious charges, egregious bills being the source of some of these problems?

- A I think I heard some reference to that in the trial.
- Q Okay.
 - A But I -- it's not something I've studied carefully.
- Q Have you offered any opinion about whether the Plaintiffs' charges or Sound Physician's charges, do you consider these to be egregiously high, sir?
 - A I --
 - Q 1,761.

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Α	I don't really ever have an opinion abut egregiously high. It's
my opin	on that you should never use bill charges for reasonable value.
So the fa	ct that one's higher than the other I wouldn't say is necessarily
egregiou	s. They're high, and they're much higher than the actual market
prices yo	u see in the in the market, so.

- Q You do know that Sound Physicians is owned by one of the United entities, right, sir?
- A I think I heard you say that. I actually didn't -- I don't know that. It doesn't surprise me. But I don't know, and I haven't studied it.
- Q Well, let me ask you, Dr. Frantz testified, he knows about it, and they're owned by United. Okay, sir?
- A Yeah. I heard that. Well, at least I heard that he knows the outfit. I don't remember if he said who they were owned by. But --
 - Q You've read a lot about the shared savings programs?
 - A I read some. I wouldn't say a lot. But I read some.
- Q Where the concept was various United Defendants would take a fee of 30, 35 percent on the difference between the billed charge and the allowed amount. You recall seeing that, don't you?
 - A I have seen reference to that. Yes.
- Q Okay. And so -- and that was happening in cases where it was the employer's dollars at stake, not United's? Those are charges claimed, right, sir?
- A I believe SSP, the shared savings program, I think that is something that's used by the ASO, the TPA. I don't remember whether it's also used in the fully insured. But I think it is used by that. That's the

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1	best of my	recollection. It's not something I've studied.
2	Q	Well, if it's fully insured it wouldn't make a difference for
3	United to 1	take a 35 percent fee because it's all they're going to get
4	anyway?	
5	А	Generally, I would agree with that. Yeah.
6	Q	Okay. So is United getting in this situation, when they're
7	owning So	ound Physicians, are they getting one dip of ice cream with
8	these high	charges when it's an ASO plan at 35 percent?
9		MR. BLALACK: Objection. Foundation.
10		THE COURT: Objection's sustained.
11	А	I don't it's not something I studied. I don't know.
12		THE COURT: I sustained the objection.
13		THE WITNESS: Oh, thank you. I'm sorry.
14	BY MR. LE	YENDECKER:
15	Q	Assume with me that this is an administrative service only
16	claim and	that there is a shared savings plan in place where United is
17	going to m	nake a fee of 35 percent off whatever it saves the employer
18	who's pay	ing. Make that assumption, okay, sir?
19	А	Okay.
20	Q	In that scenario, United would be making a fee, what I call
21	the first di	p, between this and whatever they allow. Can we agree on
22	that with t	hat assumption?
23	Α	Assuming the allowed is below either one of those numbers,

then I agree there would be some difference between 1,761 and 1,423,

and they would get some portion of that fee.

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Q	On top of the regular fee they're paying just to administrate
these clair	ns?

MR. BLALACK: I object to the foundation of the question.

THE COURT: Overruled.

THE WITNESS: Yeah. You're certainly getting beyond my knowledge of any of these programs. But I -- generally, there's a standard fee for processing a claim. And I understand shared savings is separate from that.

BY MR. LEYENDECKER:

Q Okay. So the fee for processing the claim. The shared savings fee would be a second fee, right, sir?

A Yeah. You're getting pretty -- pretty quickly getting beyond my -- the scope of anything I know in terms of details. But that's my general understanding.

Q Well, do you have enough knowledge to understand that Sound Physicians owned by United would be submitting claims to all sorts of other insurance companies around the State of Nevada for these claims?

A To the extent they're servicing emergency departments and there's out-of-network and they don't have contracts with them, then presumably they would be submitting claims to other insurance companies.

Q Do you have any idea where the Sound Physician ever attempts to get their bill charges?

A I don't know.

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Q	Now, by the way, were you aware that Sound Physicians is
not this is	an emergency room practice group, right, sir?

A I thought they started out as more hospitalists as I recall, but they may also provide emergency services.

Q Right. And United bought them.

MR. BLALACK: Objection. Foundation.

THE WITNESS: I don't know that, but it sound -- again, we've talked about it.

THE COURT: Sustained.

THE WITNESS: Oh, sorry.

THE COURT: Objection sustained. You have to give me a chance to rule.

THE WITNESS: Sorry about that.

BY MR. LEYENDECKER:

Q You recognize these numbers, don't you, Mr. Deal?

A Yes, I do. Although, are -- I do recognize the numbers. The heading is kind of funny but --

O That's because I'm not a very good speller but we've been over that.

A My wife is a nurse, and my daughter is a nurse so -- or she's becoming a nurse, so I like it. It's kind of creative but -- anyway, sorry I got distracted.

Q Let me ask you a hypothetical question. Do you understand that 246 is the average allowed by the United defendants, these defendants in this case, for all of the claims at issue, right, sir?

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Yes, that's right.

	Q	And you understand that \$528 is the average allowed as
calcu	lated	by Mr. Leathers of what United paid all the various other ER
docto	ors in t	the state, right, sir?

A Yes, that's right based on his methodology and so forth. But generally, that's right.

Q Can you think of any economic reason why these defendants would want to pay the plaintiffs well under half of what they pay all other emergency room doctors in the state?

A I'm not sure what you mean by want. I can certainly imagine why it's happening. It depends on the plan documents and the programs that are in the place and the various methodologies that are used. But I'm not -- you -- I'm not quite sure that the want part of your question, but --

Q Do you think there are any different plans insuring that the members treated for this 246 that are insuring the members are treated for this 528?

A I mean, the mix could certainly be different. I don't know. It's not something I've studied in detail.

Q Here's the hypothetical. If one or more of the United defendants wanted to weaken TeamHealth and the plaintiffs here in Nevada by paying them a fraction of what they pay everybody else in the state, do you think that might make them attractive to purchase?

A You're asking if United wanted to buy TeamHealth, would they try and weaken them financially; is that what you're asking?

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1	Q	Yes, sir.
2	А	I've never, ever heard that so I can't really comment on that.
3	I suppose	it's always better if you're going to buy something to buy it
4	less expen	sively but that's not something I've seen any information on.
5	Q	We know they're now in the ER doctor business and my last
6	question fo	or the day is can you give us any economic explanation,
7	rational ex	planation for why if they're not trying to weaken TeamHealth
8	by dramat	ically cutting their rates relative to everybody else, can you
9	offer some	e other rational economic explanation for why that's
10	happening	?
11		MR. BLALACK: Objection. First of all, this entire line of
12	examination	on has no foundation, but it's also argumentative.
13		MR. LEYENDECKER: It's a hypothetical, Your Honor.
14		THE COURT: Overruled.
15		MR. BLALACK: It is that.
16		THE WITNESS: I as I said, there certainly could be different
17	plans and	different out-of-network payment methodologies so there can
18	be lots of r	easons why you would observe that. I haven't studied
19	anything a	bout want or intent or things like that.
20		MR. LEYENDECKER: Your Honor, it's 5
21		THE COURT: Yeah. Time
22		MR. LEYENDECKER: and I think it's time for the day.
23		THE COURT: Very good. So we'll take a recess until
24	tomorrow	at 8:30. During the recess, you're instructed do not talk with
25	each other	or anyone else on any subject connected with the trial. Don't

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read, watch, or listen to any report of or commentary on the trial. Don't
discuss this case with anyone connected to it by any medium of
information including without limitation newspapers, television, radio,
internet, cell phones, or texting.
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Do not conduct any research on your own with regard to the case. Don't consult dictionaries, use the internet or use reference materials. Don't talk, post on social media, text, tweet, Google issues or conduct any other type of research with regard to any issue, party, witness, or attorney involved in the case.

Most importantly, do not form or express any opinion on any subject connected with the trial until the matter is submitted to you.

Thank you for a great four days this week. Tomorrow we'll wrap up the week. Have a good night. See you at 8:30.

THE MARSHAL: All rise for the jury.

[Jury out at 5:00 p.m.]

[Outside the presence of the jury]

THE COURT: Mr. Deal, you may step down during recess.

Okay. The room is clear.

MR. BLALACK: I don't have [indiscernible], Your Honor.

THE COURT: I was just going to kind of agendize a couple of things. One, I've been asked to do some deposition transcripts for Harris and Jones. Do you need them at 8:30? When do you need them tomorrow? Without holding you to it on the time --

MR. BLALACK: Yeah, let me tell you the plan, Your Honor. I don't know if -- Mr. Leyendecker, how much more do you think you have

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tomorrow?
MR. LEYENDECKER: I would guess some two hours-ish
depending on whether I am able to control my [indiscernible]
THE COURT: I know it's not intentional
MR. LEYENDECKER: and get the rattle, Your Honor.
THE COURT: But it's not fair when the witness doesn't get to
tell us
MR. LEYENDECKER: I apologize. You're right.
MR. ZAVITSANOS: Your Honor, we're going to give him a
valium in the morning so
THE COURT: Well, I don't want to know that but just
MR. BLALACK: So Your Honor, if he goes another two hours,
my guess is I've got 30. So we're starting at
THE COURT: 8:30
MR. LEYENDECKER: 8:30 tomorrow.
THE COURT: So I'll do
MR. LEYENDECKER: So we'd be done by and then at that
point and Mr. King will probably go about an hour and a quarter.
MR. ZAVITSANOS: Joe, who do you have with King?
[Counsel confer]
MR. BLALACK: Okay. So let's assume three hours for Ms.
King. That gets us to the afternoon and then Mr. Mizenko.
THE COURT: Good enough.
MR. BLALACK: I think if we could get who all do you have,
Your Honor? You're going to have Ms. Harris?

1	THE COURT: Harris and Jones.
2	MR. BLALACK: If it was possible to get through Ms. Harris
3	THE COURT: Do that first.
4	MR. BLALACK: If we're yeah. If we run I think we're
5	going to go the whole day tomorrow with those live witnesses but if we
6	have any space, Ms. Harris would be a good
7	THE COURT: Good enough. I'll do my best to have them
8	free
9	MR. BLALACK: Thank you, Your Honor.
10	THE COURT: tomorrow. Okay. Next, confirm with me
11	you'll make your offer of proof on your expert in writing?
12	MR. BLALACK: I will, Your Honor.
13	THE COURT: Very good.
14	MR. BLALACK: I'll put that in the large we're going to do
15	one large offer of proof. We'll
16	MR. ZAVITSANOS: And we have no just for the record
17	we have no objection to them doing it in writing. They're not waiving
18	anything, and we will not argue that at any point.
19	THE COURT: Okay. Next thing is if we do jury instructions
20	over the weekend, the rules require that to be done on the record. Do
21	you both stipulate to waive the rule so that it won't be an issue on
22	appeal?
23	MR. ZAVITSANOS: Plaintiffs do, Your Honor.
24	MS. LUNDVALL: Well, hold on. Hold on. No we don't
25	THE COURT: No, it wouldn't be meaning there would not

1	be a BlueJeans record.
2	MR. POLSENBERG: But there would be a court reporter?
3	THE COURT: There will be a record but
4	THE COURT RECORDER: BlueJeans is not the record.
5	THE COURT: BlueJeans is not the record anyway.
6	MR. POLSENBERG: Right. It'll add two hours to it if we do it
7	without a court reporter.
8	MR. LEYENDECKER: I understand, Your Honor, but the client
9	is wanting to have jury instructions on the record.
10	THE COURT: They does it need to be public?
11	MR. LEYENDECKER: No, it does not need to be public.
12	THE COURT: All right. So I just want to verify that I'm not
13	leaving an issue on appeal for either side by doing it Sunday afternoon
14	with a court reporter.
15	MR. POLSENBERG: Like I say, I've done it several times.
16	MS. ROBINSON: I mean, our understanding is that there will
17	be after the record after we've all made our arguments about the
18	instructions to the Court, the Court will present with a charge and then
19	we'll have an opportunity for formal objections.
20	MR. POLSENBERG: No.
21	THE COURT: It doesn't work that way.
22	MS. ROBINSON: Okay.
23	THE COURT: We resolve the
24	MR. POLSENBERG: That will add two hours.
25	THE COURT: We do the jury instructions and then I have you

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agree as to the order of them and then I make you put on the record that
you all of your objections are in the record and then I read them right
before the closings.

MR. POLSENBERG: And that's precisely why we need to have a reporter so it --

THE COURT: Yeah, I have no problem with the reporter -MR. LEYENDECKER: But we've already -- I guess I already
arranged for a --

THE CLERK: The reporter is not the official record. It would have to be one of the [indiscernible]

THE COURT: Well, can we send that to someone to do a transcript?

THE CLERK: It would have to be on the record as far as here.

We can't have like an outside --

MR. POLSENBERG: We can stipulate to it. I said I've done this several times this way.

THE COURT: Put it in writing. Just if you can come to terms, put it in writing and tell me about tomorrow. We'll talk about it again tomorrow.

MR. POLSENBERG: Thank you, Your Honor.

THE COURT: Yeah. All right. It wasn't my intention to put you guys on the spot so --

MR. POLSENBERG: That's all right. I was trying to figure out the same kinds of stuff.

THE COURT: All right. So let's jump into jury instructions,

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everyone.					

MR. ROBERTS: Your Honor, I did have one question before we move on.

THE COURT: Sure.

MR. ROBERTS: One request from the defendants and that's that the jury be admonished that there's no evidence that any of the [indiscernible] purchased Sound Physicians. The question was asked. It was sustained. He didn't give an answer and he went on to ask another question --

THE CLERK: I'm sorry. Can I have everyone -- the record is getting really messed up here now.

THE COURT: Thank you, Brynn.

MR. ROBERTS: And then he went on to ask another question which assumed that he got an affirmative answer and doubled down on his testimony to the jury that United bought Sound Physicians. And they know from our interrogatory answers that is not true.

THE COURT: Then you can cure that on your redirect.

MR. ZAVITSANOS: So, Your Honor, just for the record, yesterday there was uncontroverted, unobjected evidence that they did buy them, and I got news for them, that's what this case is about going forward. So --

THE COURT: Well, I guess we'll have to talk about that more tomorrow then.

MR. ZAVITSANOS: All right. Dr. Frantz.

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ı	THE COOKT. Are you guys you're getting daily transcripts?
2	MS. ROBINSON: Yes.
3	MR. ZAVITSANOS: We are.
4	THE COURT: All right. So you hopefully you'll be prepared
5	on that issue tomorrow?
6	MR. LEYENDECKER: I will, Your Honor, thank you.
7	MS. ROBINSON: So we were conferring. I'm sorry. We
8	missed the opening part of the conversation about the charge. I was just
9	saying that my plane lands in Nevada at 2:15. The reason I requested
10	the option of having a remote hearing was in part just because you
11	know, there's a concern as plane schedules are that there might be a
12	delay which is
13	THE COURT: And you don't need to be worrying about that.
14	We're going to accommodate your schedule.
15	MS. ROBINSON: Thank you. I appreciate it
16	MR. POLSENBERG: Right. And I also pointed out that she
17	can't live closer to the airport than my office is. She could just come
18	right over.
19	MS. ROBINSON: The other thing that I wanted to mention
20	and with the Court's indulgence, I the issue is that I have a family
21	obligation this weekend that was I tried I spent about an hour-and-a-
22	half last night trying to
23	THE COURT: We cannot do jury instructions tomorrow to get
24	you home if you can give me if we can get it done Sunday.
25	MS. ROBINSON: Okay. Well, I was going to say with the

1	Court's indulgence, I can do it over BlueJeans tomorrow. I just couldn't
2	move my flight to be after
3	THE COURT: I certainly have no objection to that.
4	MS. ROBINSON: Okay. Thank you, Your Honor.
5	THE COURT: Did you have an objection, Mr. Polsenberg?
6	MR. POLSENBERG: No and I've even said on the record
7	earlier we can do hybrid where we can have some of us
8	THE COURT: Sure
9	MR. POLSENBERG: in person. Because moving all the
10	papers around, I think it's easier if we're in person, but you can come in
11	on BlueJeans or Zoom or whatever you want to use.
12	MS. ROBINSON: Yeah, in my experience, hybrid hearings
13	tend to be a little bit rougher than all in person or all
14	THE COURT: They're far more informal which is why I came
15	back full time in March because I just needed to move my cases along.
16	We were already in a backlog.
17	MS. ROBINSON. Understood.
18	THE COURT: So
19	MR. POLSENBERG: Yeah, but I want to be in person because
20	of
21	THE COURT: That's fine.
22	MR. POLSENBERG: papers and writing words.
23	THE COURT: Okay.
24	MR. POLSENBERG: Okay.
25	THE COURT: Now, are we ready now to tackle jury

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1	instructions?
2	MS. ROBINSON: Yes, yes. Thank you, Your Honor.
3	THE COURT: And have you two agreed on an order to take
4	them?
5	MS. ROBINSON: We I just assumed we would continue
6	progressing as we had through unjust enrichment and contracts but
7	THE COURT: So let me make sure I have the right I think
8	that I have the plaintiffs and my notes show that we were arguing page
9	5.
10	MS. ROBINSON: Of our contested?
11	THE COURT: Yes.
12	MS. ROBINSON: I'm just standing here for a moment
13	because there's a lot of activity
14	THE COURT: Sure.
15	MS. ROBINSON: back there.
16	THE COURT: You guys, take a minute and let me know when
17	you're ready to go.
18	MS. ROBINSON: I'm ready, Your Honor. Yes, I agree. We're
19	at page 5. I can just transfer, or I can stand here or go there either way.
20	COURT RECORDER: I just need everyone else to lower the
21	volume, please.
22	MR. POLSENBERG: This is why when the jury leaves I come
23	in here because I can't hear over there with everybody talking.
24	COURT RECORDER: Well, the record is going to be really
25	difficult to hear.

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THE COURT:	Well, and	yeah.
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MR. POLSENBERG: Do you want to just give --

THE COURT: Yeah. Let's -- you know, I'll just take a quick recess because that way I'll be able to work till our 5:50.

MR. POLSENBERG: All right. Thank you, Your Honor.

THE COURT: Be right back.

[Pause]

THE COURT: Please remain seated. So we're on page 5 of the Plaintiffs.

MS. ROBINSON: Yes, Your Honor. I believe, as -- the difference here, the modification from the standard instruction was that I had placed clear -- quotation marks around clear and convincing to be parallel to the way that the preponderance of evidence instruction is worded in the standard instruction.

And then I added the -- all of the evidence, because in our agreed instruction, the preponderance of the evidence, and I don't know if you have that up as well, but in that, we had agreed, and in this case -- excuse me, in determining whether a party has met this burden, you will consider all of the -- all the evidence, whether introduced by the Plaintiffs or Defendants. And I believe that if that sentence appears in one instruction for a preponderance and not for clear and convincing, I believe the jury will seize on that and believe that there is a significance to that difference. And that's why I had suggested that we add that to this instruction.

THE COURT: And the response, please.

MR. PORTNOI: Well, so Your Honor, first thing I would note is we actually have a competing instruction on clear and convincing evidence that is a little bit different. There's a fraud -- there's been a fraud claim in here under the punitive damages. And pattern instruction 10.8 is a clear and convincing evidence instruction that -- that, you know, is designed for fraud claims. But in addition, the authority that's in 10.8 is general punitive. It is general clear and convincing evidence instruction. And when you read 10.8 -- and just to be clear, this is in our proposed instruction, I will note the authority underneath our clear and convincing evidence instruction says 2.1 and 2.2. We filed a notice of errata because that was an error. We were relying on 2.1 and 2.2 as well as 10.8.

The latter, 10.8 is actually a little bit better. It's that it's -- to be honest, is that it says 2.2 has an unfortunate aspect to it where it really just says that clear and convincing evidence is not preponderance. It's not reasonable doubt. It doesn't quite say what it -- what it is. When we look at 10.8, it says the proof must be so strong in cogent as to satisfy the mind and conscious of a common person, and so to convince him/her that he/she would venture to act upon that conviction in matters of the highest concern and importance to his or her own interest. It need not possess such a degree of force as to be irresistible, but there must be evidence of tangible facts from which a legitimate inference may be drawn.

So we would recommend -- our instruction is derived from 10.8, and we would -- we would actually recommend that we work with

10.8 as the basis.

THE COURT: Okay. My inclination is to go with the pattern jury instructions. So please make your record.

MS. ROBINSON: And when you say the inclination is to go to pattern, we both offered a pattern jury instruction, Your Honor.

THE COURT: Right. The 10.8.

MS. ROBINSON: 10 point --

THE COURT: With modification.

MS. ROBINSON: I'm sorry?

THE COURT: 10.8 with modification.

MS. ROBINSON: Well, Your Honor, the issue with that is that we don't have a claim for fraud. There is a claim for a fraudulent aspect of punitive damages.

THE COURT: Okay.

MS. ROBINSON: But there is a couple of different ways that clear and convincing applies here. It's not only just in whether punitive damages should apply at all, but it's also that it -- honestly, it also applies to contract modification, which is another instruction. So I just don't know that the fraud instruction belongs in a case without a claim for fraud.

MR. PORTNOI: It -- and Your Honor, the -- in our proposed instruction, we obviously took out the in order for the Plaintiff to establish a fraud claim, because really what we're trying to do is use 10.8, which is a correct statement of the law, to -- for any issue on clear and convincing evidence, so that's why in our proposed instruction, we'd

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modify 10.8 to take that in order for the Plaintiff to establish.

THE COURT: 10.8 is inappropriate. 2.2, as is, is the appropriate instruction.

MS. ROBINSON: Your Honor, if we're going to just give 2.2 without modification, I would recommend that we take out the line in both preponderance and our -- you know, about the considering of all the evidence, because on reelection, we actually have an agreed instruction that also says that. So it would be -- we have an instruction --

THE COURT: The agreed instruction says without regard to which party introduced the evidence.

MS. ROBINSON: Yes. So I think the -- we have that agreed instruction, but we also have, in our agreed instruction on preponderance, and I'll tell you, I agree -- we agreed to this preponderance instruction and we -- and I found that we wouldn't be agreeing to clear and convincing, and that's when I looked back and realized that there would be a line in this one that did not appear in clear and convincing about considering all the evidence.

So I just don't think it should appear in one and not the other. Particularly, since we have an additional instruction that says that you should consider all evidence bearing on the question. So I just want them to be parallel. I don't mind if the line is in there or out of there, I just want them to be the same.

THE COURT: Yeah. Are you okay if they're parallel?

Because the language we use is put that regard to which party
introduced the evidence, not whether introduced by Plaintiffs or

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MR. ROBERTS: Yeah, I'm okay with it being parallel, Your
Honor. I only stood because I thought you would offer for us to be able
to make a record on the exclusion of the sentence we wanted to add it to,
too, that comes from today. And I'll be very brief that this came from
me, Your Honor. I think that when it comes to jury instructions, patterns

Defendants. I think it should be as neutral as possible.

THE COURT: You know, I have done that so many times, and it inevitably it ends up being the reason for the appeal and the remand.

are great, but the Court has a duty to give an instruction if it's requested

MR. ROBERTS: But this one is so safe, Your Honor, and here's why --

and it's a correct statement of the law. And -- but since we --

THE COURT: So --

MR. ROBERTS: -- because 10.8 is also a statement of clear and convincing evidence. And there will be no argument that clear and convincing is different in a fraud claim than it is for any other claim.

THE COURT: It can --

MR. ROBERTS: And then you take --

THE COURT: It's possible to modify it if you're -- it says -- that says fraud.

MR. ROBERTS: But I know. We just want to take that one sentence from 10.8 and put it in 2.2. You know, the people would ask -- would ask upon to the matters of the highest [indiscernible] something like that.

And here's why it's appropriate, because even though that

1	sentence is in 10.8, not 2.2, if you look at the authority for 2.2, it has that
2	exact quote in the authority for 2.2.
3	THE COURT: 2.2 is appropriate. So you've made the record.
4	MR. ROBERTS: Thank you, Your Honor. I'll get out of your
5	hair.
6	THE COURT: Okay. So
7	MR. ROBERTS: I got a to leave, so I'm going to leave it to
8	this good team here. Thank you so much, Your Honor.
9	THE COURT: No, I do have to say that I was impressed with
10	the way the teams have integrated some associates and younger
11	partners in the trial process.
12	MS. ROBINSON: Thank you, Your Honor.
13	THE COURT: I've meaning to say that all week. Because I
14	get so caught up, as you do.
15	MR. PORTNOI: And Your Honor, I would I would you
16	often ask for introductions, my associate Collin Stanton is in the court for
17	the first time today.
18	THE COURT: Thank you.
19	MR. PORTNOI: Probably keep me honest with jury
20	instructions.
21	THE COURT: We see you pretty regularly.
22	MR. ROBERTS: And it came up with Mr. Murphy, Your
23	Honor, William and Mary [phonetic] alone.
24	UNKNOWN SPEAKER: You didn't go to UVA, did you? All
25	right. You can stay.

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THE COURT: All right. So on the -- page 5 for clear and convincing, we'll make the two standards parallel in a neutral way.

MS. ROBINSON: Thank you, Your Honor.

THE COURT: And we'll adopt 2.2. Does that take us to page 6 with regard to unjust enrichment?

MS. ROBINSON: Yes, Your Honor. So our modification here to the standard instruction was that we had inserted direct or indirect benefit, and then I also added, this is called unjust enrichment, and the reason I had added this is called unjust enrichment is just because we had to have a damages instruction, and I was trying to direct the jury to -- I didn't know how to direct the jury -- how I was going to describe the damages instruction, unless I told them what this claim was.

THE COURT: Okay.

MR. PORTNOI: Your Honor --

THE COURT: Your spokesperson, please.

MR. PORTNOI: -- so we also have a competing instruction on unjust enrichment that I think has a foundational issue. One thing that comes up as we talk about unjust enrichment is whether or not we are -- oh, and we can do this later, but whether or not we are presenting unjust enrichment before breach of implied fact contract. The unjust enrichment claim is plead as an alternative to an implied and fact contract, and there's a lot of authority on the fact that once you have found a contract, whether it is implied or express that you can't have an unjust enrichment claim. So really, as efficiency for the jury, what you would normally do is start with a breach of implied and fact contract if

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the, you know, evidence has a little bit more to do with the verdict form,
but

THE COURT: That has more to do with the order in which the instructions are read also.

MR. PORTNOI: That's what I'm saying is whether we should be moving to unjust enrichment first or breach of implied in fact contract. We can argue that at a different time on Sunday, or we can argue about that now, if you wanted to.

THE COURT: Let's do it now.

MR. PORTNOI: Yes.

THE COURT: Well, it's --

MS. ROBINSON: Sorry, I didn't mean to interrupt. Go ahead.

THE COURT: Did you wish to comment?

MS. ROBINSON: Oh, I -- I'm so sorry. I didn't mean to interrupt. I was -- I had a response, but I had -- I had misunderstood that he was done, but I'll let him continue.

THE COURT: This is a fairly informal process, and --

MS. ROBINSON: Okay.

MS. LUNDVALL: Your Honor, we do have a position as far as on that source. What Mr. Dimitri -- or what Mr. Portnoi, excuse me, is suggesting is that if the jury finds, on the implied in fact contract, then they should just stop with their analysis. Well, in fact, that that should not be the case because, for example, once it -- if this goes -- case goes up, and which it likely will, is that in the event that they -- Nevada Supreme Court reverses and remands, if we have both of the

instructions, then there can be limited amount of work on remand versus
a brand-new trial then with only one of the claims being instructed upon.
So the jury needs instruction on both claims in our opinion.

THE COURT: I would tend to agree with Ms. Lundvall on that issue.

MS. ROBINSON: If I may approach, Your Honor, I just had some authority on that?

THE COURT: Let's give Mr. Polsenberg a chance to respond.

MS. ROBINSON: Sure. Of course.

MR. POLSENBERG: Yeah. I understand Pat's point. We can -- though I do know logically it makes more sense. I've been in cases where we've instructed on contract, implied contract, quantum unjust enrichment. It's just a logical order, but we can tell the jury that they have to go through and answer all the questions.

THE COURT: Well, and we'll get -- that's why I want to do the instructions before we do the verdict form.

MS. ROBINSON: I do have -- I just was going to offer the Court some authority on -- but I get the sense you're already familiar.

THE COURT: Go ahead. I cut you off.

MS. ROBINSON: Just, you know, this -- the question of whether we need to elect and stop the jury, that's not appropriate. The jury can answer, even inconsistent theories and that we would elect afterwards.

MR. POLSENBERG: I get --

MS. ROBINSON: So I don't think it makes sense to cut the

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•	jury on.
2	MR. POLSENBERG: You know, I think I just said we don't
3	have to.
4	MS. ROBINSON: Oh, okay. I'm sorry.
5	THE COURT: All right. So let's talk about this unjust
6	enrichment instruction.
7	MS. ROBINSON: So as I say, just turning to the standard
8	instruction, 13.12, the difference that we had I made Plaintiffs instead
9	of the Plaintiff. Same with Defendants. And then I had inserted direct or
10	indirect. That's recognized in Topaz Mutual, which we cite in our
11	authority. The other part, as I said, I had just said this is called unjust
12	enrichment because it was the only way I could think of to bridge the
13	jury to a damages instruction that I identified unjust enrichment.
14	THE COURT: Any response, please?
15	MR. PORTNOI: So Your Honor, we have a competing
16	instruction, which is on page 23 of our contested instruction.
17	THE COURT: Let me pull that up real quick because I'm my
18	desk up here is getting really messy. I think I have it right here. And
19	what page will that be on?
20	MR. PORTNOI: That would be at page 23 of our contested
21	instructions, Your Honor. Let me know when you're there. I don't want
22	to talk while you're trying to find something.
23	MS. LUNDVALL: Page 23 or instruction 23?
24	MS. ROBINSON: Page 23.
25	MR. PORTNOI: Look at it at the bottom, it says I see page
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	MS. ROBINSON: Oh, see, I was wrong. I had two versions of
their	
	THE COURT: I have two versions of yours, too.
	MS. ROBINSON: Here it is.
	THE COURT: I'm going to have to pull it up on the computer.
	MS. ROBINSON: A different page 23.
	MS. LUNDVALL: Okay. So I have to
	THE COURT: I have for Sunday, I have
	MS. ROBINSON: It's 23 of 44.
	THE COURT: everything being organized, so
	MR. PORTNOI: The best made plans. Well, I can certainly
explain the	e differences and what

MR. PORTNOI: -- went -- the first piece that is -- that we have is the fact that we think that the instructions have to open by pointing out that in this case throughout, what's going to be complicated is the jury has to be aware that this isn't a case about the Plaintiffs potentially conferring a benefit upon the Defendants. They have to find that a single Plaintiff confer a benefit upon a single Defendant. Maybe they'll find multiple different valiances. So the reason our instruction opens with the Plaintiffs -- and we sense that this might be the first claim, or it would be the transition from another claim. We had read the Plaintiffs, Fremont, Ruby Crest, or Team Physicians, may recover the reasonable value of a benefit conferred by -- on one or more of the Defendants.

THE COURT: Go ahead.

THE COURT: Okay.

MR. PORTNOI: You had United Healthcare, UMR, Sierra, or Health Plan of Nevada ifs. That's Nevada if. So that's the first pieces that we really have to make clear, or else we're going to have the notion that the jury is able to undifferentiated fashion, treat the Plaintiffs as a lump, and treat the Defendants as a lump, which isn't -- doesn't work for how unjust enrichment has to operate.

THE COURT: And I'm aware that there are briefs on this issue.

MR. PORTNOI: There are trial briefs on the -- there's some trial briefs on the unjust enrichment. I don't think that there is a -- I don't think there's a brief on this particular issue that I've just raised.

MS. ROBINSON: So just to respond to his point about lumping, I think both sides have -- certainly, we have proposed verdict form. We're not going to ask for Plaintiffs get this, you know, from all Defendants. We have broken out every single Plaintiff and every single Defendant.

So you know, we're not suggesting to the jury that you can't -- that you don't have to match every single Plaintiff with every single Defendant. And I think that's pretty clear. What -- what -- this instruction is very confusing the way that it's written.

In addition, the entire second half of the instruction is just the issue that we discussed. Instructing the jury on the law regarding, you know, we affected their verdict, and also, you know, they should stop, or you know, everything rests on the implied in fact contract; I just don't

think that its appropriate for an instruction to the jury.

MR. PORTNOI: I agree with the second half of the instruction has been ruled on, so I --

THE COURT: Right.

MR. PORTNOI: So long as we agree that we preserve our record, or you know, I agree with that; however, I still believe that the verdict form should match the instructions. It's very confusing to the jury if they get in and there's a verdict form and it doesn't actually -- and it looks completely different from what they were just instructed. That's a -- that is a prejudicial error, and really just a problem that's going to make the jury send back a lot of questions. It's going to make it hard for us to get out of here before Thanksgiving, so that's why I believe that the instruction should hopefully match that.

And otherwise, with the, you know, one, two, and three that are listed here, that also reflects the fact that, you know, once we start talking about the fact that we are -- it is the Defendant on whom a Plaintiff conferred the benefit, knew of the benefit conferred, is a -- as a -- I attempt to say as close to the pattern as possible, while rate -- while fighting that what we are doing is talking about we have to have a Plaintiff and a Defendant. We have to get to that match for unjust enrichments purposes. So that -- otherwise, I'm trying to say -- we are trying to say is faithful as possible to the pattern.

THE COURT: I am going to reject the Defendant's unjust enrichment request for instruction. Do you have anything more for the record?

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MR. POLSENBERG: Yes, Judge. I think instead of adding
lines to the pattern like this is called unjust enrichment, why don't we
just use traffic signals? In other words, I will now instruct you on
Plaintiff's claim for unjust enrichment, and that can be the instruction
before this.

THE COURT: Then I --

MR. POLSENBERG: And we can do that for every single one of their claims.

THE COURT: I read the intro at the top, so I think the last sentence is just not necessary.

MS. ROBINSON: That's fine. I just wanted to -- that's -- yeah, as long as we achieve that purpose, that's fine by me.

MR. POLSENBERG: Right. And let me also object to the -they're adding to the pattern by putting direct or indirect. If we're going
to stay true to the -- to the patterns, where -- at least where necessary,
then I think we should just be making wholesale changes. Right, the
direct and indirect aren't in here. And you know, I've done jury
instructions in maybe 75 cases, and I've -- it's pretty typical to put in the
proposed instruction that we're talking about, what the modifications
are. So that's marked right there in the text. So if you take something
out, you put in brackets. And if you add something, you underline it.

MS. ROBINSON: I don't think either party did that in this case.

MR. PORTNOI: That's correct.

THE COURT: That's unusual in my opinion.

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1	MR. POLSENBERG: A pox on both their houses.
2	THE COURT: So all right.
3	MR. ROBERTS: If that is helpful to Your Honor, I think we
4	would Ms. Robinson and I could obviously prepare something that is
5	easier to look at before and have that to you if that if that's something
6	that is helpful to Your Honor.
7	MS. ROBINSON: Or we could just walk you through. Either
8	way is fine.
9	THE COURT: The instructions that go back to the jury will
10	not have the cites. I use the cites for reference in settling the
11	instructions. So the two of you are going to agree on a language for the
12	unjust enrichment instruction, is that what I heard?
13	MS. ROBINSON: I'm not sure that I
14	THE COURT: Because the last sentence will be removed.
15	MS. ROBINSON: Correct.
16	THE COURT: The question now is whether or not direct or
17	indirect will be in. The Defendant says, you know, it's not in the pattern.
18	Plaintiff says this is a correct statement; you have to have the law. You
19	want one last bite of the apple?
20	MS. ROBINSON: Yes, Your Honor. I do think it's a correct
21	statement of the law, and I think it would be helpful to the jury, because
22	in this case, there's going to be argument, I assume. In fact, we've
23	already heard argument that it you know the henefit is going to the

insured -- to the insured -- the employer or the -- sorry -- the patient. And

in fact, and I don't want to confuse the jury because indirect or a direct

MS. LUNDVALL: And if it helps, Your Honor, when we argued the motion to dismiss, we had argued Topaz as including indirect benefit. And that was the Court's ruling. And so it would be consistent,

then, with the previous order that you issued on the motion to dismiss.

As you well know, that went up and there was no fuss about it, then, from the Nevada Supreme Court.

benefit can be recognized for unjust enrichment.

THE COURT: Okay. So I will -- Mr. Polsenberg, you have an issue now for appeal again.

MR. POLSENBERG: Thank you, Your Honor.

THE COURT: I won't strike the direct or indirect because it's a correct statement of Nevada law. Let's go to page seven.

MS. ROBINSON: So I know this is going to be an issue of hot debate. There is not a pattern instruction that I'm aware of on unjust enrichment. And basically, what I did here is the -- if you look at the first line of the unjust enrichment instruction, it says, "Plaintiffs may recover the reasonable value of the benefit." To me, that almost in itself is intended as instruction. And so I tried to, artfully or not, rephrase that exact statement of the law, "Plaintiffs may recover the reasonable value of the benefit conferred on the Defendants."

There is a lot -- I'm just going to go ahead and anticipate some of the argument that we're going to hear. The problem with the restatement with all the different options that are provided is that only one of them is supported by the evidence. There is the cost to the Claimant of conferring the benefit. There's no evidence of that because

that has been excluded.

The market value of the benefit. I think the problem with this statement is that we've just heard from Mr. Deal that a market -- whatever the courts are considering when they talk about a market value is willing buyer and willing seller. We know that we don't have that here. And so I think that's a very confusing -- in fact, really, all this testimony has established, there is, you know, so much confusion over what the prices should be in a market where there's a compulsory service provided and then a seeking of reimbursement afterward. It's just completely different.

And then the final one is the price the Defendant has expressed a willingness to pay if the Defendant's acceptance of the benefit may be treated as valid on the question of price, I just don't know how that ties into the evidence that's been presented in this case. So the problem is I think it's just very confusing to the jury to present a number of options that haven't been supported by any evidence. And in contrast, the instruction that we have offered is just a restatement of what's already been said in the standard instruction, which is they may recover the reasonable value of the benefit conferred on the Defendants.

THE COURT: And the response, please?

MR. PORTNOI: Your Honor, again, neither of these is a pattern instruction, so we're left without a pattern instruction for damages in unjust enrichment in Nevada. However, what we do know from *Certified Fire* is that *Certified Fire* does say that the proper measure is determined by restatement 49. And so giving restatement 49 is

equivalent to giving a pattern instruction. It is equivalent to giving what the -- what the Nevada Supreme Court said is the law. And for instance, there's -- just to be clear, you know, we -- everything -- much of what we put in here was designed to be directly quoted -- is either directly quoted from the restatement 49 or it's directly quoted from *Certified Fire*. For instance, "The actual value of recovery is usually the lesser of the market value and the price the Defendant has expressed a willingness to pay." That's a direct quote from the Nevada Supreme Court in an unjust enrichment case.

And we do have -- we do know what the price the Defendant has expressed a willingness to pay; that has been -- that -- Mr. Deal and Mr. Leathers have given -- have presented claims files that show -- and have described them -- that show how much the Defendants have expressed a willingness to pay, how much they have paid. They made -- there may be decisions that how much we've expressed a willingness to pay to other providers may be relevant to that. And you know, again, we've seen some evidence with respect to cost and we've seen some evidence -- certainly, Plaintiffs have said frequently that they believe that a substantial value of benefit was provided to advance the purposes of the Defendant. That's been said many times. And the jury is competent to measure that.

Mr. Polsenberg may be starting to stand up now.

MS. LUNDVALL: Well, let's be clear, Your Honor, what they're doing is they're trying to set you up. They're trying to suggest that if you give the jury instruction that they want, then in fact that

there's some type of error.

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MR. PORTNOI: No, Your Honor.

THE COURT: No, no. I can tell you that the jury instruction proposed by the Defendant here is way overbroad. It doesn't fit the facts of this case and it basically is -- contains argument for things that should be in the verdict form. But you can't recover on the implied in fact contract and the unjust enrichment claims. You know, you might set those out in separate jury instructions, but the way that the Defendant

MR. PORTNOI: Oh, I think Your Honor may be looking at the wrong instruction because we were -- we moved -- well, I thought we had moved on to the measure of damages. So that would be page 25 of 50 -- of 44.

framed the unjust enrichment instruction here is just way overbroad.

THE COURT: Oh. And this is why. I'm embarrassed that we're on the record when I said that. Okay. I --

MR. PORTNOI: And to be clear on that point about what's in that, I think I already said on the record, we believe that's been resolved. So we are -- with that, that's fine.

THE COURT: Good enough. I have no problem with the -- seven as proposed by the Plaintiff.

MR. PORTNOI: And again, we would say we believe that is an incorrect statement of the law and is clearly too minimal and does not actually correctly state the law under *Certified Fire*.

THE COURT: Good enough. Do you have anything more for the record?

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	THE COURT:	Okay.	Let's go	over to	the contra	icts ins	truction
on page eig	ıht.						

MS. ROBINSON: Thank you, Your Honor. So there's -- this is a modified from the standard 13.11. 13.11 stops at ascertainable agreement. We did add the -- everything that follows from that. So, "Even if the parties did not agree on a price term, you may find the parties formed," that whole paragraph there is added from *Certified Fire*. I know that there's just been a lot of dispute about whether or not a price term is necessary, and so we just wanted to forestall any argument that without a price term, you can't find that there has been an agreement.

THE COURT: Well, I think my ruling today on the request for directed verdict should be instructive. I don't believe the price term is necessary in an implied contract. So I don't have any problem with the 13.11, but I don't think the additions are appropriate.

MR. PORTNOI: Your Honor, before we get to 13.11, I would also point out that Defendants have proposed that all of the contract instructions, the pattern contract instructions should be given. So that includes 13.0, 13.2 --

THE COURT: Right. And I just think that they are way too broad. Way over the top.

MR. PORTNOI: You think the pattern instructions are too broad?

THE COURT: No, no. The proposals from the Defendant.

MR. PORTNOI: Your Honor, again, these are the pattern instructions in any contract claim. The jury should be instructed on what

an offer is, what an acceptance is, what contractual intent is, what consideration is. This is --

THE COURT: Well, we'll get there. We're only now at the basic contracts. We'll get there.

MR. PORTNOI: Oh, okay. I was pointing out that only Defendants have proposed those pattern instructions. I -- the implied in fact instruction, that is the pattern without modification. Obviously, Plaintiffs have proposed adding something that says price term is not necessary. Defendants have proposed something that says a price term is a material term.

THE COURT: And I've just indicated that I think the pattern instruction should be given without the additional information.

MR. PORTNOI: And I understand. So we believe it's helpful, but we've made our record.

THE COURT: Good enough. Did you have something more to add on that?

MS. ROBINSON: I'll just make a little record here, Your Honor, and just say that we believe that the paragraph about the price term is both legally correct and it would be helpful to the jury in case there's going to be argument that if there wasn't an agreement on a price term, there was not a contract. And then the second part, the, "In Nevada, implied in fact contracts and expressed contracts stand on equal footing," is in part a response just to the Defendants' continuing characterizations that we don't have a contract with any of the Plaintiffs. It's been repeated over and over again, and it's a little frustrating

because I think that they don't have an express contract. But we don't
want to give the jury the impression that implied contracts are not
equally enforceable and valid under the law. So that is the reason why
we would propose that. We think it's both legally correct and helpful.

THE COURT: Thank you. Let's go to page nine.

MR. PORTNOI: Your Honor, just so I understand the ruling --

THE COURT: Yes, of course.

MR. PORTNOI: Is your ruling to give 13.11 unmodified?

THE COURT: That's correct.

MR. PORTNOI: Okay.

MS. ROBINSON: Thank you, Your Honor. So the modification, I don't know if the Defense is going to argue that there was a modification to our agreement or not. And I just offer this instruction sort of in case that there is an argument that there's been a modification. The way that this deviates from the pattern instruction is that the pattern instruction creates -- has a line about an oral agreement may modify a written contract. That's the second line of the first paragraph. I don't think that -- I mean, that refers to an express contract. So I'd remove that because I just didn't think that that was reflected in the evidence in this case because everything is going to be implied.

What we had added was the idea that for modifications to be valid, there has to be additional consideration. And the reason that we did that is because what the jury has seen is evidence that, you know, there was payment amounts and then those payment amounts have gone down. And that, you know, if all there is is just -- if there's going to

be argument that there's a course of dealing, that the payment amounts
went down, down, that that somehow indicates that there's been
an acceptance of a modification, we wanted to show the jury that there
has not been any return consideration given for that. You know, and we
don't think that would be a valid modification.

Now of course, we would also argue that we never consented and there's nothing to suggest we did. We're here suing because we didn't consent. But that's the reason why we offered that. Everything else, I think, is in the pattern instruction.

THE COURT: And the response, please. Do you --

MR. PORTNOI: I don't think that modification is in this case. We haven't proposed a modification instruction. I just don't think this is a modification of contract case.

THE COURT: All right. Given the fact that there is a statement that modification is not going to be argued, this -- page nine will not need to be given.

MS. ROBINSON: Thank you, Your Honor.

THE COURT: Page ten.

MS. ROBINSON: This -- so -- and I realized that my footnote on this is not entirely accurate about the revision, so I'm just going to walk the Court through the revision of the standard.

THE COURT: Hold on. I'm pulling it up right now.

MS. ROBINSON: So you'll see the standard is much, much longer. And I can explain once you've pulled it up.

THE COURT: It's scrolling. This is very user-friendly.

MS. ROBINSON: So basically, our proposed instruction ends right before -- the middle of the first paragraph or about two thirds of the way through the first paragraph because I just deleted consequential damages. We're not seeking consequential damages and I didn't think that that was -- I just thought that would be confusing to the jury. It's not supported by the evidence.

Everything else, I excluded because it just doesn't seem relevant to this case. So the first -- the second paragraph, which is the first we excluded, was that enforceable as to future performance, divisible, we don't have a divisible -- that just doesn't seem like the kind of contract that's being argued in here. Terminable at will, all of these, basically, measure -- damage is measured as the date it was breached, special circumstances, none of that is really relevant to this case. And so that's why we had not included those paragraphs in the standard instruction.

MR. PORTNOI: Just a moment to consult with Mr. Polsenberg.

THE COURT: Of course.

MR. PORTNOI: Thank you.

THE COURT: And you know, just because I indicated I thought some of the Defendants' were overbroad doesn't mean that I don't have an open mind. I change my mind based upon argument regularly.

MR. PORTNOI: Absolutely. And we'll continue to try to change your mind, Your Honor. I did not take that any other way.

1	THE COURT: Good enough. So take a moment. Let me					
2	know when you're ready.					
3	[Pause]					
4	MR. PORTNOI: Your Honor, is it possible we could reserve					
5	this particular instruction and bring it up tomorrow? It may be possible					
6	that we can, on further reflection, come to an agreement and not use the					
7	Court's time today.					
8	THE COURT: I have no problem with that. Let me just give					
9	you my impression.					
10	MR. PORTNOI: Yes, Your Honor.					
11	THE COURT: The first paragraph seems to the first					
12	paragraph seems to apply. The following paragraphs seem to assume					
13	that it's a written contract, and that's my comment. So Ms is it					
14	Williams?					
15	MS. ROBINSON: Me?					
16	THE COURT: Your last name, yeah.					
17	MS. ROBINSON: Robinson.					
18	THE COURT: Sorry. Robinson.					
19	MS. ROBINSON: No, it's only they're both in the top ten					
20	most common names.					
21	THE COURT: Sorry.					
22	MR. POLSENBERG: Polsenberg.					
23	THE COURT: Are you willing					
24	MR. PORTNOI: Portnoi.					
25	THE COURT: Oh, yeah. How about my name, right?					

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N	IS. ROBINSON: What's your name?
Т	THE COURT: So what are you willing to defer this to talk to
Mr. Portnoi?	
N	MS. ROBINSON: Of course. Of course.
Т	HE COURT: Okay. So we'll take this up tomorrow.
N	MR. PORTNOI: Your Honor, I think that's the last of Plaintiff's
proposed co	ntract instructions. And I just wonder, I mean, A, I don't
know if that i	means we're at a point where we should stop, just given
security's de	sire, or
Т	HE COURT: We have five more minutes.
N	/IS. ROBINSON: Oh.
N	MR. PORTNOI: Otherwise, I would wonder if it makes sense
to look at the	e other contract pattern instruction that we have proposed.
N	AS. ROBINSON: So sorry. I didn't mean to but we do
actually have	e one more.
N	/IR. PORTNOI: Oh, I'm sorry. I didn't
N	IS. ROBINSON: It's 13.47, the following one on page 11.
N	IR. PORTNOI: I'm so sorry. I really thought we were done.
N	IS. ROBINSON: I mean, I guess that could apply to all of
our damages	s, and I'd be fine with that, but that is technically taken from
the contracts	portion of the I mean, of the NJI. So this is just, I think,
the pattern ir	nstruction about damages, 13.47. I don't think there's any
modification	. Certainly not an intentional modification, unless it's a typo.
N	IR. PORTNOI: I don't think we have a so as long as it is
roprocented	to be the pattern, we don't have an objection to this

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instruction.

THE COURT: Thank you. So 13.47 will be given. Now, this gets me to the Unfair Insurance Practices Act. Let's --

MS. ROBINSON: Okay. Oh, I'm sorry, Your Honor. I just was agreeing with Mr. Portnoi that maybe we should finish their contracts.

THE COURT: Okay. Let me pivot over to that, then. And what page will that start?

MR. PORTNOI: So our contract instructions start on page 9 of 44 is what I see running down the bottom.

THE COURT: I'm there.

MR. PORTNOI: Of our November 15th filing.

THE COURT: I'm there.

MR. PORTNOI: So this is 13.0. 13.0 contemplates having some description of what the contract is, which is in the pattern instruction, I believe. Mr. Polsenberg will probably remember when the first version of this was written in 1947.

MR. POLSENBERG: Excuse me.

MR. PORTNOI: But my understanding is that it's here because really, the jury has to understand what the theory of the contract is and what the theory of the defenses to the contract is to be able to really have a target of what that is. So we do believe a version of 13.0 should be given. Certainly, you know, I believe Ms. Robinson has argued that ours is, you know, lengthy and we've done our best. And obviously, we would expect -- we would have expected Plaintiffs to propose a

counter to this so that we could potentially integrate their view of what they allege the contract to be. And we're open to that, but we do believe that some introductory instruction along the lines of 13.0 is needed.

THE COURT: The thing is that the jury instructions are not supposed to editorialize, and the Defendant's proposed here does that. And we've got a pattern instruction on point. So with that being said, Ms. Robinson.

MR. PORTNOI: Well, the issue is 13.0 is the pattern instruction. And if you look at it, it has things like, "The Plaintiff claims that Defendant breached the contract by," and then it says, "briefly state alleged breach." So I am attempting to obviously fill in the brackets, though I obviously agree that we should, you know, we would have to have some discussion about, you know, some of the details in there.

MS. ROBINSON: So my response to that is that this is a very complex case. Now, if that -- the jury has sat through -- will have sat through weeks of evidence where the parties are describing exactly what they believe their claims and defenses are. That being said, trying to reduce all of that to a narrative description of the parties' claims and defenses seems to me both an incredibly difficult -- well basically, impossible to do without -- it would be a very, very time-consuming and difficult task and would probably still result in error.

And I just don't think it's necessary. It is a pattern instruction in the sense that there is an instruction that invites a narrative about the parties' claims and defenses. I just think in a case of this nature, it's just -- it does invite editorializing. And it's going to be very, very difficult to

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draft something that's totally neutral that doesn't exclude any of the						
parties' arguments or evidence in this case.						
MR. PORTNOI: Yeah, I						
MS. LUNDVALL: Nearly going to be impossible to try to						
come up with a neutral statement on what the parties' positions are.						
THE COURT: So what I'm going to do is tell you that the						
pattern instruction will be given. You'll propose language to each other						
to fill it in. To the extent you can agree, great. If you can't, I will						
determine the language.						
MR. PORTNOI: I think that's appropriate, Your Honor. Thank						
you.						
MR. POLSENBERG: Thank you, Your Honor.						
THE COURT: Okay. And I think that pretty much uses up our						
time for the day.						
[Proceedings adjourned at 5:51 p.m.]						
ATTEST: I do hereby certify that I have truly and correctly transcribed the audio-visual recording of the proceeding in the above entitled case to the						
best of my ability.						
Xinia B. Cahill						
Maukele Transcribers, LLC						
Jessica B. Cahill, Transcriber, CER/CET-708						

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5	DISTRICT	COURT			
6	CLARK COUNT	TY, NEVADA			
7	FREMONT EMERGENCY SERVICES))) CASE#: A-19-792978-B			
8	(MANDAVIS) LTD., ET AL.,) DEPT. XXVII			
9	Plaintiffs,) DEF1. AAVII)			
10	VS.)			
11	UNITED HEALTHCARE INSURANCE COMPANY, ET AL.,)			
12	Defendants.)			
13					
14	BEFORE THE HONORABLE NANCY ALLF DISTRICT COURT JUDGE				
15	MONDAY, NOVEMBER 22, 2021				
16	RECORDER'S TRANSCRIPT OF JURY TRIAL - DAY 17				
17	APPEARANCES:				
18		ΓRICIA K. LUNDVALL, ESQ. HN ZAVITSANOS, ESQ.			
19	JAS	SON S. MCMANIS, ESQ. SEPH Y. AHMAD, ESQ.			
20	MIC	CHAEL A. KILLINGSWORTH, ESQ. /IN LEYENDECKER, ESQ.			
21		LEE ROBERTS, JR., ESQ.			
22	K. l	EE BLALACK, ESQ. FREY E. GORDON, ESQ.			
23	CO	LBY L. BALKENBUSH, ESQ. IITRI D. PORTNOI, ESQ.			
24		CILIA PLAZA, ESQ.			
25	RECORDED BY: BRYNN WHITE, COU	JRT RECORDER			
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1	Las Vegas, Nevada, Monday, November 22, 2021
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3	[Case called at 8:03 a.m.]
4	[Outside the presence of the jury]
5	THE COURT: Thanks everyone. Please be seated. Good
6	morning.
7	MR. ZAVITSANOS: Good morning.
8	MR. BLALACK: Good morning, Your Honor.
9	THE COURT: Can we bring in the jury?
10	MR. AHMAD: I believe so, Your Honor.
11	THE COURT: Did you guys get back to Nicole on exhibits?
12	MR. BLALACK: Whatever we need to do, we just need to
13	make sure you get a copy.
14	THE CLERK: You were supposed to look at them over the
15	weekend because you both sides have been sending me additional
16	MR. BLALACK: I know we have been doing that.
17	MR. GORDON: And we have we've looked at them, and we
18	sent them some emails. Some we agree on, some we're still working
19	through. Clearly, Your Honor, we probably have to build in some time
20	today for those that we can't reach agreement on. We have to present
21	THE COURT: There's no time to build in. You can do it after
22	5.
23	MR. BLALACK: That's fine.
24	THE COURT: I'm not going to jam you up on putting your
25	case on.

1	MR. BLALACK: That's fine.
2	MR. GORDON: That's fine, Your Honor.
3	MR. PORTNOI: Your Honor, do you also want to take up
4	now, or at 5, the motion for relief of amended pleadings?
5	THE COURT: This afternoon. Come on up.
6	MR. ROBERTS: Should we make our appearances, Your
7	Honor?
8	THE COURT: You know, I was going to save time and not do
9	it, but
10	MR. ROBERTS: Oh, okay.
11	THE COURT: since we have the time. I'm going to call the
12	case in of Fremont v. United. Plaintiff's appearances then Defendants.
13	MR. AHMAD: Yes, Your Honor. Joe Ahmad for the Plaintiff
14	healthcare providers.
15	MR. ZAVITSANOS: John Zavitsanos, Your Honor.
16	MR. MCMANIS: Jason McManis.
17	MR. LEYENDECKER: Kevin Leyendecker.
18	MR. KILLINGSWORTH: Michael Killingsworth.
19	MS. LUNDVALL: And Pat
20	THE COURT: Thank you. And for the defense?
21	MR. ROBERTS: Lee Roberts for the Defendants, Your Honor.
22	MR. BLALACK: Lee Blalack on behalf of the Defendants, Your
23	Honor.
24	MS. PLAZA: Cecilia Plaza on behalf of the Defendants.
25	MR. GORDON: Jeff Gordon. Good morning, Your Honor, on

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1	behalf of the Defendants.
2	MR. BALKENBUSH: Colby Balkenbush on behalf of the
3	Defendants as well, Your Honor.
4	THE COURT: Thank you.
5	MR. PORTNOI: Dimitri Portnoi on behalf of the Defendants.
6	MS. LUNDVALL: And Pat Lundvall from McDonald Carano
7	on behalf of the Plaintiffs. Apologies for being late, Your Honor.
8	THE COURT: No problem. I walked in at 7:59, so.
9	[Pause]
10	THE COURT: All right. So Juror number 1 is not here. And
11	Juror number 2, Cindy Springberg, has a cold or maybe a sinus
12	infection. Doesn't feel great, but she's here. And he's going to call Juror
13	number 1 right now.
14	MR. BLALACK: Your Honor, while we're waiting, for
15	planning purposes, our next witness, after Ms. King finishes, which is
16	probably another hour, well, I should say a couple hours between direct
17	and cross, redirect, will be Mr. Bristow. And the plan, I think, is for us to
18	play a video on direct and then bring he'll come in live on cross. So
19	we can talk about that more at that time, but I just wanted you to I
20	know we got you the final designations, the clips
21	THE COURT: Right.
22	MR. BLALACK: late yesterday, so it may be that Your
23	Honor
24	THE COURT: I didn't get to it last night. It's in my office. I
25	brought it this morning.

1	MR. BLALACK: Okay.			
2	THE COURT: I will do it.			
3	MR. BLALACK: You okay. Because I'm just trying to game			
4	out if we need to have a Plan B for after she is done because the plan			
5	would be to play the video.			
6	THE COURT: So are the clips of the deposition I need to rule			
7	on, is that Bristow?			
8	MR. BLALACK: Correct.			
9	THE COURT: Oh. Well, I hate to do it up here. I guess I can			
10	go get it and			
11	MR. BLALACK: I can do it however you want, Your Honor.			
12	THE COURT: Yeah.			
13	MR. BLALACK: I mean, it's just			
14	THE COURT: Let me go get it. I'll be right back.			
15	[Recess taken from 8:08 a.m. to 8:11 a.m.]			
16	THE MARSHAL: Department 27 is back in session.			
17	THE COURT: Thanks, everyone. Please remain seated. And			
18	let's bring in the jury.			
19	MR. ZAVITSANOS: Did the juror make it Your Honor, do you			
20	know?			
21	THE COURT: Yes.			
22	MR. ZAVITSANOS: Okay.			
23	THE MARSHAL: All rise for the jury.			
24	[Jury in at 8:11 a.m.]			
25	THE COURT: Thank you. Please be seated. Okay. Mr.			

1	Blalack.				
2	ſ	MR. BLALACK: Thank you, Your Honor.			
3	THE COURT: Mr. Roberts.				
4	ſ	MR. ROBERTS: Thank you, Your Honor. Good morning.			
5		JURORS: Good morning.			
6	r	MR. ROBERTS: Good morning, Karen.			
7	-	THE WITNESS: Good morning.			
8	KAR	EN KING, DEFENDANTS' WITNESS, PREVIOUSLY SWORN			
9		DIRECT EXAMINATION CONTINUED			
10	BY MR. ROB	ERTS:			
11	0 9	So let's go back to where we left off on Friday afternoon.			
12	And we were	e talking about your work both for your own consulting firm			
13	for Aon and	for Marriott International in the area of self-funded			
14	employee he	ealth benefit plans. Do you recall that?			
15	A I	do.			
16	0 0	Okay. Let me I had one more question to ask you with			
17	regard to yo	ur background and foundation. How many times have you			
18	been throug	h the competitive bidding of an employee health plan TPA			
19	contract?				
20	A I	would say I have been through the competitive bidding RFP			
21	process app	roximately 60 times.			
22	Q /	And of those 60 times, how many times were you acting as			
23	the consulta	nt for the insurance company or TPA bidding on the			
24	contract?				
25	A I	How many times was I working for the TPA?			
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1	Q	For the insurance company.
2	А	Never.
3	Q	Okay. Who did you typically represent?
4	А	My client was always the employer and the employee
5	employees	of that employer. That's who I worked for. That confused
6	me.	
7		MR. ROBERTS: Your Honor Thanks. Are you done?
8		THE WITNESS: I'm done.
9		MR. ROBERTS: I didn't mean to cut you off.
10		THE WITNESS: Thank you.
11		MR. ROBERTS: Your Honor, at this time, I would move to
12	qualify the	witness as an expert in employee benefit plans, self-funded
13	employee	health benefit plans, and the market for TPA contracts.
14		MR. AHMAD: No objection, Your Honor.
15		THE COURT: The witness may testify.
16		MR. ROBERTS: Thank you, Your Honor.
17	BY MR. RC	BERTS:
18	Q	So a little bit of background, hopefully I'm not being too
19	repetitive a	about some of the things the jury's heard, but in your
20	experience	, how do most people obtain their health insurance?
21	А	Most people obtain their health insurance through their
22	employer.	
23	Q	And what are the most common types of health benefit plans
24	that emplo	yers implement?
25	А	Employers have a choice of two types of plans. They can
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either offer a fully insured plan where the risk is taken by the insurance carrier and the plan is more off the shelf. It's designed by the insurance company, that's fully insured.

What's much more common and what covers about 70 percent of employer-based coverage is a self-funded plan design. In a self-funded plan design, the employer designs the plan. They take the risk. So if the employer charges too much for the plan, then they -- you know, they have miscalculated and it's not good for them. If they've -- if they've charged too little for the plan, then they assume more loss than they expected.

With a self-funded plan, the risk is shared between the employer and the employees. The employer typically will fund about 70 percent or -- you know, somewhere in that range of the funds towards supporting the plan, and the employees will typically fund approximately 30 percent. So when I was working as a consultant for these TPA -- for the RFPs, my client was the employer and the employees because I was acting in the best interests of both.

Q And tell the jury again what an RFP is?

A An RPF is a process where you go through creating a large, it's called a request for a proposal. You create a large document that includes many, many, many aspects of what an employer is looking for in hiring either a TPA or an insurance carrier.

Q What are the advantages of a fully-insured plan to an employer?

A The advantages of a fully-insured plan to an employer is

there's less work. The insurance company will create the policy. They will do the government filings. They really pretty much do everything.

And in return, the employer just pays the premium. So the employer has much less work to do.

Q What are the advantages to an employer of a self-funded plan?

A There are clearly many advantages to a self-funded plan. That's why about 70 percent of employers offer self-funded plans. With a self-funded plan, the employer is not subject to state mandates, which is big. If you're an employer and you're in many, many states, you don't want to have to comply with every single state mandate. You can design the plan however it best fits your employees' needs and your organization's needs. You're not subject to state premium taxes, FICA, SUTA, all those other taxes. You just have a whole lot more flexibility. However, you do have to -- you have to write your plan document. You have to make sure that you are complying with the ACA and things like that. So it's more work, but it's much more cost effective for both the employer and the employee.

Q In your experience, why do employers with self-funded plans need a TPA?

A Well, they need a TPA because it's difficult in this day and age to pay your own claims. So the TPA pays the claims. It's -- it would be extremely difficult for an employer to set up their own network of providers, hospitals, physicians, x-ray, lab. So the TPA handles the claims processing. They handle the credentialling. They handle the

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networks. They really do quite a bit of that work, especially the work
that's national in scope. It would be difficult for a nation national
employer to do all that themselves.

- Q All right. Karen, I believe you mentioned that an employer with a self-funded plan has more flexibility to customize plan benefits?
 - A Yes, that's definitely one of the advantages.
- Q What types of benefits can be customized in your experience? In other words, what are the things that vary among the plans --
 - A Oh, okay.
 - Q -- that the employers choose?

A Well, there's lots of things that can vary. They can obviously vary the very basic things like deducible, copays, out of pocket. They can also vary what they actually cover. They do have to comply with federal guidelines. Like, they can't decide not to cover maternity claims, but they can -- they can decide the degree to which they cover all kinds of benefits within certain guidelines. They can decide how they cover out-of-network programs for example. So they have a lot of latitude.

Q Let's go back to the TPAs. How do employ -- how do employers typically select a TPA?

A Most employers who are self-funded will use a consultant because it's difficult for an employer to have the understanding of the whole marketplace. So they'll hire a consultant. In my experience as a consultant, I would usually meet with my clients, my employer clients, several times during the year in setting strategy. So we would look back

over the prior year to see what went well, what didn't go well. We'd look at their claims experience. Was it moving forward as expected or was it higher than they expected? We would look at innovations that are out in the marketplace. We would benchmark them against their peers to see if they were offering competitive plans according to their peers. Because one of the things that employ -- the reason that employers offer benefit plans is they want to be able to hire good employees. So they'll look to see what are -- what are their peers offering.

And once we've gone through that process, we'll start setting strategy. And we'll look to see what should we change for the coming year. What should we continue to do? And if the results aren't so good or they're dissatisfied with their current TPA, then we might decide to go out to bid and create an RFP.

Q Is there usually a -- the best TPA, and then that person would be the best for every employer?

A Absolutely not. No. There is a best-fit TPA for each employer. And what's a good fit for, say, a manufacturing client that's located in one state is going to be a very different fit than for, say, a technology client who's operating in all 50 states. So you -- the purpose of the RFP is to describe in the -- in the questionnaire, the things that the employer is looking for, and then have the -- each TPA respond how they expect to fulfill those requirements.

- Q What kind of specific goals or needs might clients have that would affect their choice of a TPA?
 - A Well, again, it's -- there's a best fit for each client. So clients

are going to have different goals and objectives. Some clients are going to want to have a very hands-on approach. They're going to want a TPA that's going to provide lots of customer service to their employees, that's going to -- you know, walk them through all the decision-making and that's going to offer a very broad network because they don't want their employees to have to think too much about picking a provider. Other --

Q Are --

- A Go ahead.
- Q Are some employers more cost-focused than others?
- A Yes. Yes. Some employers' cost is their number one focus. And they are going to offer whatever they can that's going to keep their cost as low as possible. Other employers are in a very competitive marketplace, a very competitive area, trying to hire employees. So they're going to offer, say, a more comprehensive plan. It's much like salaries. You know, if you're really trying to hire a very unique type of employee, you might be offering higher salaries than someone who doesn't have any trouble hiring employees.
- Q As a consultant for employers, do you evaluate the financial performance of TPAs?
 - A Yes, that's one of the critical things that we do.
 - Q And how do you go about doing that?
- A Well, often what we will do is we will include in the RFP two years of claims history. So we'll go back 24 months and say here's all the claims that they had. Here's the utilization. Here's what it cost to adjudicate those claims, and then we will give that claims history to the

different TPAs that are bidding. This is all de-identified. They can't tell who has incurred what claims. But we'll give them those D identified claims and ask them, had this been your client, how much would these claims have cost you? So basically what they do is they run all those claims through the claims -- the type policy that they're recommending, the networks and everything, and they tell you, had this been our client, this is what it would have cost.

Q Do you also continue to monitor financial performance after a contract is placed?

A Absolutely. That's one of the most important things that we do. With a self-funded claim, usually there's an actuary who's a highly-trained mathematician who every -- at least every quarter, and times every month will evaluate all the claims that are being adjudicated and compare that to what we expected the claims to cost. These are called projections.

So they will project forward to say, are we on target Are we charge is right amount for this plan? Are -- the goal is to be right on target. It's hard because you're projecting, you're guessing into the future. So they will -- the actuary will say, are we on target? Are we above, are we below? And then they will do that every month or every quarter during the plan year. And then in usually August of the prior year, we will set rates for the coming year. So we'll look at the claims history.

They actually go back again 24 months, weighing the most recent 12 months heaviest, and they will say, okay, if this is what we've had up

until now and we're going to make these changes to the plan design going forward, say, we're going to change our out-of-network reimbursement level or we're going to put in a wellness vendor or, you know, whatever they're going to change, we're going to the deductibles, then this is what we need to charge in rates for the coming plan year. So they'll do that in August for January through December.

- O Do you ever audit how claims are paid?
- A Yes.
- Q And what is the purpose of that?

A Because you trust but verify. So usually in most full-service consulting agreements there will be a component called a pre-implementation audit and a post-implementation audit. So pre-implementation audit is something that you usually do when you first hire a TPA. And that audit is performed after they have programmed the system but before they've started paying claims. So the audit will look to see have they interpreted the plan design, the plan document correctly in their claims system? And they'll run through test claims to see if that has happened. If they haven't, then they fix it. And this is ideal because you fix it behalf any claims have been paid incorrectly.

In a regular audit, you will look -- you will look back to see how were claims adjudicated. Were they adjudicated correctly? Did they use the correct network contracts? Did they pay according to the plan design? And then this you find errors; you will ask the TPA to correct those errors. If they've underpaid employees, you'll ask them to pay them more. If they've overpaid employee, then we have interesting

conversations about who's going to pay for that.

- Q Are you unique in the industrial in performing these types of audits?
 - A No.
 - Q How often does this happen?
 - A In the industry?
- Q Yes.

A I would say with larger consulting firms, it's very, very typical. With smaller firms, with brokers, it might be less typical. But, in my experience, with -- can self-funded plans, it's very typical.

Q So let's say one of your clients, an employer group with a self-funded plan is dissatisfied with their TPA, too many interesting conversations, how would they go about selecting a new TPA?

A Well, we would -- we would go through the strategy session again, we would decide what we're looking for, we would decide what kind of plan design we want. I mean do we want to continue with the current plan design, or do we want to change to some other, you know, set of offerings, and then we would, you know, create an RFP and send it to -- usually about five different TPAs. We also include the current TPA because sometimes the current TPA gets serious and decides, Oh, I better do a better job or I'm going to lose this client. And sometimes they'll charge you less because you've got out to bid.

We do recommend that employers test the market about every three to five years to make sure that they're not overpaying.

O How would you go about selecting the five or so TPAs that

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A It depends on the client as to which is going to be a good fit. And because we're -- you know, consultants are in the marketplace all the time. We have a pretty good understanding of which TPAs are going to be, you know, a fairly good fit for this client. You wouldn't want to pick a regional TPA to serve a national client. So if you have -- if it's a national client, you're going to pick the national TPA. And then sometimes you'll look at the industry as well. Some TPAs will specialize in certain industries.

For example, I had a hospital system client who was going to bid, and there are certain TPAs that really specialize in hospital systems.

They're very unique and paying their claims are -- they're unique. And so you would choose from those TPAs that really specialize in hospital systems. And then you offer them to --

- Q In your --
- A Let me finish.

would receive the request for proposals?

- -- then you offer them to your clients. You say, here's five or six that we recommend. The client reviews them. They can either add or delete from that list. You get them to sign off on it. It's the client's choice in who we actually go to. And then you proceed with the RFP.
- Q How often, if at all, do employers focus on a TPA's out-ofnetwork reimbursement method in selecting the TPA?
- A You always focus on that because out-of-network costs, claims costs are always higher than in-network. So when you are creating a RFP, you want your TPA to offer innovative cost-effective

solutions that will provide the employer and the employees with the most value for the dollars that they're spending.

Q Okay. You've got five TPAs selected for the request for proposal. What's the next step? How do you go about narrowing that down?

A Well, we send them the RFP. We look at all much their responses. We usually create a side-by-side comparison. So we'll look at all different components of the questionnaire and we'll show the employer side by side how each one of the TPAs responded. Oftentimes we'll give a value to the responses. You know, this was a really good response, this was not a good response, this was a medium response, and we'll go through that whole document with the employer. Usually we don't make a recommendation at that stage, but they will often ask us, you know, which one do you think we should choose as a finalist? And if partnership with the employer, we'd pick a final -- we'd pick some finalists. Usually two or three finalists.

And then the finalists will come into a finalists meeting, and they will make a presentation to the employer. The employer has the opportunity to ask questions. And ideally after that, they will -- they will choose their new vendor.

Q So we've got the finalists. Is that more writing with your clients that you're working for, telling the TPAs what you want and them responding? How does that work?

A Okay. So we've got the finalist -- we've chosen the TPA. The TPA will then create a programming document that we will go through.

It usually takes several months to go through item by item by item by item how is this claim going to be paid? The RFP's going to be a pretty high-level description of how you want to the claim to be -- the claim to be set up. But the item by item by item by item discussion takes literally months; discussions between the consultant, the TPA and the employer will -- where you will look at the ramifications of each single point, and then you will -- after you've finished that, then you have all the components needed for your plan document. And then they will program the system based on all of that information, and hopefully will go live by January 1.

Q You mentioned before the focus on out-of-network programs. Have you observed any high level transferships in the industry as far as how self-funded plans are designed to reimburse out-of-network providers?

A Yes. You know, the industry's constantly changing. It's never static. And over the last ten years or so, there's been a shift in how out-of-network claims are reimbursed. About ten years or so ago, out-of-network claims did not have the focus that they do today. Out-of-network providers were often, you know, solo practitioners who just were resistant to joining a network. They just didn't want to. And so they would, you know, charge something for their out-of-network claims, and the claims would be paid based on, you know, fees, a percent of fees being offered.

Over time, there has arisen this growth in firms that -- you know, that are owned by private equity, and they will --

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	Q	Before you continue, let me just ask. You mentioned paying				
	a percentage of bills. Is there a term for that type of payment					
	methodology in the industry?					
	Paying usual and customary					
	Q	Charge based?				
	А	or reasonable charge based, yes. Charge based.				
	Q	What is a charge-based methodology?				
	А	Charge based is you look at what the vendor has charged,				
and you pay a percentage of that charge.						
	Q	And over the last ten years, have you seen employers going				
	toward charge-based methodologies or					
	А	No.				
	Q	going away from?				
	А	No. They're definitely going away from charge based,				
	because th	nere's no there's no arm's length transaction? Charge based.				
	It's just the vendor coming up with a charge and charging it versus the					
	normal transaction where there's some kind of a contracting phase					
	between the vendor and the payer.					
	Q	So if employers are moving away from charge-based				
	methodolo	ogies, what are they demanding in its place?				
	А	They're demanding something that is more a reasonable				
	cost, a pay	ment for reasonable cost for the services rendered based on a				
	variety of o	different criteria.				
	Q	The jury has heard a lot about out-of-network cost control				

programs that have been implemented by United --

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- Q -- over the period of time in dispute. In your experience, is
 United the only one who's been implemented these out-of-network cost
 control programs in the industry?
- A No. In my experience, it's universal to have out-of-network cost control programs offered by TPAs. We would not consider a TPA that did that have some kind of a program to control out-of-network reimbursements.
- Q And when you say, we would not consider, what are you talking about?
 - A As a -- as consulting firms, giving advice to our employers.
- Q Has United led the way in implementing out-of-network cost control programs, in your experience?

A In my experience, United actually lagged for a while in coming with cost control programs. And one of the things we do when we finish an RFP is we have -- we offer to speak to the bidders who didn't get chosen, and we'll give them feedback as to why they didn't get chosen. They find of extremely valuable, because obviously they want to be chosen. And if I had a bidder with no out-of-network programs, that would be some feedback I would give them. I would say, you know, you need to have some kind of programs in place because you're not going to get chosen unless you do.

O So you mentioned several times that there's employer demand for these out-of-network cost control programs. Having been through this process of competitive bidding for TPA contracts over 60

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times, wouldn't you expect that if employers were actually demanding				
these aggressive cost control programs, there would be a paper trail on				
it?				
MR. AHMAD: Objection, Your Honor. Leading.				
THE COURT: It was leading. So rephrase.				

BY MR. ROBERTS:

Q Wouldn't you expect to see a paper trail based on your experience in the RFP process if employers were demanding out-of-network cost control programs?

MR. AHMAD: Your Honor, I think it's the same question.

THE COURT: I think it's the same question.

MR. AHMAD: And I'm not sure how there would be a basis to say whether there would be documentation or not.

THE COURT: Can you rephrase?

MR. ROBERTS: I'll rephrase.

BY MR. ROBERTS:

O In your personal experience, having done this over 60 times, do you or do you not usually see a paper trail of what the employers are demanding in their program?

MR. AHMAD: Your Honor, I'm sorry, but that -- I'll still have to object as leading.

THE COURT: I'm going to overrule it.

THE WITNESS: As I explained, the process that we go through with employers is to walk through a series of strategy sessions at the beginning of the year or the end of the prior year. During those

strategy sessions, I will go in with oftentimes a PowerPoint, bring my actuary, bring the rest of my team, and we will go through looking at bench marking, trends, their experience. During that conversation, we will discuss what they want, and we'll take notes. But they don't usually write us and tell us, this is what we want, it's part of a discussion that we have and it's very, very normal for us.

I mean as consultants, you don't -- you don't tell your client what they -- what they want, what they need, and they don't tell you. You partner together to come up with solutions. So that's the way it would normally happen. And then when they would tell us what they were looking for, we would incorporate those needs and objectives and goals into the RFP or into our interaction with the current vendor if they decide not to go out to bid.

BY MR. ROBERTS:

- Q We've heard a lot about plan documents. So you get to the end of this process. And you need plan documents, right?
 - A Uh-huh.
- Q In your experience, who usually drafts those plan documents, the employer through its consultant or the insurance company that's going to service the TPA?
- A Creating a plan document is the plan sponsor's responsibility, which is the employer. And the employer will often look to the consultant to assist with creating that plan document.
- MR. ROBERTS: Your Honor, I would pass the witness at this time.

1		THE COURT: Okay.				
2	MR. ROBERTS: Thank you, Your Honor.					
3	THE COURT: Cross-examination, please?					
4	MR. AHMAD: Thank you, Your Honor.					
5		CROSS-EXAMINATION				
6	BY MR. A	HMAD:				
7	Q	Ms. King, my name is Joe Ahmad. I don't think we've met				
8	before. You can call me Joe.					
9	А	Okay.				
10	Q	I'll probably				
11	А	You can call me Karen.				
12	Q	I'll well, I'll probably call you Ms. King				
13	А	Okay.				
14	Q	since the way we're meeting each other is in the				
15	courtroom					
16	А	Okay.				
17	Q	with me asking questions of you. It's kind of a funny way				
18	to meet p	eople, but at least for me it happens. And I'm going to ask you				
19	some questions that I wouldn't normally ask people when I meet them					
20	out of this setting. And the first one is					
21		MR. AHMAD: Pull it up. And I'm not sure that's not me,				
22	I'm pretty sure. It was a great method of cross-examination, whatever it					
23	is, but					
24	THE WITNESS: It comes from the sky.					
25		MR. AHMAD: Yeah.				

1	BY MR. AHMAD:			
2	Q But I don't know that I heard; on an hourly basis, how muc			
3	is United being charged per hour for your work in this case?			
4	А	I am being compensated at \$750 an hour.		
5	Q	Okay. You personally		
6	А	Uh-huh.		
7	Q	correct?		
8	А	Right.		
9	Q	And United is being charged twice that?		
10	А	That's correct.		
11	Q	\$1,500 an hour		
12	А	That's correct.		
13	Q	correct?		
14	А	Uh-huh.		
15	Q	Didn't they fight with you at all about the \$1,500 per hour?		
16	А	I was asked what my rate was. I told them what my rate was.		
17	Q	And		
18	А	They		
19	Q	And you told them it was 1,500?		
20	А	I worked through another firm that often will ask me to		
21	provide services. It's another consulting firm. I'm not employed by			
22	them, but they will make referrals to me.			
23	Q	Okay. I mean but did they ask that the rate be lowered or		
24	anything like that?			
25	А	That would have been a discussion that they would have had		

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	Q	Okay. Now, I'd as far as United goes, I was a little bit		
uncle	ear on	this; I take it you have worked with United before, at least in		
this capacity where you're working with an employer as a consultant and				
then	you're	taking various insurance company proposals, right?		

with that firm. I'm not aware of whether there was a discussion or not.

A Well, I would -- what we've been talking about here is not an insurance company. We've been talking about a TPA. So when I've worked with United in I would say 95 percent of the times, I'm working with United as a TPA. There have been maybe one or two cases where I've worked with them as an insurance company, but that's very rare.

- Q Okay. Fair -- and I appreciate you pointing that out. You have worked with United as a third-party administrator, correct?
 - A That's correct.
- Q And when we talk about United, it's not just United that you've worked with in the past, there's another United entity called the UMR?
 - A That's correct. That's a --
 - Q And you have worked with them as well in the past --
 - A I have.
 - Q -- is that right?
- A Yes.
- Q Now, if I understand this right, you have never testified as an expert, at least in court; is that right?
 - A That's correct.
 - Q You did rely on some materials for your opinions today that

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1	United sent you; is that right?			
2	А	United didn't send me anything directly. The law firm of		
3	O'Melveny	& Myers did.		
4	Q	Okay. O'Melveny, United's law firm, sent you materials to		
5	consider, c	orrect?		
6	А	Yes.		
7	Q	And one of the materials I noticed that you looked at was		
8	from the B	rookings Institute; is that right?		
9	А	I may have looked at something from the Brookings Institute.		
10	I don't really recall. It wasn't one that I really focused on if I did.			
11	Q	Okay. United provided that?		
12	Α	I didn't get anything directly from United. I got everything		
13	through O'	Melveny.		
14	Q	I'm sorry. O'Melveny provided that?		
15	Α	I would I if that's on my list. I don't actually recall looking		
16	at some			
17	Q	Well, you have your report in front of you.		
18	А	Yeah.		
19	Q	I think it is on		
20	А	I don't.		
21	Q	your list.		
22	А	It that's fine.		
23	Q	Okay.		
24	А	I mean there were many, many, many, many documents. So		
25	it's difficult	t for me to recall exactly which ones I focused on.		

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1	Q	Did United share with you that they had one of their					
2	executives provide confidential input into that [indiscernible]?						
3		MR. ROBERTS: Objection. Beyond the scope.					
4		THE COURT: Overruled.					
5		THE WITNESS: I don't recall a discussion about that.					
6	BY MR. AH	IMAD:					
7	Q	You did have direct discussions with United and UMR,					
8	correct?						
9	А	I					
10	Q	Not just with the O'Melveny people, right?					
11	А	Yes, I did have discussions with some of the other people					
12	who work	for United and UMR.					
13	Q	And then Bradley, I believe, in United?					
14	А	Jolene Bradley, yes.					
15	Q	A Ms. Ziemer or Zymer [phonetic] from UMR?					
16	А	I don't recall that it was a woman. I thought it was a man,					
17	but						
18	Q	Oh, I think it's a man.					
19	А	Oh, okay.					
20	Q	l'm					
21	А	Yes, I did talk to him.					
22	Q	Okay, great. And I think you said earlier you talked to					
23	O'Melveny	a lot. I noticed that you talked to them and had discussions					
24	with them	while reviewing your report; is that right?					
25	А	Yes. I was explaining to them some of the things that I just					

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explained	during	this d	liscussion,	my	experience	and	my	perspect	tive	on
the health	care ma	arketp	lace.							

- Q Yeah. And one of the things though that you didn't discuss and you're not here to provide an opinion is the reasonable value of the services at issue here, the reasonable value of the services that Fremont Emergency, Ruby Crest, Team Physicians provided?
- A That was not within the scope of what they asked me to opine on.
- Q And in fact, I mean none of your opinions can help us determine what the reasonable value for those services?
- A I can talk to you about what the marketplace considers to be an acceptable payment for out-of-network services, and it is not charges. But I can't tell you the exact dollar amounts that things should be. That would be -- that would require an economist, and I'm not an economist.
- Q And I understand that. And that's what you're not here to do that, are you? For example, you would not be able to tell us what the appropriate percentage of Medicare should be for emergency room care in Nevada.
- A I could tell you in general what is used for reference base -that's called reference based pricing. I can tell you in general what I've
 seen in the marketplace that TPAs use as a --
- Q Well, what about emergency room care in Nevada or just emergency room care?
- A I have seen different percentages of Medicare used as a reference base for pricing --

1	Q	But you're not an expert						
2	А	emergency room care.						
3	Q	You're not an expert in that. And what the appropriate						
4	percentage	e would for the reasonable value perspective.						
5	А	I believe that there is another person who has served as an						
6	expert witi	ness in that regard, who's more knowledgeable than I am						
7	about med	lical economics.						
8	Q	Okay. So that person is not you. That's somebody else that						
9	think the ju	ury has heard from, correct?						
10	А	Mr. Deal.						
11	Q	Is that right?						
12	А	A Yes.						
13	Q I take it you don't have any criticism of Mr. Leathers, our							
14	correspon	ding expert?						
15	A I have some opinions about Mr. Leathers' testimony, but I							
16	don't knov	v that that's relevant.						
17	Q	Okay. Well, I may get into that, because I'm not I'll take						
18	your word	that it's not relevant, but I may touch upon that, on some						
19	things that	I think might be relevant. One of the issues I was curious						
20	about was	that you had a long discussion, I think, about the various						
21	programs	that employers might be interested in, right?						
22	А	A long discussion with whom?						
23	Q	With Mr. Roberts?						
24	A Oh, yes. Yes.							
25	Q	Okay. And I'm just curious. I heard a lot about how these						

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ı	pians vary	, correct?
2	А	Yes.
3	Q	It's important to be customizable when you're offering
4	programs	to an employer.
5	А	Absolutely.
6	Q	Some employers want to have generous health benefits for
7	their empl	oyees, correct?
8	А	I would say all employers want value for the dollars that they
9	spend. Th	ey don't necessarily want to spend more than they're getting
10	in return fo	or that investment.
11	Q	Well, I mean would it be fair to say that they want to be more
12	generous	n their health benefits?
13	Α	Some employers will offer a plan design that is richer than
14	others. Th	e plan design not what they've spent.
15	Q	Okay. I was trying to read from your report. Do you have it
16	in front of	you?
17	Α	Actually, I have Mr. Mizenko's information in front of me.
18	Q	Well, that's not going to do a lot of good here.
19	Α	That's not my name. Alexander Mizenko is not my name.
20	Q	Well, I'll do this. I'm going to I'll try to quote from it.
21	Α	Okay.
22	Q	And I'll hand it to you. I didn't know you didn't have it.
23	Some emp	ployers use their benefit plan as a defining best in the marked
24	differentia	tor compared to their peers, so they can attract and retain top
25	quality dif	ficult to hire employees. And then others offer less generous

1	benefits th	nat will meet but not exceed their competitive plan design?
2		MR. ROBERTS: Your Honor, may I approach and give the
3	witness a	copy of her report?
4		THE COURT: You may.
5		MR. AHMAD: Sure, absolutely.
6		[Counsel confer]
7		THE WITNESS: Does somebody want this back?
8		MR. AHMAD: That'll work.
9		THE WITNESS: This is not me.
10	BY MR. A	HMAD:
11	Q	Otherwise, it's going to turn into a [indiscernible].
12	А	Thank you. I do recall that.
13	Q	Okay. It's at the bottom of page 8.
14	А	8. Okay.
15	Q	And I guess my point is some employers want to offer more
16	generous	health benefits than others.
17	А	Uh-huh, yes.
18	Q	And some employers will use that as a differentiator to
19	attract top	quality talent in a hiring market that's pretty tight?
20	А	Yeah. I can explain that. So some plan designs might
21	reimburse	an out-of-network doctor's visit at 60 percent, which is not
22	uncommo	on at all. And some employers might say well, I would like to
23	have a pla	n design that's a little bit richer than that. So I'll reimburse
24	out-of-net	work doctor's visits at 70 percent. But that's not talking about
25	the value	of that service. That's talking about the percentage that the

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Q	Sure. And but you just said something I think it pretty
important.	The plans don't necessarily dictate that the TPA pay
reasonable	value for the services. They don't

A Actually, the plans do talk about what the value -- how the out-of-network service is going to be valued, whether it's going to be based on a schedule, whether it's going to be based on reference based pricing, whether it's going to be based on median, you know, par.

There's different ways that those out-of-network services can be valued, and that information is in the plan document.

Q And I understand there's very different ways that the out-ofnetwork program can reimburse. But is it always true that the plan says the provider has to be reimbursed at reasonable value of their services?

A I can't speak to always.

Q Well, let's talk about one program. You're familiar with reasonable and customary, correct?

A That's a term that refers to paying something that's reasonable. Yeah.

Q Okay. But there are other ways of reimbursing other than reasonable and customary; isn't that right?

A There are a whole variety of ways of reimbursing. Yes, you could reimburse based on the schedule. You could say --

Q Yes.

plan design is paying.

A -- when you go to the emergency room, we're going to pay you \$200.

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Q	Correct.	Just a fixed fee.	And that fixed	fee could be
anything, o	correct?			

- A Well, subject to the law, yeah.
- Q Sure.
- A The Affordable Care Act.
- Q Yes. And I understand that. But there's nothing in the plan -you know, I'll set aside reasonable and customary. There's nothing in
 the plan, necessarily, that requires that TPA pay reasonable value for
 their services. In fact, that's why the jury is here today. That's what
 they have to determine, correct?
- A I'd have to see the plan design to see what it said. There's not like a universal plan design. There's different options. That's why people -- that's why employers often want to be self-funded, so that they can choose from a variety of options what's the best fit for them.
- Q And you know, you said you'd like to see that plan design at issue, but I have to ask, because we've had a lot of conversation about what might be in a plan and how they vary. You haven't seen the plan language that pertains to the 11,000 plan division.
- A Well, I don't think there's one plan language. I suppose there's maybe thousands.
 - O There's probably a lot, yes. Have you seen any of them?
- A I think I briefly saw one, but I certainly haven't seen all of them. And that wasn't what I was engaged to do. I was engaged to discuss trends in the marketplace, what employers, why employers might choose a self-funded plan, how plan documents are used to

adjudicate claims. I wasn't asked to look at specific claims. That was not part of my engagement.

- Q Well, you'd agree with me though that instead of taking about trends or what some employers demand or want, we could actually see what an employer is demanding by looking at the plan length, right?
 - A Probably, yeah.
 - Q And yet, we haven't seen those?
 - A I don't know what you've seen or not seen.
- Q But you haven't seen it. Represent to you we haven't seen all the plans at issue either.
 - A Uh-huh, okay.
- Q Would that be the place to look if you wanted to know, with respect to the plan -- excuse me -- the claims at issue?
- A Well, I think what's at issue here though is there's different parts of a visit. There's the billed charge, which is what the vendor has billed. There's the allowed charge, which is what is considered to be the reasonable value for that service. And then there's the payment. And you're talking about the payment. And I think what's at issue here is the allowed charge if I understand what's at issue.
 - Q Well, I was --
- A So the allowed charge is going to be based on what is reasonable in the marketplace.
- Q Well, except that -- I don't necessarily agree with that rendition because you understand that the allowed charge --

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	MR. ROBERTS:	Objection to form,	Your Honor.	Testimony
by counsel.				

THE COURT: Objection sustained.

BY MR. AHMAD:

- O The allowed charge is just what the insurance company picks.
 - A No, it's not.
 - O Do we have any say in that number?
- A The allowed charge is how the plan document says an reasonable value should be arrived at. It's not what the insurance company picks.
 - Q I just --
- A It's what the employer and -- tells the TPA -- not the insurance company -- tells the TPA this is how we want reasonable value to be arrived at.
- Q Okay. But reasonable value term may or may not be in the plan language, that term reasonable value.
- A In my experience, it would be extraordinarily rare for a plan document not to have some kind of reasonable value language. It would extraordinarily rare for a plan to say just pay whatever is billed.
 - Q No, no, no.
 - A We just don't see that.
- Q And I'm not saying that. I'm saying these programs will have a method of determining the reimbursement rate. And that rate could be reference based.

1	А	Could be reference based, yes.
2	Q	It could be a percentage of Medicare?
3	А	Which is a type of reference base. Yes.
4	Q	It could be Fair Health.
5	А	It could be.
6	Q	Correct.
7	А	Could be.
8	Q	And those amounts of reimbursements, would you be
9	surprised,	can vary a lot?
10	А	Oh, that wouldn't surprise me at all. No.
11	Q	Okay. And so, ultimately, what the reasonable value of those
12	services co	ould be any of those numbers somewhere in between or none
13	of them, co	orrect?
14	А	So you're saying that the reasonable value could be different
15	based on h	now the plan design
16	Q	Well, no. What I
17	А	describes the reasonable value?
18	Q	What I'm saying is if you actually look at the services that
19	were writte	en
20	А	The services that were written?
21	Q	Yes. The provider provided service.
22	А	Oh, okay.
23	Q	Somebody comes into the emergency room.
24	А	Uh-huh.
25	Q	And I don't want to lose sight of the fact that these are you

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1	know, thes	e are actual people that come into the emergency room. And
2	a doctor, lil	ke some of the doctors here, provide care. And if a jury
3	determines	what that reasonable value is, that may or may not have
4	anything to	do with what the employer and the insurance company have
5	put in their	plan.
6	А	I'm sorry. I'm not following you.
7		MR. ROBERTS: Objection. Calls for speculation.
8		THE COURT: Overruled.
9	BY MR. AH	MAD:
10	Q	Did you understand that the jury was here to make a
11	valuation o	f the services provided in this case?
12	А	Without regard to what the plan document says? Is that
13	what you'r	e saying?
14	Q	Well, yes. Were you aware of that?
15	А	That they can overrule the plan document?
16	Q	Yes. Were you aware of that?
17	А	It doesn't seem to be reasonable to me, because the TPA is
18	supposed t	o be adjudicating according to the terms of the plan
19	document.	And the plan document should determine how the plan is
20	paid.	
21	Q	So is it your thought that when the employer and the
22	insurance (get together, they should be able to pick a number that the
23	provider is	being paid?
24		MR. ROBERTS: Objection to form.
25		THE COURT: Overruled.

BY MR. AHMAD:

Q Is that your thought?

A Well, let me ask you this question. If you were going to decide how much you needed to fund a plan, and you didn't know how that plan was going to operate, how could you possibly fund the plan if it was up to somebody else how the payments were going to be made? What if somebody decided the deductible wasn't reasonable? How would you possibly be able to fund a plan if you couldn't describe how it was going to be paid?

Q And I understand from your perspective. But from a reasonable value perspective, in terms of what the jury is being asked to do, do you understand that the provider is not at the table when the employer and insurance company are getting together to put plan language together, right?

A I understand they're not at the table, but they are operating in a marketplace.

- Q Well, I understand that, but they're not part of that equation.
- A They're not at the table. That's true.
- Q And guess what? They have to treat under the law, and they have to treat everybody, right?
 - A They do.
 - O Does it seem fair that they're not even at the table for this?
- A They're operating in a marketplace which includes things like Medicare and Medicaid, who's telling them what's going to be paid. So I would think, as a provider in a marketplace, they would take into

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considerat	ion what is being accepted as reasonable value in a
marketplad	ce.
Q	Well, let me talk about that. So you remember reasonable
and custor	nary, right? We talked about that earlier.
А	I remember we talked about it.
Q	And that reimburses at a percentage of Fair Health?
А	Not necessarily.
Q	Often does?
А	Sometimes does.
Q	Sometimes 80th percentile but can be a different percentage?
А	Could be 50th percentile.
Q	Could be 80th percentile?
А	Could be 50th.
Q	Okay.
	MR. AHMAD: Well, can we look at Exhibit 25, page 2?
	[Counsel confer]
BY MR. AF	IMAD:
Q	And I apologize for coming up this close. It says and this is
usual custo	omary usual and customary receivable historically known as
HIAA and	then R and C, reasonable and customary. Do you see that?
А	I do. I have no idea what this document is. You're just
showing n	ne a little piece of it.
Q	Okay. Well, would you be surprised that the 80th percentile
was the pr	edominant way of compensation by United back in 2016?

MR. ROBERTS: Objection. Misstates the evidence.

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1	THE COURT: Overruled.
2	THE WITNESS: I don't know what United Healthcare
3	predominantly paid in 2016. But I know, in 2016, in the marketplace, that
4	was not the trend that I was seeing.
5	BY MR. AHMAD:
6	Q Well, you know, let's talk about, you know, this trend,
7	because I've heard a lot of discussion about how others are charging
8	more over the last few years. Do you remember that?
9	A You'll have to explain that a little bit closer with others. Who

Q Yeah. You talked about providers, out-of-network providers raising their rates over the last 5 to 10 years; correct?

A Yes. We've seen the inflation or the medical trend of out-ofnetwork rates at about double the in-network trend, inflation.

Q And I've heard a lot about that. And we keep talking about this general trend. But I want to focus on what we charge, Fremont Emergency Service, Ruby Crest, Teams Physicians. Do you have any idea if we are keeping up with the rest of the providers in our rate increases?

A No.

are you referring to?

Q Do you think it should be held against us that others, sound physicians, are charging a lot more, increasing their rates a lot more than we are? Do you think our reimbursement should be going down because of that?

MR. ROBERTS: Objection. Compound.

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1		THE COURT: It's compound. Rephrase.
2		THE WITNESS: Yeah, I would I couldn't follow that.
3		MR. AHMAD: Sure.
4	BY MR. AI	HMAD:
5	Q	Do think it first of all, do you think it's fair to reimburse
6	less us l	ess because there are other providers charging more?
7	А	I think that there is a reasonable market rate for the services
8	being pro	vided. And that reasonable market rate should be what is
9	provided 1	for those services. I don't know that one entity is being paid
10	less than t	the other.
11	Q	Would you be surprised that our rates have gone up about
12	four perce	ent per year in that time period?
13	А	What time period are you talking about?
14	Q	I'll use this, since 2016.
15	А	Your rates have gone up four percent per year. Depends on
16	what the s	starting point was. The starting point may have been much
17	higher. H	ave they gone up compared to the median part rate or did they
18	start up he	ere and median part was down here.
19	Q	Did you look?
20	А	No. That was not something I was asked to do.
21		MR. ROBERTS: Your Honor, can we approach, please?
22		THE COURT: You may.
23		[Sidebar at 9:11 a.m., ending at 9:14 a.m., not transcribed]
24		THE COURT: All right. So I understand this is a good time
25	for our mo	orning recess. Let's take a short one, because it's only been an

hour and 15 minutes.

You're instructed not to talk with each other or anyone else on any subject connected with the trial. Don't read, watch, or listen to any report of or commentary on the trial. Don't discuss this case with anyone connected to it by any medium of information including without limitation newspapers, television, radio, internet, cell phones, or texting.

Do not conduct any research on your own. Don't consult dictionaries, use the internet or use reference materials. Don't post on social media, talk, text, tweet, Google or conduct any other type of research with regard to any issue, party, witness, or attorney.

Most importantly, don't form or express any opinion on any subject connected with the trial until the matter is submitted to you.

And it's 9:15. I'm going to ask that you be back at 9:20. I know that's only five minutes.

THE MARSHAL: All rise for the jury.

[Jury out at 9:15 a.m.]

THE COURT: You may.

MR. ZAVITSANOS: So Your Honor, before the trial began, we had extensive briefing and argument regarding a number of rates. The Court's ruling was crystal clear. As the trial has progressed and as the evidence has come in, there have been now multiple instances where the Defendants have blatantly violated the Court's order in limine. And not just blatantly violated it, did so in a totally nonresponsive way. Where Mr. Deal raised -- in fact Mr. Deal actually gave an opinion. You know, he's their expert, and he gave an opinion on what the percentage

of Medicare for in-network is and why we should be tied to that.

We asked the Court yesterday during the charge conference, and I was not here, but Mr. McManis was there, for an instruction in the charge, instructing the jury that in-network rates are not relevant, and the Court overruled that.

Then today, this lady who is on the stand right now, their other expert witness, who did not raise any of this in deposition, again in non-responsive fashion, on three separate occasions, in response to Mr. Ahmad's questions, talked about how out-of-network needs to be compared to in-network. And it was words to that effect. And I don't want to misstate what she said, but it was clear that she was drawing a reference to in-network rates. And Your Honor, that is a -- these are repeated violations of the Court's order in limine, and I got to say I'm pretty upset right now, because this was an issue that came up the other day.

I thought the Court was very clear with the lawyers that this was not an issue and yet, here we go again. And Your Honor, just from the cheap seats, sitting back there, this is nothing other than a Hail Mary. And I know Mr. Ahmad has an additional point to make.

MR. AHMAN: Well, I would just point out, Your Honor, that I believe the expert, and I can certainly show Your Honor this testimony, was asked about four different times, whether she had any thoughts or opinions regarding the reasonable value of the charges or services in this claim. Never mentioned anything about, you know, it has to be guided by the TPA, the plan language, anything. Nothing about it.

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Consistently said that is not within the scope of my report. That's it. I mean it was asked about four different times.

And so, you know, I thought that's the answer that I was going to be given. And I thought at the end of the testimony an appropriate instruction regarding that should be given.

MS. LUNDVALL: Your Honor, I just want to add one additional point. Every attorney has a duty to inform the witness as to the scope of the Court's order, and to be protective of those.

And as an example, when we questioned Ms. Hare as to whether or not that was so informed, her testimony was she wasn't. And so to the extent that this is an issue that falls squarely within the obligation of an attorney preparing the witness for testifying.

THE COURT: And the response, please.

MR. ROBERTS: Yes, first of all, Your Honor, I was not the initial prep session with Ms. King, but Ms. Plaza who is here with me today, did do that prep. And she informed me that she did review all of the Court's motions in limine with the witness during that initial prep session.

I did not reinforce those when I met with the witness for the reason that the testimony that I elicited from this witness was limited to the market for TPA Services, to the trends in the industry, and all of these general things that I talked about on the scope of direct. I did not prep her and did not expect them to ask her what she thought reasonable rates of reimbursement were. Why would they do that if it's beyond the scope of their report?

They elicited her personal opinions, and she gave them. This is not something that was prepped.

THE COURT: You'll get a chance.

MR. ROBERTS: And if he read the deposition, and she said that's beyond the scope of my report, why would he come in here and ask her about it? I did not review these things with her, and I had no idea they would ask her, because as she said, she's not an economist. As to Leathers, if they've got a two page list of the documents she reviewed prior to her deposition, the Leathers report is not there, of course, she'd have no opinion about Leathers. But she's watched Leathers at trial while she's been waiting to testify. So now she has an opinion about it. And I don't understand why they would elicit the opinion of one expert out of the field with another.

This was a deliberate strategy to go beyond the scope of a report to bring up all of these things that irrelevant to her opinion. Now I will go out, and I will caution her again about these issues, but I think they should be instructed to move on, and not go beyond the scope. We're stuck for time here, and this is our case. She's got a 20 page report, and I can -- very limited for the purposes of moving efficiently through this process. And they've gone way beyond the scope, Your Honor.

THE COURT: You do need to talk to her. In reply, please.

MR. AHMAD: Your Honor, if I may. I was doing what is fairly common, confirming that she was not here to testify about something, and just making that clear. She equivocated a little bit, like I said -- and

we asked this question four times in her deposition. And as far as
moving on, I would have been done by now, if it would have been very
clear, other than the testimony she tried to give, somehow reasonable
value has to be determined by the Plaintiff.

But with that, Your Honor, I'm essentially done. But I do think we need an instruction because of the testimony that she gave, which was not given in her deposition that in-network cannot be considered, which is absolutely the law of this case.

THE COURT: She can be instructed by counsel -- Defense counsel on that. Now --

MS. LUNDVALL: Your Honor, one last thing --

THE COURT: Sure.

MS. LUNDVALL: -- as far as to add to this. Because this is more than one witness that has done this, we would revisit -- request then a curative instruction to the jury that advises them that in-network rates are not relevant to their inquiry on reasonable value.

THE COURT: I think we did that yesterday; didn't we?

MS. LUNDVALL: Understood. But this was before this new violation that has come up.

MR. AHMAD: If I may, Your Honor, and I understand the Court's ruling, I may need to confirm with her, and if she just gives me a simple no, I'm not, that she is not here to give any opinion on a reasonable value of the services, and she says, no I'm not, then I think, you know, we're done.

THE COURT: All right.

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MR. ROBERTS: Okay. And I think she already said that, Your
Honor. And the typical way you ask those questions is, isn't it true the
reasonable value of services is beyond the scope of your report. And
then she says, no. You don't ask her, her opinion on the reasonable
scope of services. And then expect a surprise when she gives you an
answer.

THE COURT: Right.

MR. AHMAD: Well, except, though, Your Honor, I would like to ask that, and we asked it in her deposition, and all she -- all she said was it's outside my report.

THE COURT: All right. So Marshal Allen, why don't you tell them three or four more minutes. Three or four -- can you guys take a break in three or four minutes?

MR. ZAVITSANOS: Yes, Your Honor.

THE COURT: It's 9:24. I'll be back at 9:28. And anybody who's not here, we're going to start without you.

[Recess taken from 9:24 a.m. to 9:28 a.m.]

THE COURT: Thanks everyone. Please remain seated.

MR. BLALACK: Your Honor, we need to -- we need to talk about -- may we approach, Your Honor?

THE COURT: You may.

MR. BLALACK: So somebody just announced --

[Sidebar at 9:28 a.m., ending at 9:28 a.m., not transcribed]

THE COURT: This is the Judge. There's someone on BlueJeans who is a court reporter. Will you please --

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THE MARSHAL: All rise for the jury.
THE COURT: Will you please unmute yourself and identify
yourself?
THE COURT REPORTER: I don't know how to unmute
myself. Oh, there I am. I'm sorry. I'm not too familiar with the program
at all.
THE COURT: And your name please?
THE COURT REPORTER: Silvia S-I-L-V-I-A.
THE COURT: And are you reporting the trial?
THE COURT REPORTER: Yes. They gave me the link this
morning to join the meeting.
THE COURT: Who gave you that link?
THE COURT REPORTER: I'm thinking Weil Gotshal. I got it
forwarded from my office Veritext.
THE COURT: The name again?
THE COURT REPORTER: Veritext. It's the agency that does
the reporting, that hires court reporters.
THE COURT: Okay.
THE COURT REPORTER: And I'm sorry, maybe I'm in the
wrong case. Is this Fremont Emergency Services?
THE COURT: Yes, it is. But we can only have one official
transcript and that is done in the courtroom. So it's improper for you to
be reporting this case today.
THE COURT REPORTER: Okay. I'm fine with that. I'm just
doing what I'm told.

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THE COURT: Will you let them know? Let them know that			
you've been instructed to discontinue and if they have issues they			
should contact my office.			
THE COURT REPORTER: Okay, Judge. I will tell them that.			
And that's A-M-I-T, Nancy Amit?			

THE COURT: It's Allf, A-L-L-F. And the phone number here is (702) 671-3629.

THE COURT REPORTER: Thank you. Sorry about that.

THE COURT: And they would ask for Fran.

MR. BLALACK: Your Honor, could we ask just for a general statement to the world that is on there, because we've had these AEO conversations. I don't know if people are now bringing court reporters to BlueJeans and --

THE COURT: So I did --

MR. BLALACK: -- essentially creating new transcripts, but I'd like some sort of instruction that there should be nobody transcribing this trial.

THE COURT: Earlier this morning, Brynn confirmed with me that we had 37 people on BlueJeans. Is anyone else out there reporting, or recording, or providing a transcript to any one of these proceedings.

THE COURT RECORDER: We're at 51.

THE COURT: We're at 51? If there's anyone out there, you are ordered not to do that. You're allowed to sit in. If this courtroom was big enough you could sit in, but there's only one official transcript. No one else should be out there making transcripts. And if I find out

1	about it, I'll deal with it appropriately.
2	THE COURT REPORTER: Okay, so I'm just going to sign off.
3	THE COURT: Thank you.
4	THE COURT REPORTER: Thank you. I'm sorry about that.
5	Have a good day everybody. Happy Thanksgiving. Bye-bye.
6	MR. ZAVITSANOS: Your Honor, for the Plaintiffs, I have no
7	idea who that is. Weil Gotshal is a very large national firm, 2,000 to
8	3,000 lawyers. I have not we have not engaged them. They are not
9	associated with us. This is I don't know if it's MultiPlan or somebody
10	else.
11	THE COURT: It doesn't matter.
12	MR. ZAVITSANOS: I don't know, but it's a little disturbing
13	honestly.
14	THE COURT: Anything else for the record?
15	MR. BLALACK: Not on this issue, Your Honor.
16	MR. ROBERTS: We have not associated Weil Gotshal.
17	THE COURT: All right. So the Marshal will bring in the jury
18	now. That was a 17-minute break.
19	THE MARSHAL: All rise for the jury.
20	[Jury in at 9:32 a.m.]
21	THE COURT: Thanks everyone. Please be seated. And thank
22	you again for your courtesy. Five minutes became 17 minutes. We had
23	a matter to take up outside your presence. Go ahead please, Mr. Ahmad.
24	BY MR. AHMAD:
25	O Thank your Honor Lat mo ask this way to sum up

1	You're no	t offering any opinions about the value of the services offered	
2	by Plaintiffs that are at issue, correct?		
3	Α	That's correct. That's outside the scope of what I was asked	
4	to offer ar	opinion on.	
5	Q	Okay. And you actually haven't looked at any of the claims at	
6	issue?		
7	Α	That's correct.	
8	Q	You haven't looked at all the plans at issue?	
9	А	That's correct.	
10	Q	No idea what reimbursement program applies?	
11	А	For these particular claims, no.	
12		MR. AHMAD: Last thing. Is 513, Exhibit 513 in?	
13		MR. ROBERTS: No.	
14		THE COURT: 513?	
15	ВҮ АНМА	.D:	
16	Q	Ms. King, do you mind looking behind you at Exhibit 513?	
17	А	I don't know what you're saying.	
18	Q	Oh, there are notebooks back there and they are numbered.	
19	You see th	ne one that goes, I think it's volume yeah, that's it. Sorry,	
20	they're he	avy.	
21	А	Okay.	
22		MR. ROBERTS: Your Honor, can you confirm this exhibit has	
23	been adm	itted since it's being displayed to the jury?	
24		THE COURT: I don't think it has been.	
25		MR. AHMAD: I'm treating it as if it's not been admitted yet.	

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1		THE COURT: I don't show it on my list. It's not admitted.	
2		MR. AHMAD: That's why it's not up on the screen.	
3		MR. ROBERTS: Thank you.	
4	BY MR. AI	HMAD:	
5	Q	Ms. King, do you have in front of you Plaintiff's Exhibit 513?	
6	А	I do.	
7	Q	And I think you see a chart. Kind of a dollar bill broken down	
8	in terms o	f where healthcare costs go. Do you see that?	
9	А	I do.	
10	Q	Are you familiar with the breakdown of where healthcare	
11	costs typically go?		
12		MR. ROBERTS: Objection. Beyond the scope of a report.	
13	Beyond th	e scope of direct.	
14		THE COURT: Overruled.	
15		THE WITNESS: Generally, yes.	
16	BY MR. AI	HMAD:	
17	Q	Does 3.2 percent for both facility and physician emergency	
18	room cost	s does that sound about right?	
19	А	It sounds within the range of reasonable, yeah.	
20		MR. AHMAD: Okay. Your Honor, I would at this time move	
21	the admis	sion of Plaintiff's Exhibit 513.	
22		MR. ROBERTS: Objection. No foundation for the document	
23	and no for	undation for the other 12 numbers on this document other than	
24	the one w	hich the witness testified to.	
25		THE COURT: Overruled. Exhibit 513 will be admitted.	

1		[Plaintiff's Exhibit 513 admitted into evidence]
2		MR. AHMAD: Thank you. I'll pass the witness.
3	BY MR. Al	HMAD:
4	Q	Oh, yes. And I'm sorry, you see, I think, the 3.2 cents up
5	there for e	mergency room? Do you see that?
6	А	Oh, yes. I see it.
7		MR. AHMAD: Thank you. I'll pass the witness.
8		THE COURT: Redirect, please.
9		REDIRECT EXAMINATION
10	BY MR. RO	DBERTS:
11	Q	Do you have your report up there, Karen?
12	А	I do.
13	Q	And can you tell the jury how many single-spaced pages
14	your repo	rt was?
15	А	It was 19.
16	Q	Would it be fair to say that we haven't gone into detail into
17	everything	you've talked about in your report here in front of the jury?
18	А	We have not gone into detail; is that what you said?
19	Q	Yes, we have not.
20	А	Yes. It was fair to say we have not.
21	Q	Okay. So look for Exhibit B to your report. That should be a
22	list of mat	erials considered and/or relied upon.
23		MR. AHMAD: I may have left exhibit B here.
24		MR. ROBERTS: Thank you.
25		MR AHMAD: Sure

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1		THE WITNESS: I see it.	
2	BY MR. ROBERTS:		
3	Q	Okay. Is there about two one-and-half page's single space	
4	of docume	ents you've listed here that you review, correct?	
5	А	Yes.	
6	Q	Okay. Did you review everything on this list?	
7	А	I believe I did, yes.	
8	Q	Did you rely upon everything on this list for the opinions you	
9	gave to the jury today when I was asking you questions?		
10	А	I relied on what's on this list as well as my experience over	
11	the last 30	years.	
12	Q	Okay. And let me ask you one last question. If you turn to	
13	the second	d page, we'll go to the back, go about halfway through the	
14	second page. Could you read the full website that begins		
15	https:\\ww	w.brookings?	
16	А	Yes. Do you want me to read that?	
17	Q	Yes. Just read the full document so the jury knows the full	
18	name of the document that Mr. Ahmad was referring to on cross-		
19	examination.		
20	А	lt's	
21	Https:\\www.brookings.edu\research\adozenfactsabouttheeconomicsofth		
22	eushealthcaresystem.		
23	Q	Okay. So that's not a Yale study, right?	
24	А	It doesn't sound like one, no.	
25	Q	Did you rely upon this website for any of the opinions that	

1	you gave to the jury today?	
2	A I can't recall to be honest.	
3	MR. ROBERTS: Okay. Thanks very much, Ms. King. I	
4	appreciate it.	
5	THE COURT: Is there any recross?	
6	MR. AHMAD: No, Your Honor. Thank you.	
7	THE COURT: All right. Does the jury have any questions of	
8	Karen King? If so, this would be your time. I see no takers. May we	
9	excuse the witness?	
10	MR. ROBERTS: Yes, Your Honor.	
11	MR. AHMAD: Yes, Your Honor.	
12	THE COURT: All right. Ms. King, you may step down and	
13	you're excused.	
14	Defendant, please call your next witness.	
15	MR. BLALACK: Your Honor, can we approach real quick on	
16	that question?	
17	THE COURT: You may.	
18	[Sidebar at 9:40 a.m., ending at 9:42 a.m., not transcribed]	
19	THE COURT: Thanks everybody. We have a technical issue.	
20	We don't want to have another recess because we don't want to waste	
21	your time, so thank you for understanding.	
22	MR. BLALACK: We can start the first one.	
23	THE COURT: As soon as Mr. Leyendecker gets back.	
24	Defendant, please call your next witness.	
25	MR. BLALACK: The Defendants call Mr. Kent Bristow by	
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1	video.	
2		MR. ZAVITSANOS: And Mr. Bristow just entered the
3	courtroom	, Your Honor.
4		THE COURT: Thank you and welcome.
5	ŀ	KENT BRISTOW, DEFENDANTS' WITNESS, BY VIDEOTAPE
6	BY MR. BL	ALACK:
7	Q	Good morning, Mr. Bristow. My name is Lee Blalack. I'm
8	counsel for	the Defendants in this case, and I'm going to be questioning
9	you today.	And, obviously, your counsel will have an opportunity to ask
10	you some	questions at the end of my examination if he desires. But let
11	me start by	asking you just to state your name and place of employment
12	for the reco	ord.
13	А	Yes. My name is Kent Bristow, and I'm employed by
14	TeamHealt	h.
15	Q	And could you give the for the record, your job title,
16	please?	

A Yes. My job title is Senior Vice President for Revenue Management.

Q And next question is, have you heard the term -- the acronym TIN before?

- A Say it one more time please.
- Q TIN, T-I-N.
- A Yes.
 - Q What is a TIN?
 - A That is a tax ID number.

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1	Q	Q And is that a term that you use, your team uses in your wor	
2	for TeamHealth?		
3	А	Yes. We do use it sometimes.	
4	Q	And what is the relevance of a TIN for your business?	
5	А	It can be an identifier for a group that we bill services out	
6	under.		
7	Q	When TeamHealth reports and bills healthcare services for its	
8	physician	groups, it will usually do so by an identifier that identifies the	
9	physician as affiliating with a specific TIN or tax identification number?		
10	А	That's correct.	
11	Q	All right. You have to consult the actual language of the plan	
12	to know what the in-network benefits were for the facility and what the		
13	out-of-network benefits were, if any, for the professional service, correct?		
14	А	True.	
15	Q	Let me ask it this way. For the period starting let's say in	
16	2106 up to present, has TeamHealth participated in both of those		
17	MultiPlan graph or rental networks?		
18	А	Yes, I believe so.	
19	Q	Okay. Does TeamHealth participate in both of those	
20	networks today?		
21	А	Yes.	
22	Q	All right. So, Mr. Bristow, if you would, take a look at the	
23	document marked for identification as Exhibit 7 to your deposition. It's a		
24	one-page document. And if you would just read that document quickly		
25	to yourself and when you're done let me know and I'll ask you a few		

1	questions about it.		
2	[Mr. Bristow reviews document]		
3	А	Okay.	
4	Q	So sir, first of all, do you recognize the document marked for	
5	identificat	ion as Exhibit 7 to your deposition?	
6	А	I have not seen it in quite some time. But yes, I do recall it.	
7	Q	In fact, if you look at the bottom of the page, you'll see	
8	signatures	s. Am I correct, sir, on the right-hand side there's a signature	
9	there that	is your signature?	
10	А	Yes.	
11	Q	To the left of the signed as well, it appears to be in July of	
12	2016. Is that how you read it, sir?		
13	А	Yes.	
14	Q	And there's a gentleman's name who sent the notice	
15	regarding the material change or amendments to contract by the name		
16	of Bruce S	ingleton. Do you see that?	
17	А	Yes.	
18	Q	Do you know Mr. Singleton?	
19	А	I do.	
20	Q	Who is Mr. Singleton?	
21	А	As it states here, he's the senior VP with MultiPlan.	
22	Q	That's a good point, sir. And if you go to the top of the page	
23	as you note, the addressee for this letter is to a Ms. Jennifer JJ. Shrader		
24	Do you see that?		
25	А	Yes.	

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Q	VP of Managed Care. And I think you said earlier that Ms.
Shrader is	on your team and reports directly to you?

A Yes.

- Q Did she report directly to you in June of 2016 when this material change -- notice of material change and amendment to the contract was submitted and signed?
 - A Yes.
- Q Was Ms. Shrader the person at TeamHealth who was responsible for the MultiPlan relationship?
 - A Yes, I would say she was primary contact.
- Q So she was the primary point of contact, but then when it came time to sign a material change or amendment to the contract, ultimately, that was you who signed the document; is that right?
 - A Yes.
- Q Do you understand, having reviewed this document anew, that this was an amendment being made to the master agreements that you had with MultiPlan at the time?
 - A I see it as being a notice of change, yes.
- Q Okay. And in the very first paragraph, Mr. Singleton writes, we are writing to inform you of trends happening in the health insurance market. Health insurers and other payers, including our clients, are taking a more active role in managing their access to provider networks and establishing maximum reimbursement policies when members access MultiPlan's complementary network as they with their own network or other leased networks. Do you see that, sir?

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Α	Yes.

- Q What did you understand the reference to maximum reimbursement policies to mean?
- A That they were somehow going to try and initiate some caps on what levels of payment they might be willing to pay.
- O Okay. And in this context, what Mr. Singleton was notifying Ms. Shrader, and then ultimately, you as signatory to the notice, was that these clients were taking a more active role in applying maximum reimbursement policies when members of the health plan access MultiPlan's complementary network. Do you understand what Mr. Singleton was referring to when he referred to MultiPlan's complementary network?
 - A Not within the network that we participate in as a provider.
 - O So like the wrap rental networks you referred to earlier?
 - A Yes.
- Q Okay. So then if you go down to the first bullet, he says, your agreement with MultiPlan is governed by each client's specific benefit plan. Do you see that?
 - A I do.
 - Q And you agree with that statement, correct?
- A I don't know if I agree with that statement. It's in here, I do acknowledge that. But I don't know that I necessarily agree with it.
- Q Well, whether you agree or not, you signed an amendment, a notice of material change amendment to the base master agreement that contained that statement, correct?

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Λ	Yes
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O Okay. And then it says, in addition, clients that are contracting with MultiPlan to utilize the complementary network are not required to access the terms of your agreement, including the complementary network contract rates for a specific client if the contract rate for that client exceeds the maximum amount of reimbursement eligible under the terms of the benefit plan or the client's or MultiPlan's reimbursement policies. Then it's got an open paren and in quotation marks, ("maximum reimbursement policy") close quotes, close paren. Do you see that, sir?

- A Yes.
- Q What was your understanding of that statement?
- A I -- I just think it's saying that they can't mandate that the health insurance companies access their network.
- Q So do you agree that that second sentence, MultiPlan was advising TeamHealth that MultiPlan's clients that were contracted with MultiPlan to use that wrap or rental network, were not required to access the rates that were in the agreements between providers like TeamHealth and MultiPlan?

A Yeah, if that what it says. But again, we -- we have no control over their arrangement with -- with health plans.

- Q So you see it says, MultiPlan clients and their customers? Do you see that?
 - A Yes.
 - O Do you understand that the reference to the customers of the

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MultiPla	n clients	is referring	to the ASC	customers)	of health	insurers	and
their me	mbers?						

A Yes.

- O Okay. So it says, MultiPlan clients and their customers are not required to access every network offered or to access every provider participating in the network they do access. I think that's a statement just restating what you said a moment ago, correct?
 - A Correct.
- Q Okay. And then he goes on to say, In the event that they elect not to access your agreement meaning MultiPlan clients and their customers, the terms of your agreement will not apply. Do you see that?

A I do, but let me-- let me clarify my last answer to the question. Again, we don't know what MultiPlan's clients' requirements were. So I can't stipulate that they weren't obligated to access the network or not. We have no visibility, had not seen any of those agreements, were not aware of those agreements, whether they required it or not.

Q Well, before you signed this document, sir, did you contact Mr. Singleton and ask him to explain any of the language in this letter?

A I can't recall if I would have talked to him or if J.J. would have talked to him. I would have guessed one of us would have. I don't recall any specific discussions.

Q Do you remember having any information from Mr.

Singleton about anything in -- in Exhibit 7 that caused you any concern before you signed this document?

A I I can't recall. I think there were some other events going
on at that time with MultiPlan and our contract that were related to this.
And so but again, I cannot remember the specifics of the dynamics tha
were going on at that time. Because I think we were also trying to
accomplish something else with MultiPlan and our contract at that time.
And so I just cannot remember all the specific discussions that may or
may not have taken place.

- Q But whatever those discussions were, as you sit here today, you don't have any memory of any concerns about any of the specific language in Exhibit 7. Am I right about that?
- A I -- I wouldn't say that I didn't have any concerns. But again, I felt like -- I think our thinking at the time was that we weren't sure this really changed anything. Either the plans had obligations to access the rental networks according to their agreements or they didn't, but this really wouldn't have changed the game.
- Q But whatever your views were, you signed this document in June -- June of 2016, comfortable with this content, correct?
 - A I did sign the agreement.
- O Okay. And just to put this in context, TeamHealth was essentially, a customer of United during this period, correct?
- A I guess it depends on who you determine as the customer, but we had a -- a business relationship with them, yes.
- Q Well, a customer in the sense that they contracted with you as a vendor to administer your -- your health -- your TeamHealth health plan, correct?

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1	А	Yes.
2	Q	And you paid them a fee for that service, correct?
3	А	Correct.
4	Q	And prior to January 2020, for the period at issue in this
5	lawsuit in	the state of Nevada, UnitedHealthcare was the administrator of
6	the Team	Health employee health plans, correct?
7	А	Prior to 2020?
8	Q	Yes.
9	А	Yes.
10		MR. BLALACK: Okay. Your Honor, can we approach with
11	counsel w	rith a question before we play the next video?
12		THE COURT: Yes, of course.
13		[Sidebar at 9:58 a.m., ending at 9:59 a.m., not transcribed]
14		[Pause]
15		[Video Deposition of Kent Bristow continues]
16	BY MR. B	LALACK:
17	Q	So today, we are going to be receiving testimony from Team
18	Physician	s, a Plaintiff in this case, the corporate testimony of Team
19	Physician	S.
20		It's my understand that you have been designated by the
21	Plaintiff, T	eam Physicians, to be its corporate representative and testify
22	today; is t	hat right? Is that your understanding?
23	А	Yes. That's my that's correct, yes.
24	Q	Do you agree with me that there are commercial insurers
25	other thar	UnitedHealthcare that TeamHealth contends are unilaterally

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reducing out-of-network paymer	nts for emergency physician services that
result in reimbursement rates be	elow contracted in-network rates?

- A Yes.
- O Okay. So the phenomenon that TeamHealth contends is improper in this lawsuit is a scenario that TeamHealth is experiencing with other commercial health insurers as well, correct?
- A And with some particular payers in certain markets, yes. But again, we're also moving to hold them accountable to a different standard as well.
- Q Okay. Sir, the document marked for identification as Exhibit -- Team Physicians Exhibit 18, is a printout from the Nevada Secretary of State's website providing entity information on an entity named Team Physicians of Nevada Scherr P.C. Do you see that, sir?
 - A Yes.
- Q So my first question is, Team Physicians of Nevada Scherr P.C., is there any relationship between that entity and Team Physicians Mandavia that is a Plaintiff in this lawsuit?
- A Yes. It's one and the same. Again, I think I was referring to the name earlier of the group, but it's just recently changed.
- Q Okay. Now, you'll see underneath Dr. Scherr's name, there is a person named Jennifer Behm, B-E-H-M, do you see that?
 - A Yes.
- Q I think you mentioned Ms. Behm last week when we talked. Who is she?
 - A She is the executive vice president over the west region

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1	operations	.
2	Q	The west region operations of TeamHealth?
3	А	Yes.
4	Q	And then underneath that, there is an individual named John
5	R. Stair, do	you see that?
6	А	Yes.
7	Q	Who is Mr. Stair?
8	А	John Stair is in-house counsel with TeamHealth.
9	Q	Okay. And then there is an officer listed as John Berry. Who
10	is Mr. Berr	y?
11	А	John is over our taxation services area of TeamHealth.
12	Q	And then sir, if you look over to the next page, you'll see
13	there is a c	lirector listed and a treasurer listed. Do you see that?
14	А	Yes.
15	Q	And
16	Q	You'll see again as the director, Dr. Scherr is listed and then
17	there's a tr	easurer listed as Kristopher Smith. Do you know Mr. Smith?
18	А	Yes.
19	Q	Who is Mr. Smith?
20	А	So Chris is the CFO over the chief financial officer over the
21	west regio	n operations.
22	Q	And when you say west region operation, do you mean the
23	TeamHealt	h west region operations?
24	Α	Yes.
25	Q	Okay. So am I correct, sir, that all of the officers and the

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directors	listed ir	n the filings	of Exhibit	18 are ei	mployees o	f TeamH	lealth,
sir?							

A Yes.

- Q So sir, the document marked for identification to your deposition is Team Physicians Exhibit 25. It's entitled "Notes for Healthcare Providers' Corporate Representative Deposition"; is that right?
 - A Yes.
- Q And then am I summarizing it accurately to say that it appears to have an identification of subject matters and then notes written in bullet points underneath those subject matters?
 - A Yes.
- Q And are the notes reflected in this Exhibit 25 solely related to Team Physicians or to all three Plaintiffs?
- A There are a couple of references that would include addressing points related to Ruby Crest. So I think there's a couple of them that are specific to Ruby Crest. But otherwise, they would be applicable to Team Physicians.
- Q Okay. And are any of the -- to your knowledge, is -- are any of the notes intended to address topics involving Fremont?
- A Some of the topics would also address Fremont, certain topics would not.
- Q If you would look at the document marked for identification as Exhibit 29, which was produced to the defense by the Plaintiffs in this case, it is Bates stamped FESM001390. Have you seen that document

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1	before, sir	?
2	А	Yes, I have.
3	Q	Okay. What does that document describe?
4	А	It it's a document that's kind of just a general description of
5	the proces	s and consideration for how we set our charges.
6	Q	Is the setting of the chargemaster, the process you're
7	describing	here, is that an entirely internal TeamHealth function, and I'll
8	include wi	thin that, you know, vendors or consultants you might rely on,
9	but entirel	y done by TeamHealth?
10	А	People with TeamHealth, again, looking at these non-
11	TeamHeal	th data sources, yes.
12	Q	There's not a regulator of TeamHealth coming along and
13	saying tha	t's too high or that's too low, correct?
14	А	Again, a regulator would be in the form of FAIR Health
15	independe	ently established database.
16	Q	No, like a government regulator. There's no government
17	regulator	who comes along and says your chargemaster is too high or
18	too low, co	orrect?
19	А	Not that I am aware of as a government regulator, no.
20	Q	Okay. In the last sentence under the heading of Emergency
21	Medicine,	it says, once the chargemaster is set, it is subject to annual
22	review and	d/or increases as each billing area contract permits. Do you
23	see that?	
24	А	Yes.
25		What does that mean?

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1	Α	It means typically, we will do an annual review of the
2	chargema	ster and implement price increases if appropriate, and if
3	permitted	for the billing area.
4	Q	And how are the how is the amount of that increase
5	determine	d?
6	А	Again, as a general rule, I would say we were increasing, on
7	on avera	ge, our fees five percent each year.
8	Q	Okay. So we're back today to take the testimony of corporate
9	representa	tive of and I'm using the shorthand name Ruby Crest. Do
10	you under	stand Ruby Crest is the trade name of one of the Plaintiffs in
11	this case?	
12	А	Yes.
13	Q	And are you here as the designated Ruby Crest, to give
14	testimony	on its behalf?
15	А	Yes.
16	Q	Now, sir, is Ruby Crest an emergency medical services group
17	practice th	at TeamHealth helped create or that TeamHealth acquired?
18	А	It was a group that really kind of merged with and/or
19	and/or acq	uired back in few years ago.
20	Q	Okay. Sir, the document marked for identification as Ruby
21	Crest Exhi	bit 4 is entitled, TeamHealth acquires Ruby Crest emergency
22	medicine.	It's dated February 12th, 2015. And the date line, from
23	Knoxville,	Tennessee. Have you seen this before?
24	А	Not that I recall. I may have in the past, but not that I recall
25	specifically	/ .

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1	Q	Okay. And I take it you do you have knowledge of when			
2	TeamHealth acquired Ruby Crest?				
3	А	Yes.			
4	Q	Okay. And will you tell me when that happened?			
5	Α	February of 2015.			
6	Q	Okay. Got it. All right. So for the period where it says pre			
7	dispute pe	eriod, you'll see some dates that read, 1/1/15 to dash 6/30/17.			
8	Do you se	e that?			
9	А	Yes.			
10	Q	How now, looking at the that period, that pre-dispute			
11	period, yo	u have a number you have analysis of claims paid at certain			
12	various le	vels of billed charges. Do you see that?			
13	А	Yes.			
14	Q	So if my math is right, of the 1,160 UHC claims, about			
15	United pa	id the United Defendants paid about seven percent of those			
16	claims in f	full billed charges. Does that sound right to you?			
17	А	Yes.			
18	Q	Do you agree with me, sir, that there is no fee schedule set			
19	by Nevada	a state law or Nevada state government that requires the			
20	payment of a specific amount, specific rate for emergency services				
21	[indiscernible] basis?				
22	А	I am not aware of a specific fee schedule, no.			
23	Q	All right. And you're not aware of any statute that specifies			
24	the particular methodology, statute or regulation, as specified in the				
25	particular	methodology that must be used to reimburse emergency			

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services or	an out-of-network basis for a commercial health plan?
Α	A methodology?

- Q Yes. Usual and customary, for example. That's not written in any statute or regulation in Nevada, correct?
 - A I'm not certain.
- Q Sitting here today, in your experience as senior officer for TeamHealth and all you've done to prepare to give testimony in this case, you're not aware of any statute or regulation issued by the Nevada state government that says that commercial out-of-network emergency services must be reimbursed as usual ask customary or usual and customary and reasonable charges, correct?
- A I'm not aware of an explicit methodology, but I'm certainly aware that there is an implied fact provision for the services to be covered and paid at the usual and customary rates.
 - O That's what you're referring to in this complaint, correct?
 - A Yes.
- O Okay. But that's not -- you couldn't go pick up a statute book or regulation and find of language, correct?
 - A Find what language?
- Q That -- that commercial reimbursement for an out-of-network emergency claim must be made at usual and customary rates or usual and customary charges?
 - A Not that I'm aware of.
- Q Okay. Now, if you go down to paragraph 237, you'll see a statement that then alleges, the Defendants failed to failed to reimburse

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the	healthcare	providers	at the	usual	and	customa	ry rate	within	30	days
of th	he submiss	ion of the	claim.	Do y	ou se	ee that?				

A Yes.

O I want to make sure I understand the allegation and precisely what it means. Is the allegation in that sentence that the claims that are disputed in this case were not adjudicated and paid at all within 30 days or is the allegation that they were adjudicated and paid within 30 days but not at the usual and customary rate?

A The latter. That they were not paid at the usual and customary rate within 30 days.

- O So there's no allegation, at least with respect to the disputed claims, that the claims were not adjudicated and paid what you contend was a -- a particularly low rate but paid within the 30-day period?
 - A That's correct.
- Q All right. Sir, under the statement, the healthcare providers have an implied agreement with the tenants. Do you see that?
 - A Yes.
- Q Did Plaintiffs have an implied agreement with all commercial health insurers and health plans whose members receive emergency services from the plans on an out-of-network basis?
- A On an out-of-network basis, yes, to the extent that they're not otherwise accessing one of our negotiating discount arrangements.
- Q So if they haven't -- if they're not of network and they haven't accessed a wrap or rental network agreement and they receive an out-of-network emergency claim from that one of the Plaintiffs, that is pursuant

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1	in Plaintif	fs view to an implied agreement under Nevada law?
2	А	Again, with the exception of to the extent that there are
3	otherwise	out-of-network agreements or negotiated discount
4	agreemer	its that might be separate and apart and distinct from rental
5	network a	nd wrap agreements.
6	Q	Okay. Kind of the one off kind of negotiations you were
7	describing	g earlier?
8	А	Yes.
9	Q	Okay. All right. How long has United had this implied
10	agreemer	nt with the Plaintiffs?
11	А	With Plaintiff Ruby Crest as far back as we have been
12	providing	services there.
13	Q	Is that because Ruby Crest has always been out-of-network
14	with the U	Jnited Defendants?
15	А	Yes. That's my understanding.
16	Q	And and you'd agree, sir, that during that period, the
17	amount th	nat Plaintiffs Plaintiff Ruby Crest has charged for the same
18	service, sa	ame CPT code has increased each of those years, correct?
19	А	Yes, at least for the period in the dispute period. Yes.
20	Correct.	
21	Q	Did this implied agreement between the United Defendants
22	and Ruby	Crest include an agreement by the Defendants to pay for those
23	increase -	- annual increases of billed charges each year?
24	А	Again, there is an implied agreement that they would pay the

usual and customary rates as long as they were within the acceptable

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standard of how Ur	ited would	define and	others woul	d define	what's
usual and customar	у.				

Q So if the rates went up 5 percent, 10 percent, 15 percent a year, the United Defendants would still be obligated under this implied agreement with Ruby Crest to pay those increased rates each year so long as it didn't exceed some definition of reasonableness that you are describing here?

A Well, one, I said we only increased our prices five percent each year. Again, the measurement, as long as they -- by United's own admission, the standard is that they're usual and customary within the 80th percentile of the FAIR Health database or other like providers of like services in the same geographic market.

- Q Now, first of all, who is the administrator of the TeamHealth plan effective January 1, 2020?
- A So, again, primarily it is Aetna. And then a caveat, there's -there's carve-outs for like a market or two. But Aetna is the primary
 provider of our --
 - Q Okay.
 - A -- administrative services.
- Q Okay. Is there a market somewhere where the United Defendants are still the administrator?
 - A No, not United.
- O Okay. And after United ceased being the administrator and Aetna became the administrator, the provider wouldn't get full bill charges in that instance if it was above the 80th percentile rate up?

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Α	They would get the lesser of the 80th percentile of billed
charge.	

- O Okay. Mr. Bristow, do you recall that for the file that we called the disputed claim file that Plaintiffs had produced four versions of that file?
 - A That's correct.
- Q Okay. And, according to my records -- tell me if this sounds right based on your preparation to testify today -- the third version of the claims file -- disputed claims file had 22,915 disputed claims on it and the fourth version of the disputed claims, the operative version, has 19,065 disputed claims on it?
 - A Yes, that sounds right.
- Q Okay. Okay. Which means that, according to my math, roughly 3,798 claims were removed by Plaintiffs from the third to the final version of the list?
 - A That sounds correct.
- Q I think this is obvious, but what -- what is the purpose of this file, sir?
- A The purpose of this file is to identify all of the disputed claims at issue in this lawsuit.
 - O Okay. And do you know how this file was created?
- A So, yes. It was created by pulling information out of our billing operation system.
 - Q And what is that system?
 - A It -- it goes by different names, but I generally refer to as IDX.

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And I think some also	people also refer to it	as GE Centricity.
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- Q If we see both of those names, is it referring to the same system or are those different systems over time?
 - A They're typically a synonymous term.
- Q Okay. So is it fair to say that the IDX and/or GE Centricity system contains data regarding the claims for reimbursement that TeamHealth has submitted to health insurers, including the United Defendants in this case?
 - A Yes.
- Q And that Mr. Ocasio and/or with the help of Ms. Vinci [phonetic] extracted the data that was reflected in FESM 020911 to populate the spreadsheet?
 - A Yes.
- Q And do you know what the -- you told me where the data is housed. Do you know what the source of the data itself or the source that it is for this information?
- A It's based on inputs into that system based on the submission and the processing of payment and posting of -- of the claims back in -- from the health plan.
- Q Is the data that is housed in the IDX dash GE Centricity system, is that data housed there based on manual entry of the data or based on some electronic transmission into the system?
- A Most of which is the electronic these days, but, again, there -there can be certain elements when claims are reprocessed or
 readjudicated or certain claims, you know, occasionally can drop on a

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paper claim	or pay on	on a paper	basis. Bu	t, by and	large, r	nost of	f it is
electronic							

Q Okay.

A -- but I can't represent that every claim represents here is input electronically.

Q Are there particular fields of data that are routinely made that are -- that are reflected in the spreadsheet we're looking at, FESM 020911?

A I'm sorry. I just want to make sure. The input into the spreadsheet or input into the system?

Q Into the system from which the spreadsheet drops?

A So obviously you have to key in information related to what codes you're billing as those are assigned by our coders. But otherwise -- again, most of the payments I believe are posted electronically, but there can being some that -- that get posted manually.

Q Okay. So --

A And that would be the one element that would have probably less -- well, more instances of a manual touch than all the other elements being mostly electronic.

[Video deposition of Kent Bristow ended at 10:23 a.m.]
UNIDENTIFIED SPEAKER: Your Honor, may we approach?
THE COURT: You may.

[Sidebar at 10:23 a.m., ending at 10:23 a.m., not transcribed]

THE COURT: Okay. You guys, we're -- rather than having
you sit and watch them through the technical things, we'll take a short

break.

During this recess don't talk with each other or anyone else

on any subject connected with the trial; don't read, watch, or listen to any report of or commentary on the trial; don't discuss this case with anyone connected to it by any medium of information, including, without limitation, newspapers, television, radio, Internet, cell phones, or texting. You may not talk, Tweet, Google, post social media, or conduct any other type of book or computer research with regard to any issue, party, witness, or attorney; don't form or express any opinion on any subject connected with the trial until the matter is submitted to you. It's 10:24. We will be ready sharp at 10:35.

THE MARSHAL: All rise for the jury.

[Jury in at 10:24 a.m.]

[Outside the presence of the jury]

THE COURT: Okay. The room the clear.

Plaintiff, anything for the record?

MR. LEYENDECKER: No, Your Honor.

THE COURT: Defendant, anything for the record?

MR. BLALACK: One thing, Your Honor. So we've got one -one video left, which we're working on right now with Plaintiffs as soon
as we get done. At that point, I believe the intention is for Plaintiffs to
ask Mr. Bristow to testify live on cross and then obviously we will have
any redirect.

We filed a trial brief earlier today on the scope of cross issue, and I want to make sure we bring it up because, depending on how the

examination is handled, I'll bringing up [indiscernible]. As laid out in
that brief, obviously anything we covered in our direct is fair game for
Plaintiffs to cover with Mr. Bristow. But this is not an opportunity for
them to put on the examination with Mr. Bristow they would have put on
if they had called him in their case-in-chief. Okay?

Originally that name is one of their expected call witnesses.

He's the corporate rep. And, in fact, we will all planning to hear

Mr. Bristow in their case. For whatever reason, they decided not to do
that. And that's fine. But having made that choice in not bringing in

Mr. Bristow live to testify in response to the questions and testimony we
designated and not to counter-designate this, they need to be held to the
scope of the direct as the rule contemplates.

And so I'm just wanting to make sure we have a alignment on that because I'm going to be objecting to anything that goes beyond the scope --

THE COURT: Very good.

MR. BLALACK: -- of direct.

THE COURT: I will review the trial brief during the recess. I signed an order shortening time on the Plaintiffs' motion to modify pretrial. I've set it for tomorrow at 10:15 or 10:20 because you're entitled to 24 hours' notice.

MR. BLALACK: Thank you, Your Honor.

THE COURT: So I have indicated we'd take it up at 5, but I didn't know at that point there would be an OST later in the in-box. Did you have a response with regard to the scope of the cross?

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MR. LEYENDECKER: I understand their point of view. I don't
anticipate going beyond the subjects that that are covered in the three
or four days.

THE COURT: Okay.

MR. LEYENDECKER: And if he feels like I do, then he, you know, can raise an issue with it. But I --

THE COURT: Okay.

MR. BLALACK: There won't be an issue.

THE COURT: Have a good break, everybody.

MR. BLALACK: Thank you.

MR. LEYENDECKER: Thank you, Your Honor.

[Recess taken from 10:26 a.m. to 10:35 a.m.]

[Outside the presence of the jury]

THE COURT: All right. Do you have an update for me on the court reporter?

MR. ZAVITSANOS: Yes, Your Honor. So Mr. Lyle [phonetic], who literally can find a needle in a haystack, has determined that Weil Gotshal, which is a 1,500-person firm, represents MultiPlan in a case where they have been sued for fraud for failing to disclose certain things by these investors. And here's the concern. MultiPlan is going to testify in this case. MultiPlan is involved in other litigation.

And I'm deeply concerned that the Weil Gotshal lawyer listening to me right now is advising the MultiPlan witnesses. I'm not including these lawyers here in the courtroom. I'm deeply concerned that they are advising the MultiPlan witness on what's going on here,

and what he needs to say in connection with this other lawsuit where this is a -- there's going to be a little bit of overlap in terms of what they have been doing here and what they have been doing in this other case, as the Court will see when the MultiPlan witness takes the stand.

And Your Honor, I mean, they've gone so far as to hire a court reporter to transcribe. Which I believe the only purpose of that would be to show the witness on what was said so that they could literally fall in the sidewalk crack because, as the Court will see, they're caught between a rock a hard place here. So this is real -- I've never seen this before. I've never encountered this before. I know they're listening to me right now as I'm talking. So I -- and I don't know what to do about it. I'm at a loss.

MR. BLALACK: Can I be heard, Your Honor?

THE COURT: Of course.

MR. BLALACK: I know nothing about anything he just said, so I don't really have any response to that. I will say that according to our search, Weil Gotshal also represents Blackstone, which is the owner of TeamHealth. So it's entirely plausible that everything that Mr. Zavitsanos said is right. It's also entirely plausible that Weil Gotshal is doing it on behalf of Blackstone without his knowledge. Or it's entirely possible it's something else entirely. I don't know.

THE COURT: We can voir dire the witness outside the presence of the jury before the testimony takes place.

MR. BLALACK: That's how he -- I'm confident he won't know anything.

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1	THE COURT: Thank you. Let's bring in the jury.
2	MR. LEYENDECKER: I believe the tapes are still being edited,
3	Your Honor.
4	UNIDENTIFIED SPEAKER: How much time
5	MR. GODFREY: Probably need about five more minutes.
6	THE COURT: About five more minutes?
7	Oh, the marshal. Just let her know we need five more
8	minutes. Go ahead and be at ease, and I'll be back at 10:45.
9	UNIDENTIFIED SPEAKER: Thank you, Your Honor.
10	[Recess taken from 10:37 a.m. to 10:49 a.m.]
11	[Outside the presence of the jury]
12	THE COURT: Please remain seated.
13	MR. BLALACK: Your Honor?
14	THE COURT: Yes.
15	MR. BLALACK: We've got the video ready, but there's one
16	ruling we're not that may not
17	THE COURT: Come on up.
18	MR. BLALACK: Mr. Leyendecker can't really decide how to
19	handle it, so.
20	THE COURT: Can I see what I wrote?
21	THE CLERK: Do you want a bench conference on it?
22	THE COURT: No.
23	MR. LEYENDECKER: Do you have the transcript too, Your
24	Honor? If not, I'll share with you on my screen.
25	MR. BLALACK: Here is your ruling, Your Honor. It's this one

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	here. And Shane tells there's the transcript. Shane tells me that this
2	section
3	THE COURT: Did I write on the I think I may have I wrote
4	on the transcript. You guys are under a lot of pressure.

[Pause - Court and counsel confer]

THE MARSHAL: All rise for the jury.

[Jury in at 10:53 a.m.]

THE COURT: Thank you. Please be seated. And thank you to the members of the jury again for your patience with our technical issue. All right.

MR. BLALACK: We can now play the final video, Your Honor. THE COURT: Yeah.

[Video deposition of Kent Bristow continues]

Q So we're back together again to take additional testimony.

At this time, as I understand it, you've been designated to be a corporate representative on behalf of Plaintiff, Fremont Emergency Services (Mandavia), Ltd.; is that right?

A Yes.

Q Plaintiff's theory that they were entitled to flow bill charges for the services that they billed for United, that was on an out-of-network basis, was limited by a determination of whether those charges were or were not reasonable. Is that a fair summary of your statement of the Plaintiff's position?

A Yes.

Okay. And when we discussed how to define what was and

wasn't reasonable, I understand I understood you to say that the FAIF
Health database at the 80th percentile represented what Plaintiffs
believed was a standard by which to measure the reasonableness of
charges; is that right?

A That's correct. And again, if you look at our charges, again, on a weighted average basis across all the codes, you will find that we are well under the 80th percentile of FAIR Health in the geo zip for the Clark County area. In fact, I believe we're below the 60th percentile when you look at a weighted average of all of our codes that we bill.

Q And I appreciate that, but my question is slightly different.

I'm trying -- you just [indiscernible] on an aggregate basis. I'm asking on a code by code basis if your charges exceed -- Plaintiff's charges exceed the standard you identified in the FAIR Health database. Are Plaintiffs still pursuing full recovery of those charges and damages in this case?

A I would say we'll -- again, we still believe those charges to be reasonable. But yes, we would concede that if it's a bottom 80th percentile, we would limit it to the 80th percentile.

Q I'm sorry --

A Because that is the standard that we referenced as being reasonable.

Q Yes. So are you taking the position that the measurement up against FAIR Health has to be done on a collective aggregate basis to decide how to judge whether the charge is reasonable? Or are you saying that you're entitled -- are you taking the position that that's an assessment that's made on a code by code, facility by facility basis?

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Α	I believe it should be viewed on a weighted average basis
and also or	n the codes.

- Q Okay. Right, but I'm -- right now, I'm asking about a single line to understand your position of what you're going to tell the jury when we get to trial. And I want to know whether you're telling them that you're going to be seeking for row 2, 700 -- I had to go back to \$779 for Fremont at Sunrise ED, Nevada even though it exceeds the 95th percentile of the FAIR Health database because on an aggregate basis, TeamHealth's charges are below, according to you, the 60th percentile of FAIR Health?
 - A Yes.
- Q Okay. So let's now, sir, turn to Fremont -- the Plaintiff,
 Fremont. And you mentioned that TeamHealth acquired Fremont -- I
 think you said sometime in 2015; am I right about that?
 - A Yes, I believe it was the later part of '15.
- Q And am I correct, sir, that unlike Plaintiffs Team Physician and Plaintiff Ruby Crest, that Fremont physicians staffed more than one emergency department; is that right?
 - A Yes.
 - Q How many did they staff?
- A Today?
 - Q We'll start with today, and then we'll go backwards.
 - A I believe today; we staff five emergency rooms.
- Q At the time of the acquisition in October of 2015, how many emergency rooms did Fremont staff?

- A My recollection is six, but I'm not absolutely certain.
- Q Okay. So sir, the document marked as Fremont Exhibit 6, I'll represent to you is a printout of the Fremont chargemaster that I showed you in electronic form earlier. And then to the extent the amount on the chargemaster for each of those codes was changed during the period at issue -- strike that.

During the period for which the data was collected. This is April 1, 2016 through December 31st, 2017. Those different charges over time are reflected.

A Yes.

Q How often does Fremont change the charge for an individual CPT code on this chargemaster?

A As we've talked about, typically, we do that once a year.

Again, we did encounter a special project back in -- I think it was June of 2017 in which we did a recalibration midyear of some of the nonfrequent procedure codes.

O Okay. When I look at Exhibit 6, I see dates like April 1st, 2016. And then I see May 1st is another date where changes appear to have been made. November 1st, 2016; June 1, 2017; June 15, 2017; 12/14/2017. So literally, in the span of a year and a half -- little over a year and a half, there appear to be five different changes being made to certain codes; do you see that?

A Yeah, I agree. It is not -- it does not reflect five changes being made. As we've talked about, there was a certain projected done in June '17 to recalibrate certain procedure codes across the landscape.

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But if you I	look outside c	of that, the	ere's only	one otl	herwise	change	being
made to th	e fees during	the cours	se of the o	calenda	r year.		

- Q And what date are you referring to?
- A So if you look at ER at the Lakes, the first increase it shows is in November of 2016. In June of '17, it does show the recalibration project that I referenced. Kind of a one-time project. And again, it was increased the next year. So once in 2016 and once in 2016.
 - Q W? the addition of the special project you referred to?
 - A Correct.
- Q So for ER at the Lakes, the chargemaster prices for the codes listed increased three times during that span of time?
- A Again, outside of the special recalibration project, they were -- they were increased once for the year for [indiscernible].
- Q Let's just use an example. Let's look at 10060, the very first code for ER at the Lakes. Do you see that, sir?
 - A Yes.
- O So if I read this correct, on November 1st, 2016, the charge for that code was increased to be \$716 for that code, correct?
- A Actually, I would not say it was increased. That may have been the first time we uploaded fees. I can't remember when that site started, but that may have been the start of that site when fees were just initially loaded.
 - Q But you don't know that sitting here today, correct?
 - A I believe it to be the case.
 - Q Based off what?

Q

1	А	Because we were matching the fee schedule for what we had
2	in place in	some of the other sites. So if you look at MountainView back
3	in April of	'16, that was \$716 for 10060.
4	Q	Right.
5	А	So I believe when we started up ER at the Lakes and
6	provided	the first date of service, we set a matching fee schedule upon
7	the startu	o of that site. And so thereafter, it was adjusted in June for the
8	recalibrati	on project. And then otherwise, really, the first increase for
9	most of th	e codes didn't happen until December of '17.
10	Q	So the 10060 code was increased from 716 to 734 on June 1,
11	2017; is th	at right?
12	А	Yes.
13	Q	And then it was increased again to 771 the end of that year
14	on 12/15/2	2017; is that right?
15	Α	Again, in keeping with our methodology of really just
16	adjusting	it once a year outside of the special recalibration project.
17	Q	Is the answer to my question yes?
18	А	Yes. Again, both of the reasons I stated why.
19	Q	And then for MountainView, if you look at the same code on
20	4/1/2016, 1	hat was \$716 for that charge, correct?
21	А	Correct.
22	Q	And then it was increased to 752 the following summer in
23	June of 20	017; is that right?
24	А	Yes.

June 1 of 2017, correct?

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1	А	Yes.
2	Q	And then it was reduced to 707 in June 15, 2017?
3	А	Yes, for the recalibration project.
4	Q	And then it was increased back up to 742 at the end of that
5	year on 12	/15/2017; is that right?
6	А	Yes.
7	Q	And then if you look at MountainView ED, go down, you'll
8	see a code	31500; do you see that?
9	А	Yes.
10	Q	You'll see that in April 1st of 2016, that code was the
11	charge for	that service was \$795; is that right?
12	Α	Yes.
13	Q	And then in June 1st of 2017, it was increased to 835; is that
14	right?	
15	А	Yes.
16	Q	And then two weeks later, it was increased to \$1,023 for that
17	service; is	that right?
18	А	Yes.
19	Q	And then later that fall that December, end of the year, it
20	was increa	sed to \$1,074; is that right?
21	А	Yes.
22	Q	Okay. So at least for 31500, between April 1st of 2016 and
23	12/15/2017	, that charge increased four times; is that right?
24	Α	Again, yes, because of the special considerations on the
25	recalibration	on project that otherwise it didn't it only increased three

l times.

Q Okay. Do you remember concluding that one solution for that reimbursement problem was to transfer the billing for the Fremont physicians that would be reimbursed at that point through tax identification number with Fremont to the tax identification number associated with Ruby Crest?

A I do recall because of the impending threat that they were going to be implementing the benchmark pricing effective, you know, January of 2019. We did consider an alternative, trying to access what we thought was a contract in place between United and Ruby -- to United through the Ruby Crest entity.

Q Okay. And these agreements that you're describing; tell me about those. What agreements are you talking about?

A Again, I'm not an attorney and I can't give you all the structural details. But that there was a leasing agreement set up between Fremont Emergency and Ruby Crest that would allow Ruby Crest to utilize the FES providers or Fremont providers to see and treat and bill for the United members.

Q Okay. And when did Fremont and TeamHealth explore this arrangement to move the billing for these Fremont providers through Ruby Crest?

A My recollection of considering that arrangement was at the end of 2018. Again, before the expected implementation of United's benchmark pricing program for out-of-network services.

O And were those -- those agreements you described, were

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tney	actually	prepa	irea?	

- A To my understanding, yes.
- Q Did you see them?
- A I don't recall personally seeing them.
- Q Okay. And are there any business personnel for TeamHealth that were involved in the process of creating these agreements and putting them in place?
- A Just interacting about evaluating the option of doing this with myself and David Greenberg with counsel.
- Q Were any of the physicians for Fremont whose services were rendered in Clark County, but they were billed out of the Ruby Crest tax identification number informed that TeamHealth was going to be billing their services through a Ruby Crest tax identification number?
 - A Not to my recollection.
- Q Okay. Do you know whether any of those physicians would have objected to having their services billed out through a tax identification number that is not associated with Fremont?
 - A I don't know.
 - Q And that's because you never inquired?
 - A That's correct. It's not a practice we normally pursue.
- Q Okay. In your preparation to get test -- I mean, as courtroom representative of Fremont, Ruby Crest and the other plaintiff, did you see any of the documentation that you just described a little while ago that authorized the arrangement that you described for billing Fremont services for Fremont physicians through Ruby Crest?

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Α	I did not specifically review those documents in preparation
for my dep	position, no.

- Q Okay. Exhibit 21 is an email produced by Plaintiffs to Defendants in this case, that was Bate stamped, FESM07062.
 - A Okay.

- Q Okay. Now in this document marked for identification, Fremont Exhibit 21, it starts with an email from Jason Heuberger to you and Ms. Shrader, Jennifer Shrader. Do you see that, sir?
 - A [No verbal response].
- Q And then you forward that to Mr. Greenberg on December 11th, 2018, right?
 - A Yes.
- Q And then in response Mr. Greenberg writes, In Nevada -- in Nevada, rather, I think you had thought to subtune Fremont to another non-par entity (team physicians of Nevada Mandavia, it was about 560 percent the first six months of '18). Makes sense, but we would need to watch it to see if the non-par rates change. We don't have sub-TINs in Nevada, so we should check if we can sub-TIN in Nevada too (underlined). Then he writes, who can track down the sub-TIN questions. Do you see that?
 - A Yes.
- Q Now my first question, sir, the term sub-TIN, do you know what that means?
 - A Yes.
 - Q What does that refer to?

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A Again, it's when we can take two forms, but when we have a contract in place with a group and a health plan, and we to want also have access to that health plan contract with a group that's not contracted, sometimes we'll do an arrangement, as I described before, we had the intention with Fremont with Ruby Crest, to gain access to that participating contract.

Other times we can use a sub-TIN in order to -- if a hospital or a plan is only willing to have a contract, let's say if there's a group, with many sites, but they really only want to extend that offer, you know, to one site, and so sometimes they'll ask it, and we'll establish a sub-TIN to isolate a particular site for a group.

- Q Okay. Is -- I've seen this phrase "sub-TIN" in other documents, is that a shorthand way that you and your colleagues and TeamHealth refer to the process you just described?
 - A Yes.
- Q Okay. Now the concept that was being discussed in this email from Mr. Greenberg to you, is about sub-TINing Fremont to another non-participating entity, and at this point the target that was contemplated was Team Physicians in north, I guess, west Nevada, correct?
 - A Yes.
- O Okay. And as Mr. Greenberg notes in his email, the concept of engaging in this sub-TIN process was your original idea, correct?
 - A That's what he states.
 - O Okay. And you agreed with that, right?

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it.			
Q	Okay. Sitting here today, you wouldn't dispute		
Mr. Greenberg's assertion that the idea to do a sub-TIN of Fremont to			
another non-party entity was right here?			
Α	No, I would not.		
Q	Okay. And in his in the parenthesis he writes: [Team		
Physician	s of Nevada Mandavia was about 560 percent the first six		
months of '18]. Do you see that?			
Α	Yes.		
Q	Do you know what he meant by that reference?		
Α	I believe he'd be referencing the rate of reimbursement for		
that group).		
Q	So he's saying that this non-par physician group, and		
Plaintiff in	this case Team Physicians, was being reimbursed at about 560		
percent of	Medicare in the first six months of 2018; is that how you read		
it?			
Α	Yes.		

Q And is that percentage he's referencing relating to reimbursement by United Health Plans at that rate, or generally?

A I believe he's referencing United differently.

Q Okay. So he's saying, United is reimbursing Team

Physicians in the first six months of 2018 at about 560 percent of

Medicare?

A Yes.

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	Q	So the what was then contemplated here, at least at this
point	, Dece	ember of 2018, was to, if possible, sub-TIN Fremont to Team
Phys	icians	, so that those Team Physicians, providers who were being
reiml	ourse	d at much lower out-of-network reimbursement rates, would
now,	after	being sub-TIN to Team Physicians, be reimbursed at
some	ething	closer to the rates that you received with Team Physicians, in
the o	ther p	art of the State?

A So again, it's just something we were kind of bandying about, but ultimately did not ever follow through anything about this particular suggestion.

- Q But that was the concept at this point in time, correct?
- A Yes.
- Q Okay. And then he says, we should check if you can sub-TIN in Nevada. Do you see what he says; do you see that?
 - A Yes.
- Q Do you know what he -- was that -- strike that. Do you know why he was saying we need to check if we can sub-TIN in Nevada?
 - A I don't recall specifically what that's in reference to.
- Q Did you give him direction on who to talk to, to track down the sub-TIN questions?
 - A I don't recall.
 - O Okay. Did you direct it to counsel?
- A Again, ultimately we had some discussions with counsel, about we're getting Ruby Crest, I don't know about this particular suggestion that we didn't pursue.

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existing provider agreement in place.

1	Q	All right. Sir, if you would take a look at the document
2	marked for	identification as exhibit Fremont Exhibit 21, and I will
3	identify	
4	А	22.
5	Q	I'm sorry, 22. And for the record the Bate stamp for that
6	document	is FESM012976 to 012977. Now in the first email, which is
7	from you,	dated December 21st, 2018 to Mr. Carman and Paula Dearolf?
8	А	Yes.
9	Q	A copy to others, including, Mr. Greenberg, you write, below
10	is a compr	ehensive list of entities that are out-of-network with United,
11	but we nee	d to consider holding claims for effective one 119 days of
12	service wh	ile we contemplate considerations for potentially redirecting
13	the billing.	Do you see that?
14	А	Yes.
15	Q	Okay. And if you look at the listing of 10s at the chart, you'll
16	notice whice	ch is blacked out, you will notice that there were two of the
17	three Plain	tiffs listed, the Fremont Plaintiff and Team Physicians of
18	Nevada, co	errect?
19	А	Yes.
20	Q	What does that mean what does it mean to redirect the
21	billing?	

Q Is that a shorthand for sub-TIN, the sub-TIN process you described earlier?

It really means assessing whether we can attach to another

1	А	That could be a form of it.
2	Q	Is there another way to do it, beside that?
3	А	Or to see if we could and, you know, work with Plaintiff to
4	get the [in	discernible] added to the contract.
5	Q	Okay. But one aspect of redirecting the billing would be the
6	sub-TIN pr	ocess that you described earlier?
7	А	Yes.
8	Q	Okay. Now after you wrote that email you and
9	Mr. Green	berg had an exchange on the 27th, and then the 28th of
10	December	; do you see that?
11	А	Yes.
12	Q	And Ruby Crest is the third Nevada Plaintiff in this case,
13	correct?	
14	А	Correct.
15	Q	Who was not listed on the chart, that was in your email to
16	Mr. Carma	n and Ms. Dearolf, correct?
17	А	Correct.
18	Q	Now you wrote back to Mr. Greenberg, yes, wrestling with
19	whether to	do that, or just sub-TIN all of the Fremont sites under the
20	other Neva	ada entity that is not contracted, but is getting better
21	reimburse	ment at Team Physicians of Mandavia." Do you see that?
22	Α	Yes.
23	Q	And you then write, and we should also check if that entity is
24	doing bett	er out-of-network, with Sierra Health Plan of Nevada, that
25	Fremont, a	and as well, those are United affiliated health plans, even

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though I think they operate independently. Then you say, what I want to
do for sure is to sub-TIN all there's something blacked out that out-
of-network to something else, effective 1/1, so let's get that change in the
works. Do you see that?

A Yes.

Q Now why did you want to check to see if that entity is doing better out-of-network with Sierra Health and Health Plan of Nevada?

A I don't think this is what we covered before, we just didn't understand how they were paying claims that were billed, all reimbursement levels we were seeing with Fremont Emergency, compared to, again, our experience elsewhere in Nevada, and in Colorado markets as well.

- Q So in essence where it says, and we should also check if that entity is also doing better with out-of-network with Sierra Health and Health Plan of Nevada, that Fremont, as well. So which entity are you referring to, give me your best sense?
- A I think, again that sentence is referring back to Team Physicians of Mandavia.
 - O Okay. Which at that point was unanticipated?
- A Correct.
- Q So the document marked for identification as Fremont Exhibit 23. Okay. So first of all, sir, you'll see in the initial email from you to a number of individuals on your team, there's a reference to UHCOON action plan; do you see that?
 - A I do.

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Q And what was the UHCOON action p	olan?
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- A Just as it says here, it was some action items to evaluate and consider.
 - Q About what?
 - A I don't recall.
- Q So you understood that as of January 9, 2019, Mr. Greenberg was inquiring of you to confirm which other Plaintiff was going to be the recipient of the sub-TINs from Fremont, correct?
 - A Yes.
- Q So you had concerns that United might find the sub-TINing process described here, that was under consideration objectionable?
 - A That was a possibility.
- Q Okay. And is there a reason you didn't tell them that, because you knew they would object?
 - A I don't know what -- how they would react, we didn't know.
- Q And so my question is, is the reason that they were not told, United was not told of his, sub-TINing process is because TeamHealth was concerned that United would in fact object to it?
- A Again, we didn't give advance notice, specifically in Nevada, but each and every claim we submitted clearly identified what we were doing, the providers of all the sites and service involved, so it was very transparent. Again, we didn't give them advance notice, but we gave them notice on every claim that we submitted.
- Q Okay. Exactly what information are you referring to on the claim form, sir?

A The	e claim form identifies the provider of record, as well as
their MPI numl	ber. It also identifies the site of service, where that service
was rendered,	as well as the address for that site where the care was
rendered, in ac	ddition to all the other information about the CPT codes, as
well as the cha	rges, as well as the information about the insured, and the
patient that wa	s treated.

- O Okay. So in other words, United could pick up an individual claim form and see that a provider that is based in Clark County is rendering their service to a member in Clark County, but they billed on the TIN, associated with Ruby Crest, or Team Physicians in another part of the city?
 - A Yes.
- Q Okay. Now in response Mr. Greenberg wrote, RCEM is 95 percent charges with low chargemaster, do you see that?
 - A Yes.
 - Q Who is RCEM?
 - A That's referring to Ruby Crest Emergency Medicine.
- Q So Mr. Greenberg was noting that reimbursement for United, as he understood it, was 95 percent of charges, but with a low chargemaster?
 - A Yes.
- O So Mr. Greenberg then wrote back, I think we said leave as is the one non-par that had a site, and see if any changes, and move the other under Ruby Crest, right? And in response your write, yes. Ultimately, you may also move the other site too. " Do you see that?

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Α	Yes.		
Q	What are you telling Mr. Greenberg in that response?		
Α	That we were just planning to implement the change for		
Fremont s	ites under Ruby Crest.		
Q	And then would revisit the question of whether to move the		
other site,	as well, at a later date?		
Α	Yes.		
Q	Okay. All right. Mr. Bristow, the document we marked for		
identificat	ion as Fremont Exhibit 24 is an email, from Mr. Greenberg, and		
it says, Ke	nt cell. Do you see that?		
Α	Yes.		
Q	Okay. Now my first question is, Kent cell, is that referring to		
you, your cell phone?			
Α	That's I'm not sure that says Kent cell, I just recognized it's		
to my email address, though, my company email address.			
Q	Okay. And I guess my question is, first of all, have you ever		
seen this Exhibit 24 before?			
Α	Yes.		
Q	Okay. And just for the record, the Bates number of Exhibit 24		
is FESM07	402. Now the subject of this email is UAC, correct?		
Α	Yes.		
Q	Dated January 9, 2019, which is the same date as the other		
email we were just looking at, which is Exhibit 23, correct?			
А	Yes.		

Okay. Now looking back at this email it says, for action plan

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piease con	sider. Do you see that?
А	Yes.
Q	Is Mr. Greenberg referring to the United out-of-network
action plar	that's referenced in Exhibit 23, to your knowledge?
А	Yeah. I don't know the correlation to that document. I think
it's just ste	ps we were planning to take it up to sub-TIN.
Q	Well, he wrote you on the same day as your email, where
you labele	d something as United UnitedHealthcare out-of-network
action plar	n. Is that what you understood them to mean, at the time you
got the em	ail?
А	Well, again, it's the action plan associated with this particular
situation?	
Q	Meaning the UnitedHealthcare work reimbursement?
А	That one means the consideration of using sub-TIN in
Nevada.	
Q	Okay. So was Mr. Greenberg highlighting that if we do this,
if TeamHe	alth does this sub-TINing of Fremont physicians to Ruby Crest,
it might be	necessary for some of those physicians who are the subject
of that sub	-TIN, to have a chargemaster, more than one chargemaster
rate, deper	nding on the health plan involved?
Α	It looks like that's the question he's raising or asking.
Q	Okay. And do you know if in fact as part of the sub-TIN
	Okay. And do you know if in fact as part of the sub-TIN at was being implemented, dual chargemasters were ever

No, not to my knowledge.

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 Okay. Sir, the document marked for identification is Fremont
Exhibit, I believe 25, is an email string from involving Mr. Heuberger,
yourself and others, including Mr. Greenberg, running from February
22nd, 2019, through March 5th, 2019; do you see that? We'll just orient
here, we want the date range here, it starts with an email from
Mr. Heuberger to you, of February 22nd, 2019; do you see that?

A Yes.

- Q And the subject is UACED for Ruby Crest?
- A Yes.
- O And in it, it says, Kent, attached is the Ruby Crest data you asked for [January date of service] including the Fremont entity, since they are using Ruby Crest as the sub-TIN for UAC [indiscernible] do you see that?
 - A Yes.
- Q And after reviewing the information provided by Mr.

 Heuberger your wrote back -- strike that. You wrote to Mr. Greenberg.

 Hmm. You wrote H-M-M. Not saying they'd pay 80 percent for Fremont sites, or we sure sub-TIN in the set up and operating properly for these claims; do you see that?
 - A Yes.
- Q So my question, after you looked at the information provided by Mr. Heuberger, and you examined the reimbursement rates for the Fremont physicians that had been sub-TINed to Ruby Crest, you noticed that reimbursement rates for those physicians were not at the percentages that you were expecting?

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1	Α	Correct.	
2	Q	Okay. And that caused you to wonder whether the sub-TIN	
3	process th	at you had authorized had in fact been implemented as	
4	planned?		
5	А	Correct.	
6	Q	And so you made an inquiry to Mr. Greenberg to check into	
7	it, and see	if that had actually occurred, correct?	
8	А	Effectively, yes.	
9	Q	Okay. And when Mr. Greenberg forwarded the request to	
10	Ms. Harris	, and Ms. Harris then forwarded the request to others, and Ms.	
11	Harris noted in her email of February 22nd, can you take a look at the		
12	attached, t	o get a handful of patients, and tell me when we drop the	
13	claim, and to confirm that we're using Ruby Crest as the sub-TIN for		
14	Fremont;"	do you see that?	
15	Α	Yes.	
16	Q	Okay. And after some back and forth that occurred over a	
17	number of	days, an email was written in the middle of the page, on	
18	February 2	7th, 2019, to Ms. Kaitlin Jonas from I'm not sure how to	
19	pronounce	e the person's name; is it Serise [phonetic]?	
20	А	I'm not sure either.	
21	Q	Okay. Serise Miller, and she said, Kathleen, and she	
22	proceeds t	o describe review invoices. And then she says in number 2,	
23	these clair	ns paid non-par, meaning, non-participating. I've attached the	
24	email we d	discussed showing that that non-par issue with Ruby Crest was	
25	known bad	ck in 2017; do you see that?	

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So wher	that information	as then pa	assed along t	o Ms. F	larris,
correct, by Ms. Jona	s?				

- A Yes.
- Q Who then contacted Mr. Greenberg on February 28th, and informed him of what she had learned?
 - A Correct.
- Q And Mr. Greenberg then contacted you on March 4th, 2019, to say that well, we're seeing claims for Fremont going out under Ruby Crest in Nevada, correct?
 - A Yes.
- Q So what he's confirming to you is that the sub-TIN process that had been requested was in fact in place?
 - A Yes. I reversed it.
- Q Okay. and in fact, at the top of the email you said, but, quote: "Agree, if we continue to see no benefit of doing sub-TIN of Fremont through Ruby Crest, then let's turn off the sub-TIN," correct?
 - A Correct.
- Q And your testimony is that those Fremont physicians who had been sub-TIN to Ruby Crest in the first part of 2019, that was -- that practice ceased, and they stopped being billed through Ruby Crest after that?
 - A Correct.
 - Q When did that practice cease, as to Fremont?
- A So I think it would have been -- I don't know definitively, but I imagine soon after, you know, this exchange of emails.

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	Q	And after you made the switch to turn the sub-10 off, did you
notify	any o	of the providers that their claims were now going to be billed
back t	throug	gh Fremont as they had been before?

- A No, we did not.
- Q Okay. Did you ever notify United that the claims that had been submitted for these providers after this process was turned off were going back to go be submitted through Fremont?

A By way of the new claims being submitted going forward under Fremont, showing the provider name and number as well as the site of service and the site address, that's the way they would have been informed because each and every claim that was submitted would identify that.

- Q Okay. Apart from the individual -- the information on the individual claim form, any other communications that TeamHealth had with United over that fact?
 - A Not that I recall.
- Q Okay. And do you recall that TeamHealth investigated doing a sub-10 of Fremont to Ruby Crest for the members who would be treated by Fremont physicians by -- who were Sierra members and Health Plan of Nevada members, just like had been done for the United Healthcare members?
- A I don't recall that there was any investigation. I recall there was a mention of that but not an investigation that I'm aware of.
- Q Okay. So the document marked for identification as Fremont Exhibit 37 is an email exchange between Ms. Harris and Mr. Greenberg,

copied to a number of other TeamHealth officials. Now, in response to
receiving Ms. Harris' letter, Mr. Greenberg writes, thanks, Rena. You
haven't heard back from Alcoa about the Fremont sub-TIN to Ruby Crest
over (UHC claims) inquiry yet, have you? Do you see that?

A Yes.

Q Do you remember that the reference that Mr. Greenberg is making there to checking to see whether the Fremont sub-TIN to Ruby Crest (UHC claims), the UHC inquiry yet, have you is referring to the investigation that occurred at your request to see if the sub-10ing of Fremont for United claims to Ruby Crest had in fact been put in place?

A It could be. But again, I can't make that direct correlation based on that reference.

- Q But it goes on to say, let's discuss subbing them to RC, too.

 Do you see that?
 - A Yes.
 - Q And the RC that's referenced there is Ruby Crest?
- A Yes, obviously so.
- Q So you understand that Mr. Greenberg, in his message to Ms. Harris, was saying that he wanted to discuss with her sub-TINing the Fremont physicians for that health plan, to have them -- their services billed out of Ruby Crest like the United physicians?
 - A I think he's just saying let's discuss that situation, as well.
- Q That it was the same? Let's explore the same kind of arrangement with respect to the Health Plan of Nevada members as we are putting in place for the United members.

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1	А	I I think he's just saying let's discuss Ruby Crest being
2	subbed for	Health Plan of Nevada, as well.
3	Q	And then, Ms. Harris writes back, and she says, I sent your
4	information	n to Alcoa last Friday. Let's give them until the middle of this
5	week to res	spond. And then she says, they know this inquiry is coming
6	from Kent.	Do you see that?
7	А	Yes.
8	Q	That's you, correct?
9	А	Yes.
10	Q	Okay.
11		MR. BLALACK: I think that's it, Your Honor.
12		THE COURT: Okay. Very good. So cross-examination?
13		MR. LEYENDECKER: The Plaintiffs would call Mr. Kent
14	Bristow live	e, Your Honor.
15		KENT BRISTOW, DEFENDANTS' WITNESS, SWORN
16		THE CLERK: All right. Please have a seat and spell your
17	name for th	ne record.
18		THE WITNESS: My name is Kent, K-E-N-T, Bristow,
19	B-R-I-S-T-O)-W.
20		THE COURT: All right. Everyone see Mr. Bristow okay?
21	Thank you.	Go ahead, please.
22		CROSS-EXAMINATION
23	BY MR. LE	YENDECKER:
24	Q	Good morning, Kent. Would you introduce yourself to the
25	jury and giv	ve them a little bit about your background?
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	Α	Sure. So you've heard my name. I live in Knoxville,
Tenn	essee,	and I'm married 25 years and we have three children. Two
boys	that a	re in college and then I have a daughter who's a freshman in
high	schoo	. And I work for TeamHealth, and I've been there for about
24 ye	ears.	

- Q Now, were you sitting over here behind me during the whole time that your video was playing?
 - A Yes.

- Q And what were you thinking?
- A A little odd. I don't particularly enjoy watching myself on the video.
- Q Okay. Any idea or sense of why the Defendants didn't call you to the stand like some of the other witnesses?
 - A I don't know the answer to that.
- Q Okay. You said you -- you're at TeamHealth. Tell us how long you've been at TeamHealth.
 - A As I said, about 24 years.
 - Okay. And how long were you an accountant before that?
- A So I worked for a couple different firms, probably a combination of about seven years before I joined TeamHealth.
- Q Before we get into the discussion of the sub-10, I just want to ask for a clarification because there was a point -- I don't remember which tape it was -- but there's a reference to our charges and the 60th percentile of FAIR Health. Do you think that may have been a mistake as opposed to the 80th percentile? Do you remember that part of the tape

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1	or not?	
2		MR. BLALACK: Object to form. Leading.
3		THE COURT: Overruled.
4		THE WITNESS: I do remember that in reference to the
5	Fremont E	mergency Services charges.
6	BY MR. LE	EYENDECKER:
7	Q	And were you was the 60th was the reference to the 60th
8	right or w	as it a mistake and you were thinking 80? That's what I was
9	trying to f	igure out.
10	А	No. It's correct. It was actually below the 60th percentile on
11	a weighte	d basis.
12	Q	Okay. Okay. So the question there was something along the
13	lines of le	d to our charges being below the 60 percentile of FAIR Health.
14	Α	Correct.
15	Q	And you were affirming yes, that was correct.
16	А	Yes.
17	Q	For whatever the particular charges were that you all were
18	discussing	J .
19	А	Correct.
20	Q	Okay. Let me I want to put the thing in context, and the
21	thing bein	g the sub-10 issue. And so what I'd like to have Michelle do is
22	put up on	the screen something Mr. Blalack told the jury in his opening
23	statement	s at pages 90, lines 25 through 91 and line 7.
24	And	so during opening statements, Kent, Mr. Blalack told the jury,
25	"So, ladies	s and gentlemen, later in the trial, you will hear that my clients

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are asking you to find that we've established a proof of unclean hands by
the TeamHealth Plaintiffs. And if you agree that we've met that burden
of proof," I'm not going to take you back to the burden of proof, but, "if
we've met that burden of proof by a preponderance of evidence, you can
deny their claims for recovery even if you think we've underpaid them
under Nevada law."

And so here's my question: although Mr. Blalack didn't say it, he seemed to be suggesting that if they could establish unclean hands in the jury's eyes, they could zip us out on the whole case. Do you see that, sir?

- A Yes, I see that.
- Q So just to put the sub-TIN issue in question, how many of the 11,563 claims involved this sub-TIN issue?

MR. BLALACK: Object to the foundation of the question.

THE COURT: Overruled.

THE WITNESS: I think the number is 254.

BY MR. LEYENDECKER:

- Q So 254. Let's see if I have an empty page here. If not -- 254 of 11,563 for our sub-10 claims. Is that right, sir?
 - A Yes.
- Q And ballpark, what was the total charges on those 254 claims?
- A I believe it's about \$300,000.
 - O Okay. And ballpark, about how much was allowed?
 - A I believe it was right about \$100,000.

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1	Q	Okay. And do you understand that the Plaintiffs in this case
2	are seeking	g, first of all, they contend that their billed charges are
3	reasonable).
4	А	Yes.
5	Q	And that the billed charges represent the reasonable value of
6	services.	
7	А	Yes.
8	Q	And in total, the Plaintiffs are seeking about \$10.4 million in
9	damages.	
10	А	Right. Yes.
11	Q	Okay. And so if we're putting the sub-10 in context, about
12	200,000 i	f the charges were 300 and the allowed was 100, is it fair to
13	say, then, a	about 200,000 of the \$10.4 million is implicated by this sub-10
14	situation?	
15	А	That's correct, yes.
16	Q	Okay. Now, one thing I don't think the jury has heard or seen
17	yet is an ac	ctual claim form, and so I'd like to spend a few minutes just
18	looking at	a claim form and orienting the jury about the information,
19	some of w	hich you discussed in your transcript there, but give them a
20	little bit of	background on that.
21		MR. LEYENDECKER: So could I get any objection, Counsel,
22	to Plaintiff	s Exhibit 307?
23		MR. BLALACK: Just foundation.
24		MR. LEYENDECKER: Okay.
25	BY MR. LE	YENDECKER:

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Q	Kent, are	you familiar	with what's	known	as a	Form	15007
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A Yes, I am.

Q And tell the jury what's the Form 1500.

A Also known as a HCFA Form, 1500. But basically, it's a standard form in the industry that's required for providers to complete information. There's different boxes of fields you have to fill in and submit this as a part of your claim to health insurance companies in order for them to accept and adjudicate your claim.

Q Now, as a practical matter, when we're -- when TeamHealth is doing the billing for the Plaintiff's claims in this case, do they submit an individual claim Form 1500 for every single claim?

A No, not necessarily. Because in this day and age, just about all -- virtually all of the claims are submitted electronically and are done so in batches of claims. So you're not submitting, like, one by one. But you'll accumulate a batch of claims and then you'll submit that electronically to a data clearinghouse so that it's in, like, a secure, protected environment to protect patient information. And then ultimately, that clearinghouse will receive that information and, you know, translate it or forward it on to the health insurance companies.

Q So is it fair to say on occasion, an actual form is submitted and other times, it's put together as a bigger collection.

A On occasion, they'll be -- necessary to submit a paper claim, in which you'll, you know, translate the information out of the system onto a paper claim form, the 1500 Form, and submit that to health insurance companies.

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1	Q	And are you aware one way or another whether the
2	Defenda	nts have produced some of the claim form, 1500s, that were part
3	of the cla	aims at issue in this case?
4	А	Yes, I believe they have.
5	٥	You're you've seen some of that in getting ready for
6	the he	re and your deposition or for getting ready for court?
7	А	Yes, I've seen a couple of them.
8		MR. LEYENDECKER: Your Honor, at this time, we would
9	move to	admit 307.
10		MR. BLALACK: No objection.
11		THE COURT: Exhibit 307 will be admitted.
12		[Plaintiffs' Exhibit 307 admitted into evidence]
13	BY MR.	LEYENDECKER:
14	Q	Okay. I want to go through a little bit of this. It's kind of hard
15	to read.	But let's start at the top. And tell us looks like we've redacted
16	out the p	patient's information. But tell us the kind of information that
17	we're se	eing here, for example, in boxes 1, 2, 4, 5, 6, and 7.
18	А	Well, box one is meant to indicate what type of insurance
19	they mig	tht have if they have insurance. So in this case, it's I think it's
20	selecting	"other". And then the box next to it is asking for the insured's
21	ID numb	er.
22	So	in that case, to the extent a patient has insurance, you would,
23	you kno	w, like off their insurance card. You would, you know, identify

what their membership number is or their subscriber number and put

that in that field. And any additional elements are just identifying who

the patient is, as far as their name, their date of birth, and maybe what their address is, and also any kind of relationship they may have with the actual subscriber to the insurance. If it's -- if it's different, say, if it's a child to the person who holds the policy.

Q Let me ask you, Kent, where in this -- the top part of this Form 1500 that has the patient name and those kind of demographics, where is that information? Where do we get that information?

A That information is really received by us from our hospital clients. So they capture all of the demographic information about a patient and all of their information when they register at the hospital, and they register in the ED. And then after the visit is over, they will subsequently collect all that data and, you know, kind forward that to us electronically.

Q Okay. And does it come along with -- at what point in time does any particular claim get assigned a unique style claim number? We've seen claim numbers on some of these lists. When does that happen?

A Ultimately, when we've married up all the information about the, you know, the patient's information as well as information from the medical record, because you have to take the medical record, and we have coders who will, you know, code the chart and decide what the appropriate codes to bill are. They'll marry all this information up, and again, run edits against it to make sure t's good information. And then ultimately, as we've talked about, submit that information electronically to that data clearinghouse as a part of a batch of submitted claims.

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to the 11,563?

1	Q	Let me ask you, at different points throughout the case, did
2	the lawye	rs let me back up. The jury has heard information about the
3	claim tota	Is being 22,000 and then 15,000 and then this whatever the
4	number w	vas. Were there times when the lawyers reduced the number of
5	claims in	the case?
6	А	Yes.
7	Q	And ultimately, it got down to this 11,563?
8	А	Correct.
9	Q	Did anything about the quality or reliability of the data on
10	these 11,5	63, was that changed or compromised or got lost in the shuffle
11	over the c	ourse of the reductions?
12		MR. BLALACK: Object to form. Compound.
13		THE COURT: It is compound. Break it down.
14	BY MR. LE	EYENDECKER:
15	Q	Sure. Step one. Were there times when the lawyers asked
16	you to eli	minate certain claims from the case?
17	А	Yes. We were asked to adjust the file to remove certain
18	claims. Y	es.
19	Q	Did that process and ultimately, that got down to the
20	11,563 at	issue.
21	А	Right. Yes.
22	Q	And did anything about the reduction of the overall number
23	of claims	somehow change or cause the data, the claim CPTs, the
24	charges, e	et cetera, did that somehow compromise the data that's related

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	Q	Okay. Now, back on this Form 1500, do you have a sense of
abou	it how	many of the 11,000 and change in this case were actual Form
1500	s vers	us submitted electronically in groups?

No, it would not have changed that data in any way.

A Yes. I believe we identified a column to note whether they were electronic or whether they were paper, and I believe it was less than 400 of the claims were submitted on paper.

Q Okay. Any idea why? You know, I assume in the modern world, most of this stuff gets submitted electronically.

A Correct.

Α

Q Sitting here today, do you have any idea why there was 350 or 400 of these actual individual claim forms submitted as opposed to an electronic data transfer?

A It can be for various reasons. But I don't know specifically about these set of claims what would have driven that request or need to submit them on paper.

Q As between -- I think I heard this already. But as between sending individual claim forms or sending batches of the same information, what's the predominant way of claim submission in modern healthcare?

A So again, the vast majority, I think 98 percent of our claims on average are submitted electronically in a batch format.

O Okay. Let's go back to this Form 1500.

MR. LEYENDECKER: And Michelle, can we come down to the middle? I want to explore if you can.

BY MR. LEYENDECKER:

O There's been a suggestion that somehow, our claims data is not reliable. And what I want you to do is -- and you touched on this. But walk through how do we get from the first step where the hospital sends us some demographics to where we get to the point we're going to submit a bill or batches of bills to a particular payer. How does that happen?

MR. BLALACK: Object to form, Your Honor. Beyond the scope of direct.

THE COURT: Overruled.

THE WITNESS: So again, you know, the patient information is captured by the hospital and sent to us electronically. We also receive the actual medical record of the patient, the service delivered. And coders take that medical record, and they evaluate based on the documentation provided, what codes -- or what services were provided and therefore, what codes, you know, need to be billed.

And so that's input into the system. And then, you know, it'll go retrieve, all right, this was at, you know, this ED site, and for this code, here's charge. And so it matches that up. And so ultimately, again, all the appropriate fields required on the HCFA 1500, you know, are pulled together into one, you know, kind of electronic template and submitted in the batch form.

BY MR. LEYENDECKER:

Q And then, once the batch claims are submitted to a -- did you say not the insurance company, but to a clearing -- what did you say?

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- A Effectively a vendor data clearinghouse.
- Q Okay. What happens after the claims get sent to the clearinghouse?
- A I don't know all the behind the scenes of what happens from that point forward. I know, you know, they run maybe their information through different protocols, and then they forward that information or make it available on to the health insurance companies.
- Q At some point, do we get some information back from the payor?
- A Yes. So once they've reviewed the information on the claim, ultimately, they will issue us a provider remittance advice that -- regarding, you know, their determination on the claim.
- Q And what kind of information is in the provider remittance advice that we get back from the payors?
- A It'll contain a lot of the information that's also reflected on the HCFA 1500 form fields that we're submitting. But in addition, obviously, they will be indicating how much they are allowing on the claim. And then, to the extent there's also any kind of patient responsibility determinations, whether it's a deductible or coinsurance or a copayment, that information will come back, as well.
- O So when we submit the claim in these batches you're describing, it has the date of service?
 - A Yes.
 - Q The doctor name?

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1	Α	Yes.
2	Q	Hospital name?
3	Α	Yes.
4	Q	The CPT determined?
5	Α	Yes.
6	Q	Okay. Part of the bill, the charges?
7	А	Correct.
8	Q	Does it have the allowed amount?
9	А	When we submit our bill, no.
10	Q	Okay. How about any indication of what the coinsurance or
11	the deduct	ible are?
12	А	No. We don't have that information about each member.
13	Q	And do those, the allowed and the coinsurance, are
14	they did	you say those come back as part of the provider remittance
15	advice?	
16	Α	Correct. Yes.
17	Q	And then, do you all do anything to try and provide those or
18	combine th	nose two things together in your system?
19	Α	Yes, because we have a unique claim identifier number that
20	gets subm	itted with each claim in a batch. And when that comes back ir
21	the form o	f a provider remittance advice on that claim, it also references
22	that same	claim number identifier that we submitted, so that we can
23	match up t	hose claims and then properly put it back into our system, as
24	well as the	outcome.

So when I hear that, I think big picture. The claim I.D. allows

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us to match our original information with the information coming from
the insurance company, so that we can have it all contained within the
same record. Am I thinking of that right?

A Yes.

- Q All right. Now last week, did I ask you to check for the provider remittance advices on a -- and give you a list of 290 claims?
 - A Yes, you did.
- Q Okay. Tell us what you found on those 290 claims I asked you to check on.
- A Yeah, so I contacted one of my analysists, Tylona Minci [phonetic], and she researched those claims.

MR. BLALACK: Objection, Your Honor, hearsay.

THE COURT: You don't have to talk about what you did.

THE WITNESS: I'm sorry. So I --

THE COURT: The objection is sustained.

THE WITNESS: I instructed her to look up the provider remittance advices on those claims. And then she sent me a file back of those that she located.

BY MR. LEYENDECKER:

- Q So what did you learn when you learned when you looked for the provider remittance advices on the 290 claims, the list that I gave you? What did you learn?
- A We found that we had over 270 of those available in our system.
 - Okay. So the jury has heard a variety of suggestions about

the reliability of our claim records. Given the example that I just gave you, what does that tell you about whether our claim system and our data records are reliable, in light of your little mini project on those 290 claims?

A Again, for me it just reaffirmed that our data in the claims files is extremely accurate.

Q Now if I were to now tell you that those 290 claims are claims that the Defendant's expert said he couldn't find in United's -- proof of those claims in United's records, what, if anything, does that tell you about United's claims system?

A I can't comment about that. I don't -- I don't know. I just know it reaffirms, you know, the confidence we have in our data.

Q You know, while I'm on that, let me -- sitting here today, do you have a sense of whether -- if I took all 11,563 claims and totaled up our charges in our file, and the allowance in our file, do you have any sense of what you would expect to find if the Defendant said well, here's our version of those claim files, and you totaled those two things up. What would your sense be?

A I would expect them to be extremely comparable. You know, there could be minor differences, but on a very small scale. But I would by and large say because it's largely electronic exchange of information back and forth that it would, you know, marry up to, you know, nearly 100 percent.

Q Now do you -- are you here to tell the jury we're absolutely perfect record keepers all the time, 100 percent of the time?

1 A No, certainly not.

- Q You think United is an absolute perfect record keeper all the time, 100 percent of the time?
 - A I wouldn't think so, no.
- O Okay. Any part of you thinks that something about our claim file, as it relates to the 11,563 claims, that we are way off the mark in terms of the total charges, or the total allowed amounts?

A Not at all. I think the vast majority would be spot on. Again, there may be a couple of instances here or there that claims involving, you know, reprocessing of claims or the manual submission can lead to a slight difference on a few claims, but otherwise -- it really should be very much the same.

Q You just used a new term, I don't think I've heard it before.
You said reprocessing claims. What do you mean?

A So on occasion we will submit a claim and to the -- through the electronic process, and for whatever reason, you know, health insurance plan may adjudicate the claim and issue a remittance advice and then later come back and realize there's something they need to change or do differently, and they'll effectively reprocess the claim and send another provider remittance advice. So on those occasions, you know, it doesn't happen very often, but that could potentially result in some very, very minor differences.

Q Okay. Okay. Let's go back here to the middle of our Form 1500 And just walk through a few more pieces of it. I think you said here in Box 14. Tell the jury what's in Box 14.

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Α	That is the date of the service that was provided.	The patient
received th	e treatment.	

- Q And we've got Box 21 is highlighted, too. Tell us something about the diagnosis. What's that, sir?
- A Those are just the final determination of what the patient's diagnosis was. And there's it looks like in this case three different codes that were identified.
 - Q Any idea what those diagnosis codes are for this patient?
- A Actually yes, I did look up just one in particular. And I think it has to do with -- I think the first one has to do with some kind of oral cavity bite.
- Q Okay.
- A And I think the second one has to do with presenting for unspecified convulsions.
 - Q Convulsions?
 - A Convulsions.
- O Okay. Let me get a little bit lower, if I can. Now we see date of service. The Box 24. I want to look at these. The Box 24, I think it's right here and down. Okay. Box 24(a). Tell the jury what Box 24(a) is again.
- A Again, I think that's the same thing. It's just the date of service that the patient was treated for.
 - Q And 24(d), what's that?
- A That is the CPT code that was determined and submitted on the claim.

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1	Q	So in this case we have a date of service of January 31st of
2	2019 invol	ving a 99285 claim?
3	А	Yes.
4	Q	And boxes (f), what's that?
5	А	That's just the charges associated with that particular code.
6	Q	Okay. \$1360.
7	А	Yes.
8	Q	And what is (j) rendering provider I.D. number. Tell us what
9	that is.	
10	А	So that's a unique identification number associated with
11	each prov	ider. It's also referred to as an NPI. I think it's a National
12	Provider lo	dentifier.
13	Q	So if I look at the NPI down here in Box 31, Heber Phillips.
14	Was there	a correlation between that and the rendering provider?
15	А	Yes. It's well, it's kind of hard to see. You can note that it's
16	the same	provider ID number in box up above, to the one that's down
17	below.	
18	Q	The 120563286?
19	А	Yeah, 1205063286, yes.
20	Q	Okay. And is that the doctor that or perhaps the nurse
21	practition	er that performed the service on this date?
22	А	Yes. That's the healthcare professional identifier number.
23	Q	And then box 32 is what, sir?
24	А	32 is the site of service. Where the service took place. So in
25	this case i	t was performed at Sunrise Hospital Medical Center here in Las

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2	Q	And then tell us what Box 33 is.
3	А	So Box 33 is the provider under which this claim was
4	submitted.	In this case, this was Ruby Crest Emergency Medicine.
5	Q	Okay. Do you understand this is one of the 254 sub-TIN
6	claims, sir?	
7	А	Yes.
8	Q	So we have identified today the CPT, the doctor, the facility
9	base, Sunri	se here in Clark County, but then we submit it under the Ruby
10	Crest TIN.	
11	А	Correct. Yes.
12	Q	And tell us again, what does TIN stand for?
13	А	Tax identification number.
14	Q	Okay. Now you have any sense of how similar or dissimilar
15	the informa	ation on the actual claim 1500 matches up within our system?
16	What's you	r what's your testimony there?
17	А	It would be exact because our system is essentially the
18	source of a	ll of the data that's reflected on this claim.
19	Q	I'd like to look at some examples of these TIN claims and
20	claims in th	nat same period of time. And so I'd like to use at this point, a
21	demonstra	tive, Exhibit 473-H, with the witness?
22		MR. BLALACK: Your Honor, I have no problem with counsel
23	showing th	e demonstrative. I will object to the exhibit, because it's my
24	belief it do	es not accurately reflect some of the data in the underlying
25	data fields.	But he can walk through it, and we can argue about

ad	lmiss	ibil	lity	later
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MR. LEYENDECKER: Something other than the cents on the dollars?

MR. BLALACK: Correct.

MR. LEYENDECKER: Okay. Okay, Michelle, you have the first example? Let's zoom in. There, stop. Can you go -- oh, you know what, I'll tell you what, I don't think we can, because --Brynn, may I have the Elmo, please?

BY MR. LEYENDECKER:

- Q Okay. Kent, tell us -- this is -- do you understand 473 is the Plaintiffs' claim file?
 - A Yes.
- Q All right. And on this summary example, you see we have the date, it's Fremont and the two Ruby Crests?
 - A Yes.
- Q All right. And then tell us, big picture, what does this example say to you? You see on the far right hand column, there's a no and then two subjects. Tell the jury what that means to you.
- A So it's just three examples of claims for the same healthcare professional, all billing the same code all at the same charge. But two of the claims were billed under the sub-TIN structure that we've been talking about where one of them was not. But that illustrates just the three different allowed levels for each of these claims.
- Q So on January 15, Dr. Phillips billed a 285, with charges of 1360, and allowed how much?

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- Q Okay. And then seven days later, also at Sunrise, similar claim, similar charge?
 - A Yes, the same.
- Q And then in sub-TIN the allowed amount is higher. You see the 609?
- A Yes.
- Q And do you understand the basic suggestion by the Defendants in the case is that by doing the sub-TIN, we were trying to, I don't know force them to pay more than they were paying. Something along those lines?

MR. BLALACK: Object to form. Leading.

THE COURT: You can rephrase.

BY MR. LEYENDECKER:

- Q Kent, what's your understanding of the complaint about the sub-TIN?
- A I'm not sure. Maybe other than they felt like they would have paid less if we hadn't done this.
- Q Okay. So in this first example, though, we have -- we have one situation -- fair to say we have one situation with Dr. Phillips, where they paid more on January 22nd than they paid on the 15th. Do you see that?
 - A Yes.
- Q But then what happens, you know, nine days later on the 31st, with Dr. Phillips, on the same claim?

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А	It's much lower. It's actually a lower payment than the other		
two examples.			
Q	Okay. If you go to the next one next example here, it		
involves Dr. Walker?			
А	Yes.		
Q	Date of service, oh, maybe six weeks or so apart?		
А	Correct.		
Q	Sunrise Hospital?		
А	Right.		
Q	The first one is a sub-TIN and the second one is not; do you		
see that?			
А	Yes.		
Q	Same CPT as before?		
А	Correct.		
Q	Right. In this situation, did they allow more or less for the		
sub-TIN than the non-sub-TIN claim with this doctor?			
А	They allowed more on the sub-TIN claim.		
Q	Okay. Are there other examples, like this third one, Kent,		
where the	where there was a different result with the sub-TIN billing situation?		

A So again, if you look at this one, again it's the same provider, both at Sunrise Medical Center. Within, what a week of each other.

Same charges, same codes billed, and effectively it was the same allowable determination, whether it as a sub-TIN or whether it was not.

Q Okay. Let's look at another. What about Dr. Chan? What do we see with Dr. Chan?

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	Α	Dr. Chan, again at Sunri	se Medical Center.	One was billed
out	as a su	b-TIN, and one was not.	But again, using th	e same code and
the same charges, they allowed the same amount.				

- Q Okay. And were the sub-TIN always resulting in either a little bit more with the sub-TIN than the non-sub-TIN, or were there times when it worked in the other direction?
- A It worked in different directions, yes. In this case you'll see that one with Dr. Farr, again, within a few days period here charges being the same, codes being the same, the allowable amount for the sub-TIN actually was lower than when we did not use the sub-TIN.
- Q Okay. And I've got one more here from -- this one also involves Dr. Farr as well. But it's a little different day of service. Do you see that?
 - A Yes.
 - Q And what does this last temp illustrate?
- A Again, within one day of each other, at the same site, for the same code, for the same charges, the claim that was through the sub-TIN was allowed a lower amount than when it was not.
- Q Okay. So big picture, is it fair to say that of the 254 claims that involve this sub-TIN, sometimes the Defendants allowed a little bit more, sometimes they allowed the same, and sometimes they allowed less?
 - A Yes. I think that's an appropriate characterization.
- Q Okay. We saw a reference in the videotape about shutting it off or turning it off. Do you remember that reference?

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1	A Yes.
2	Q Okay. And about how long are we processing these claims
3	from Clark County through the Ruby Crest TIN?
4	A Again, not exactly, but I think we did it over the course of a
5	60 day period. And then when we determined it wouldn't really result in
6	any noticeable difference in the outcome, that was when we elected to
7	turn it back off.
8	Q Let me ask you about a couple more topics, and I'm almost
9	done. I wanted to ask are you familiar in your role with the out-of-
10	network allowed amounts by the Defendants in Nevada versus how
11	those compare to what they allow in other states?
12	MR. BLALACK: Object to form, Your Honor.
13	THE COURT: Rephrase.
14	MR. LEYENDECKER: Your Honor, may we approach?
15	THE COURT: You may.
16	[Sidebar at 12: 12 p.m., ending at 12;12 p.m., not transcribed]
17	THE COURT: Gentlemen, come on back.
18	[Sidebar at 12:12 p.m., ending at 12:13 p.m., not transcribed]
19	THE COURT: So it turns out this is a good time for our lunch
20	break today.
21	During the recess, don't talk with each other or anyone else
22	on any subject connected with the trial. Don't read, watch, or listen to
23	any report of or commentary on the trial. Don't discuss this case with
24	anyone connected to it by any medium of information including without
25	limitation newspapers, television, radio, internet, cell phones, or texting.

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Mr. Balkenbush, was here.

Do not conduct any research on your own. Don't consult		
dictionaries, use the internet or use reference materials. Don't post on		
social media, talk, text, tweet, Google or conduct any other type of		
research with regard to any issue, party, witness, or attorney involved in		
the case. Most importantly, don't form or express any opinion on any		
subject connected with the trial until the matter is submitted to you.		
It's 12:13, let's go to 12:45.		
THE MARSHAL: All rise for the jury.		
[Jury out at 12:13 p.m.]		
[Outside the presence of the jury]		
THE COURT: 12:45. Is there anything you want to put on the		
record then?		
MR. BLALACK: Not the only issue we've got, Your Honor,		
is Mr. Balkenbush is going to wan to argue one issue related one of the		
depositions we have left to resolve. I think we could just probably take 5		
or 10 minutes.		
THE COURT: So let's be back at 12:40.		
[Recess taken from 12:14 p.m. to 12:45 p.m.]		
[Outside the presence of the jury]		
THE COURT: Please remain seated. The Court will come to		
order. All right. So Mr. Blalack, I thought you were going to be here at		
12:40? I was here and nobody was here.		
MR. BLALACK: Oh, I'm sorry, Your Honor. I thought		

MR. BALKENBUSH: I apologize, Your Honor. The walk took

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THE COURT: All right. Talk fast.

MR. BALKENBUSH: This should be very -- it's not an argument really, Your Honor, it's a point of clarification. So yesterday evening you provided your rulings on the Rena Harris and Dr. Jones deposition designations.

THE COURT: Right.

MR. BALKENBUSH: Rena Harris designations didn't make sense to us. The Dr. Jones' designations, there's an internal inconsistency, that I think we need you to clarify.

THE COURT: Go ahead.

MR. BALKENBUSH: So what we provided to you is a chart, of our designations and the other side's objections. Now, if I may, Your Honor, I'll approach and show you. And on the chart you ruled that you sustained all of plaintiffs' objections, which would essentially take Dr. Jones out of the case, but on the actual transcript, where we highlighted the objection to portions of the testimony that corresponded to the chart, you wrote that you overruled on their objection.

THE COURT: Oh, so --

MR. BALKENBUSH: So either -- he is -- we're not going to be able to call him as a witness, other than to state who he is, or we're going to be able to [indiscernible].

THE COURT: Bring it up, and I'll resolve it at the next break.

Thanks.

MR. BALKENBUSH: So this is the chart where you wrote

1	sustained, Your Honor.
2	THE COURT: Yeah. And
3	MR. BALKENBUSH: And then at the very beginning I tabbed
4	the pages where
5	THE COURT: I'll look at it.
6	MR. BALKENBUSH: Okay.
7	THE COURT: Yeah. Okay. Thanks.
8	MR. BALKENBUSH: Thank you, Your Honor.
9	THE COURT: And are we now ready to bring in the jury?
10	MR. BLALACK: Yes, Your Honor.
11	THE COURT: Thank you.
12	[Pause]
13	MR. ZAVITSANOS: And, Your Honor, I think we're close. I
14	think we may finish today.
15	THE COURT: You may finish today? You have to finish
16	today.
17	MR. ZAVITSANOS: Yeah. I think we will finish today.
18	THE COURT: I do have 3A for tomorrow I mean, 3D.
19	[Pause]
20	THE MARSHAL: All rise for the jury.
21	[Jury in at 12:48 p.m.]
22	THE COURT: Thank you. Please be seated. Mr.
23	Leyendecker, please continue. We all hope you had a nice lunch.
24	MR. LEYENDECKER: Thank you, Your Honor.
25	CROSS-EXAMINATION CONTINUED

BY	MR.	LE)	/EN	IDE	Cŀ	(ER:
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Q Kent, just a few more questions here. Earlier today the jury saw Plaintiffs' Exhibit number 513, and I'd like to put them up and ask you a couple of questions about it.

MR. BLALACK: This is admitted, correct?

MR. LEYENDECKER: Yes. Yes, sir. I'm sorry, Brynn, [indiscernible] from the Elmo to the -- back to the regular [indiscernible]. BY MR. LEYENDECKER:

Q Okay. This was a chart about where the healthcare data goes, and I think there was a discussion about the 3.2 cents for emergency room costs; do you see that Ken?

A Yes, I do.

MR. LEYENDECKER: Let's go over to page 2, Michelle, I want to just orient him. There's a little detail on page 2, and let me just have emergency room costs right up right there, please.

BY MR. LEYENDECKER:

Q Okay. Kent, what does it say here is included under the emergency room cost, that first box?

A There we go. "Physician and facility non-drug related payments for emergency room visits, and ambulance transportation."

Q Okay. Let's go back to that first page. So, physician cost, facility cost, ambulance cost?

A Yes.

Q Now do you, in light of what you do, and how long you've been doing it do you have a sense of where the doctors -- the typical

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C	loctor	charge	relates	to a ty	pical	facility	charge,	in	connecti	on	with	an
е	emerge	ency ro	om visit	t?								

MR. BLALACK: Objection. Foundation.

THE COURT: Overruled.

THE WITNESS: Yes. In my experience it's very common for the facility charge to be greater than the professional for this charge.

BY MR. LEYENDECKER:

O So is the three -- by the way, do you have some sense of whether that 3.2 cents is kind of consistent with what you understood to be how much of a healthcare dollar, and where it's going?

A Yes. I think that's been pretty consistent over time, or what I've seen in other documents.

Q And so if the 3.2 cents includes the facility and things like ambulances, what's your sense of how much of the actual ER clinician doctor/nurse practitioner is making up of that 3.2 cents; more than half, less than half, about half? What's your sense of that, sir?

A It would be less than half, you know, just given that the facility charge is generally greater than the professional charge, and then you got to take into account, also backing out the ambulance services as well.

Q Okay. And how about the air ambulance, is that, in your experience, is the air ambulance included, for example, under ambulance charges?

MR. BLALACK: Objection to the foundation of this witness testifying about this document.

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1		THE COURT: Lay a foundation.
2	BY MR. LE	EYENDECKER:
3	Q	Kent, do you have a background of what generally the
4	industry c	onsiders ambulance charges?
5	А	What the
6	Q	With let me back up here.
7	А	Yeah.
8	Q	I'm thinking of where the healthcare dollar goes. Does your
9	20 plus ye	ars of experience give you some background as to whether the
10	industry tr	reats the ambulances that are driven, that you see on the road,
11	versus am	bulances that are by helicopter or plane, do you know whether
12	those all b	undled together under the quote/unquote "ambulance
13	charge"?	
14	А	Yes. I think they would be all included together.
15	Q	Okay. Let me ask you one last question, and that is on the
16	sub-TIN is	sue, did any of the Defendants ever call, or write and say,
17	would sen	d of the money back on those 254 sub-TIN claims?
18	А	No. I never was aware that they contested those claims
19	submitted	•
20	Q	So to your knowledge did they ever say we want you to send
21	us back 6,	000 or 8,000, or some number of dollars that they allowed as
22	part of tho	ose 254 claims?
23	А	No, not to my knowledge.
24	Q	Thank you, Kent. Those are all my questions.
25		THE COURT: And redirect, please.

1		MR. BLALACK: Thank you, Your Honor.
2		REDIRECT EXAMINATION
3	BY MR. B	LALACK:
4	Q	Good afternoon, Mr. Bristow?
5	А	Good afternoon.
6	Q	Good to see you again. We visited several times back in
7	May.	
8	А	Yes.
9	Q	I took your deposition, do you recall?
10	А	Yes, we did. Yes.
11	Q	So I just have a few questions to follow-up on some of the
12	points tha	t Mr. Leyendecker asked you about. All right?
13	А	Okay.
14	Q	All right. So let's start with that document we just looked at,
15	probably	the simplest thing to do, which is Plaintiffs' Exhibit 513.
16		MR. BLALACK: Can you bring that up?
17	BY MR. B	LALACK:
18	Q	Sir, this chart has an acronym in the lower right-hand
19	column, it	says AHIP, do you see that?
20	А	Yes.
21	Q	Do you know who AHIP is?
22	А	I believe it stands for the America Health Insurance Plans, or
23	Association	on of Health Insurance Plans.
24	Q	Okay. When's the first time you saw this document?
25	А	I have seen it before. I don't recall when the first time I saw it

1	was.	
2	Q	Okay. What data is this analysis based on?
3	А	I've had to refresh myself with the document.
4	Q	Sitting here today do you know what information was relied
5	upon to pr	repare the estimates of cost, across the healthcare dialogue
6	that is refl	ected here?
7	А	Again. I'd have to refresh myself with the entirety of the
8	document	•
9	Q	And sitting here today you don't know what that is?
10	А	I do not.
11	Q	Okay. The data that was relied upon by AHIP, but it didn't
12	come fron	n TeamHealth, correct?
13	А	That's correct.
14	Q	And you're just not sure, sitting here today, where it did
15	come fron	n, correct?
16	А	Without reviewing the document, that's right.
17	Q	So when you're asked questions about what makes up this
18	3.2 cents y	ou're not sure what information that the people who prepared
19	this analys	sis relied on to come up with that number, correct?
20	А	I don't know the exact source of the data, no.
21	Q	Okay. Thank you. That's all I have on that.
22	Now	let's talk about the disputed claims list. Sir, did you have a
23	role in dev	veloping the disputed claims list the plaintiffs have been relying
24	on in this	litigation?
25	А	Yes, I did.

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1	Q	Would you tell the jury what your role was?
2	А	My role would have been interacting with our team of
3	analysts, a	and giving, you know, guidance and direction about the
4	analysis a	nd the claim set, that we wanted to run and pull out of our
5	system, re	elated to this case.
6	Q	Okay. And when you say, your people, who are you referring
7	to?	
8	А	Primarily, that would have been involved Eddie Ocasio, who
9	works on	our team, and depending on the course of time we've had two
10	different a	nalysts, in the role underneath Eddie, Ted Lonomincie
11	[phonetic]	being one of them.
12	Q	Okay. Now when I deposed you in, I believe May, do you
13	recall at th	nat time there had been four versions of the plaintiffs' disputed
14	claims list	, at that time?
15	А	I don't recall, specifically.
16	Q	Okay. I'll also represent to you, sir, that in your deposition
17	we talked	about
18		MR. BLALACK: Your Honor, may we approach, briefly?
19		THE COURT: You may.
20		[Sidebar at 12:56 p.m. ending at 12:57 p.m., not transcribed]
21		THE COURT: Okay. The objection is overruled.
22		[Counsel confer]
23	BY MR. BI	_ALACK:
24	Q	Mr. Bristow, my memory and I'll represent to you is that in
25	May wher	we discussed the preparation of plaintiffs [indiscernible], at

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that time plaintiffs had served four versions of that list, as of May.	Does
that ring a bell?	

- A Like I said, I don't remember the specific number at that time.
- Q Do you remember that one of the earlier versions, version 3, had 23,000 plus disputed claims on it?
- A I don't remember that specific version, but I do, you know, remember a number in that ballpark.
- Q Okay. So in one of those early versions there was initially an allegation of 23,000 disputed claims. How did you and your team go about deciding which claims were going to be put in dispute on this disputed claims list, that had that many [indiscernible]?
- A Well, again, I can't remember specifically that version, and what -- like what time period that represented, so I'm a little bit handicapped in answering that question right now, not knowing specifically what that version was.
- O Okay. Well, let's do it this way. Whether it was version 1, 2, or 3, do you recall at some point there was a version that had 23,000 claims on it, give or take, right?
 - A Ballpark, yes.
- Q Okay. Using whatever version that was how did you all go about deciding which claims you were going to include on that list, and which ones you were going to take off?
- A Well, we would have started with possibly identifying who the health insurance company defendants are.
 - MR. LEYENDECKER: Your Honor, this is relevance, and to

the extent it calls for discussions with attorneys.

MR. BLALACK: I'm not asking for any communications with counsel, I'm just asking what criteria they used to develop their list that they put --

MR. LEYENDECKER: And the limine as it relates to claims at issue, Your Honor.

THE COURT: Overruled.

BY MR. BLALACK:

Q Please proceed.

A Okay. Other criteria outside of just determining who the Defendant health insurance companies were, obviously matching it up to the Plaintiff provider -- healthcare provider groups, that the claims were billed for. It would involve criteria around the dates of service, the time period for the claims that we were looking at. It would have involved only looking at claims that had been adjudicated and paid on.

And I think we also took some other steps to make sure we were excluding, you know, governmental claims, related to, you know, a person's age, to make sure they weren't like Medicare age-eligible, and also looked at the various allowed levels to make sure again, from a governmental allowable standpoint. If it was below a certain threshold we would not have included it, to make sure we weren't picking up governmental claims.

Q Okay. So if I understand your testimony, you were trying to find obviously claims that were adjudicated by one of the Defendants in the case; is that right?

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Λ	Yes.
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- Q That had been adjudicated as covered service and payable, not denied?
 - A Correct.
- Q But for a commercial member, not somebody being -- participating in the government program?
 - A Correct.
- Q And that were being reimbursed on an out-of-network basis, and an out-of-network relationship, correct?
 - A Correct.
- Q Okay. So based on that criteria you all went out, went into your claims data and did your very level best to identify the claims that met that criteria, so to provide them for purposes of discovery in the case, right?
 - A Yes.
- Q Okay. Now by the time we met for your deposition in late May, that last version, version 4, we're down to about 19,500 disputed claims. That's the one I was questioning you about on the video that you watched earlier today. Do you recall that?
 - A Yes.
- Q So sometime during this interview process, even though you all felt like you had done a good job of capturing all of the claims you wanted to contest in the case, somewhere between the third and fourth, you all decided that there were some claims on that list shouldn't be, correct?

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А	Again, I don't remember what the drivers were for the
differences	S.
Q	Whatever the drivers were, you dropped almost 3500 claims,
correct?	
А	Yes.
Q	Okay. Now subsequent to your deposition are you aware
that a new	list was created in the period of July, that reduced this
number of	19,500 to 12,500?
А	Again, I don't remember the specific number, but I do recall
it, yes, the	ere were some additional claims that were removed.
Q	Did you participate in the process of deciding which claims
that were o	originally on the 19,500 would be taken off, down to the
12,500?	
А	Again, at some point there were some guidance and
decisions b	by the attorneys about which claims to remove.
Q	Okay. Did you feel when this list was provided to us, and we
were giver	testimony on this list, you were giving testimony on this in
May, that t	his was an accurate and fulsome list of the claims you wanted
to contest	it again?
Α	Based on the information that was available to us at that
time, yes.	
Q	But subsequently in version 5, you ended up at the 12,500,
right?	
А	Yes.
Q	Okay. Now are you aware that after that list in July a new list
	differences Q correct? A Q that a new number of A it, yes, the Q that were of 12,500? A decisions b Q were given May, that t to contest A time, yes. Q right? A

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was created in August, that reduced this 12,500 to just a little over			
12,000?			
Α	I don't recall that version, no.		
Q	Did you participate in this process of reducing claims from		
the version	5 to version 6?		
А	I don't recall specifically.		
Q	Is the first time you're hearing about that?		
А	I'm just saying I don't recall.		
Q	And then, we got to the final list, the one that is Plaintiffs'		
Exhibit 473	, about which the jury has heard a lot of testimony, which		
ended up a	at 11,00, I forget the exact number, 500 and some odd claims.		
Were you i	nvolved in the decision to take another 500 claims off the list		
from version	on 6 to version 7?		
А	I don't believe I was involved with that.		
Q	Is this the first time you heard about that?		
А	No. It's not the first time I've heard about it, I still know that I		
was involved in that process.			
Q	Whether you were involved or not involved, you're aware		
that from t	he earlier versions where you had 23,000 disputed claims in		
the case, y	ou were able to cut that at about half, in the subsequent 5 or 6		
ones, correct?			
Α	Yes.		
Q	Okay. And are you confident now you seem more		
confident r	now that this 11,500 claims actually represents the claims that		

you all are really disputing in this case?

1	А	Yes.
2	Q	So there's not any of these that need to come up, like the
3	other list?	
4	А	Not that I'm aware of, no.
5	Q	Now you told Mr. Leyendecker that the process of removing
6	these clain	ns, you didn't say anything about I believe the phrase was,
7	didn't char	nge or compromise the quality of the data supporting this list
8	of claims.	Do you remember that testimony?
9	А	Yes.
10	Q	Did you have the same level of confidence in the quality of
11	the data or	n version 3, as you do on version 7?
12	А	At that time, based upon the knowledge and information we
13	had, yes.	
14	Q	What about version 4, as compared to version 7?
15	А	Again, I don't remember the details of each version.
16	Q	But you were equally confident in versions 3, 4, 5, 6 and 7, as
17	you are in	the version you have today, correct?
18	А	Based on the information we had at hand, at that time, yes.
19	Q	Now it sounds like Mr. Leyendecker asked you to do some
20	homework	, to prepare for your testimony today, by doing an analysis
21	that's beer	claims from the disputed claim's list, and looking at provider
22	remittance	advices, am I right about that?
23	А	Yes.
24	Q	Let me be clear, I just want to make sure the jury
25	Lunderstand	ds what it is you did, and how you did it. You mentioned there

mentioned there

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1	were 254 c	laims excuse me, he mentioned there were 290 claims that
2	you were a	sked to review; do you remember that?
3	А	Yes.
4	Q	Did you physically review, to provide remittance advices for
5	every one	of those claims?
6	А	I did, yes.
7	Q	Okay.
8	Α	Not every detail, but I saw the list of the entire 270 claims
9	that were r	remittance advices that were produced.
10	Q	And that's a little different question than the one I'm asking,
11	sir. So I'm	not asking you if you looked at a list that had claims
12	informatio	n on 290 claims. I'm asking whether you personally,
13	physically	pulled out a PRA, provide remittance advice for each one of
14	those clain	ns in review?
15	А	I have seen each of those remittance advices. To what extent
16	have I revi	ewed every single element of that, no, I have seen them all,
17	laid my eyes on them all, yes.	
18	Q	Okay. And these were collected by someone at your
19	direction?	
20	А	Yes.
21	Q	And who was the person?
22	А	Tylona Minci.
23	Q	Okay. You mentioned Ms. Minci a moment ago, right?
24	А	Yes.
25	Q	Did she bring those to you and say, these are the ones you

1	asked for?	
2	А	Yes.
3	Q	And then you physically went through each one?
4	А	Electronically, yes.
5	Q	Okay. Now and how many others would you say you had
6	a copy of i	n your possession?
7	А	I believe 271.
8	Q	Out of 290?
9	А	Yes.
10	Q	All right. Sir, I can I will tell you that the Defendants in this
11	case asked	for copies of all records in the possession of TeamHealth
12	about the o	disputed claims, and we received no provided
13		MR. LEYENDECKER: Your Honor
14	BY MR. BL	ALACK:
15	Q	remittance advices on those claims.
16		THE COURT: Hang on. There is an objection.
17		MR. LEYENDECKER: May we approach, Your Honor?
18		THE COURT: You may.
19		[Sidebar at 1:08 p.m., ending at 1:10 p.m., not transcribed]
20		THE COURT: The objection was sustained.
21	BY MR. BL	ALACK:
22	Q	All right. I want to talk a little bit about this sub-TIN issue, sir.
23	And I want	to make sure the jury has clarity on what it involve and who
24	was involv	ed. I think you've testified that the sub-TIN the idea to do a
25	sub-TIN re	lationship between providers associated with Fremont and the

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1	Ruby Cres	t entity; that was your idea?
2	А	Certainly
3		MR. LEYENDECKER: Cumulative, Your Honor.
4		THE COURT: It is. Is it foundational?
5		MR. BLALACK: Yes, it is.
6		THE COURT: Then overruled.
7	BY MR. BL	ALACK:
8	Q	Now, who did you direct to execute this plan?
9	А	So my recollection would have been that David Greenberg
10	and I woul	d have, you know, gave I gave ultimately, I gave David
11	Greenberg	that direction to make that happen.
12	Q	Do you recall that you and Mr. Greenberg then had
13	communic	cations with an employee named Rena Harris of TeamHealth,
14	instructing	her to implement the plan?
15	А	I can't recall if I gave direction to Rena or if I was involved in
16	that, but co	ertainly David would have. Yes.
17	Q	And Rena Harris was someone who was twice removed from
18	you. Ther	e was Mr. Greenberg was the vice president under you, and
19	then Ms. F	larris reported up to Mr. Greenberg and others at his level?
20	А	Correct.
21	Q	Now, just so the jury is clear. What this involved, this was a
22	plan that v	vas implemented beginning in 2019, January of 2019 until
23	April of 20	19, correct?
24	А	Again, I can't remember the specific date. I almost want to
25	say it ran t	through early March, but I can't remember the specific date.

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Q	Okay. And as I think you mentioned, the objective of
the what	was the goal of the sub TIN plan?

MR. LEYENDECKER: Cumulative, Your Honor. Beyond the scope.

MR. BLALACK: We covered this in his --

THE COURT: Overruled.

THE WITNESS: It was to protect against the benchmark pricing program that was going to be put in place.

BY MR. BLALACK:

- Q And the way that you all were attempting to do that was obtain reimbursement while services rendered by physicians in Clark County associated with Fremont by billing those services out through Ruby Crest's tax identification number in Elko, correct?
 - A Just through their group number, yes.
- Q Correct. And you were doing that because at the time, you all mistakenly believed there was a basis for reimbursement at 95 percent of charges at Ruby Crest?
 - A That's correct.
- Q And so the goal was if we take these services that were actually performed in Clark County, bill them out through Ruby Crest, we'll be getting reimbursed at a higher percent of charge, correct?
 - A Yes.
- Q At some point though in March, you learned to your surprise that that assumption about the 95 percent of charges was incorrect, right?

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A That's correct.
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MR. LEYENDECKER: Your Honor, this is cumulative and beyond the scope.

MR. BLALACK: I'm following up exactly on what he covered. THE COURT: Overruled.

BY MR. BLALACK:

Q And when you learned that you had made a mistake, that you weren't going to be able to be reimbursed at 95 percent of charges, it was then that you terminated the sub TIN relationship, right?

A When we didn't see a noticeable difference on how they were paying out-of-network for those claims, we made the decision to turn it off.

Q Okay. So the only reason you stopped it and the only reason it involved 254 claims is because you learned in March that you were mistaken when you believed there was a basis for being reimbursed at 95 percent of charges, right?

A Again, my recollection is just that we didn't see a difference in the processing of the out-of-network whether we used the sub-TIN or did not, and that was the reason we turned it off.

Q Because you weren't getting the payments at the levels you were hoping for, correct?

- A The levels that we thought we were due, yes.
- Q The 95 percent of charges?
 - A Again, yes.

MR. BLALACK: Now, let's look at the Plaintiffs' Exhibit 307,

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please. I don't believe this is 307. Isn't 307 the claim form?	
MR. LEYENDECKER: I thought 307 was the claim form, yes.	
MR. BLALACK: Do you have that? Plaintiffs' Exhibit 7?	
MR. LEYENDECKER: 307.	
MR. BLALACK: 307.	
MR. GODFREY: I don't believe I do.	

BY MR. BLALACK:

- Q Sir, while we're waiting for this exhibit to come through from Plaintiffs, can you tell me -- I think you said there was no advanced communication with the Defendants in the case about this arrangement, but that you had disclosed the location of where the services were provided on the claim form; am I right about that?
 - A Yes.
- Q Okay. And what you're referring to is the portion of the claim form where it literally says, "site of service"?
 - A Yes.
- Q But there was no emails, no letters, no phone calls, nothing like that to say, hey, we've got this arrangement we set up between Fremont and Ruby Crest, and we're going to be billing out services rendered in Clark County through a provider TIN in Elko. Nothing like that?
- A Again, we felt like it was adequate what we were, you know, submitting on each and every claim as far as the identification of what we were doing.
 - Q Answer my question. It's like not like that -- like I described?

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1	A	No.
2	Q	Now, on this claim form
3		MR. BLALACK: This is 307. Thank you very much.
4	BY MR. BL	ALACK:
5	Q	If you come down to the bottom, you'll see here it's got the
6	physician'	s name here, Doctor I don't know if it's Heber or Phillips.
7	And then i	t's got billing provider info on the right-hand side; do you see
8	that?	
9	А	Yes.
10	Q	And it says, "Ruby Crest Medicine." Does Dr. Heber is he
11	an employ	ee of Ruby Crest Emergency Medicine or an independent
12	contractor	of Ruby Crest Emergency Medicine?
13	А	He would be contracted directly with Fremont Emergency;
14	and then t	hrough a leasing arrangement, be contracted over to Ruby
15	Crest.	
16	Q	So the only way Doctor Phillips has any relationship at all
17	with Ruby Crest is through this leasing arrangement you described that	
18	TeamHealth set up between Fremont and Ruby Crest?	
19	А	I believe that's the primary driver of the connection, yes.
20	Q	And did Doctor Phillips know he had been leased to Ruby
21	Crest?	
22	А	No, it's not typical practice that we would discuss with our
23	doctors the	e details of the billing arrangements.
24	Q	That's not something you all share with them?
25	А	No, that's not something they generally are concerned with.

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They trust us. And, you know, proved in experienced to submit the
claims on their behalf for their services so they can focus on providing
the care they provide. They rely upon us to, you know, perform that
service for them.

- Q Sir, do you know what fields on a claim form like this are relied upon by a health plan or a health insurer to reimburse claims?
- A I can't tell you what health insurance policies are or our views about that are now.
- Q Okay. Now, you indicated that -- let me ask this. I assume you think it was entirely appropriate and proper for TeamHealth to set up the sub-TIN scheme between Fremont and Ruby Crest; is that right? That's your testimony to the jury, correct?
- A Well, I'm certainly not agreeing with you that it's a scheme. I do -- I think it's appropriate the way we set up the structure to do it, yes.
- Q Did Rena Harris, your employee, your subordinate, object to you and Mr. Greenberg about doing this?
 - A No, not to my knowledge.
- O She never told you that she thought it was inappropriate to do that?
 - A Not that I was aware of, no.
 - MR. BLALACK: All right. Thank you.
- 22 THE COURT: Any recross?
- 23 MR. LEYENDECKER: One question, Your Honor.

RECROSS-EXAMINATION

BY MR. LEYENDECKER: