

UNITED STATES DISTRICT COURT
DISTRICT OF CONNECTICUT

SAINT FRANCIS HOSPITAL AND MEDICAL
CENTER, INC.,

Case No. 3:22-cv-00050-SVN

Plaintiff,

v.

HARTFORD HEALTHCARE CORPORATION,
HARTFORD HOSPITAL, HARTFORD
HEALTHCARE MEDICAL GROUP, INC.,
INTEGRATED CARE PARTNERS, LLC,

Defendants.

**PLAINTIFF’S MOTION TO COMPEL PRODUCTION OF DOCUMENTS BY
DEFENDANTS**

Plaintiff Saint Francis Hospital and Medical Center, Inc. (“Saint Francis” or “Plaintiff”), by and through its attorneys, moves this Court to compel Defendants Hartford HealthCare Corporation, Hartford Hospital, Hartford HealthCare Medical Group, Inc., Integrated Care Partners, LLC (collectively “Defendants”) to produce documents in response to the four requests below, as narrowed and modified by Saint Francis:

11. All documents discussing whether to participate in bundled pricing arrangements.
12. All documents discussing whether to participate in the State of Connecticut employees BlueCare Prime Plus POS program.
13. All documents discussing whether to participate in the State of Connecticut Network of Distinction program.
34. All documents discussing whether to participate in the use by any health plan of financial incentives to affect choices of providers, including (a) tiered networks, (b) differentials in copayment, deductibles, or premiums, or (d) other financial payments or penalties.

Defendants have opposed producing any documents in response to these requests, even as modified, because of the Court's dismissal of Saint Francis' claims alleging harm from Defendants' interference with payors' tiering and steering programs and practices. However, these requests as modified are relevant to the remaining claims in the case, because documents responsive to them may show that (1) Defendants were opposed to such arrangements because they believed that they were high cost and/or low quality facilities (which would be disfavored under these arrangements) and (2) Defendants believed that they would be successful in preventing such arrangements from being adopted, reflecting their market power. Defendants' market power and high prices are highly relevant to Saint Francis' claims relating to physician practice acquisition and control of referrals, which were not dismissed. Moreover, based on the parties' prior investigation of search terms, the burden from production of such documents would be minimal.

The parties have met and conferred, but have been unable to resolve this dispute. *See* Exhibit 1 hereto.

This motion is further supported by the Memorandum of Law in Support of Saint Francis' Motion to Compel Production of Documents by Defendants, filed herewith.

WHEREFORE, Saint Francis Hospital and Medical Center prays the Court to order Defendants to produce documents in response to the four requests discussed above, as modified.

Date: May 12, 2023

Respectfully submitted,

/s/William S. Fish, Jr. (with permission)

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/s/David A. Ettinger

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Attorneys for Plaintiff

Exhibit 1

UNITED STATES DISTRICT COURT
DISTRICT OF CONNECTICUT

SAINT FRANCIS HOSPITAL AND MEDICAL
CENTER, INC.,

Plaintiff,

Case No. 3:22-cv-00050-SVN

v.

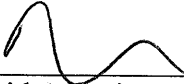
HARTFORD HEALTHCARE CORPORATION,
HARTFORD HOSPITAL, HARTFORD
HEALTHCARE MEDICAL GROUP, INC.,
INTEGRATED CARE PARTNERS, LLC,

Defendants.

**AFFIDAVIT OF DAVID ETTINGER IN SUPPORT OF PLAINTIFF'S MOTION TO
COMPEL PRODUCTION OF DOCUMENTS BY DEFENDANTS**

I, David Ettinger, having been duly sworn, depose and state as follows:

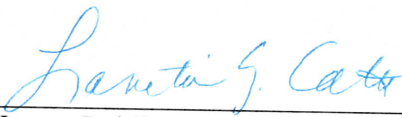
1. I am lead counsel for Saint Francis Health and Medical Center, Inc. ("Saint Francis") in the captioned matter. I have personal knowledge of the facts set forth in this affidavit.
2. I hereby certify that I have conferred with counsel for Hartford HealthCare Corporation, Hartford Hospital, Hartford HealthCare Medical Group, Inc., and Integrated Care Partners, LLC ("Defendants") in an effort in good faith to resolve by agreement the issues raised by Plaintiff's Motion to Compel Production of Documents by Defendants without the intervention of the Court. Unfortunately, we have been unable to reach such an agreement.
3. I declare under the penalty of perjury that the foregoing is true and correct. This 9th day of May, 2023.



David A. Ettinger

STATE OF MICHIGAN)
)
COUNTY OF WAYNE)

Subscribed and sworn to personally before me this 9th day of May, 2023.



Notary Public

LANITA Y. CATO
NOTARY PUBLIC, STATE OF MI
COUNTY OF OAKLAND
MY COMMISSION EXPIRES Sep 30, 2024
ACTING IN COUNTY OF *Wayne*

UNITED STATES DISTRICT COURT
DISTRICT OF CONNECTICUT

SAINT FRANCIS HOSPITAL AND MEDICAL
CENTER, INC.,

Case No. 3:22-cv-00050-SVN

Plaintiff,

v.

HARTFORD HEALTHCARE CORPORATION,
HARTFORD HOSPITAL, HARTFORD
HEALTHCARE MEDICAL GROUP, INC.,
INTEGRATED CARE PARTNERS, LLC,

Defendants.

**PLAINTIFF’S MEMORANDUM OF LAW IN SUPPORT OF ITS MOTION TO
COMPEL PRODUCTION OF DOCUMENTS BY DEFENDANTS**

I. BACKGROUND AND INTRODUCTION

Plaintiff Saint Francis Hospital and Medical Center, Inc. (“Saint Francis”) seeks an order compelling Defendants Hartford HealthCare Corporation, Hartford Hospital, Hartford HealthCare Medical Group, Inc., and Integrated Care Partners, LLC (“HHC” or “Defendants”) to produce documents in response to four requests included in Plaintiff’s First Request for Production of Documents to Defendants, *see* Exhibit A, but modified and narrowed in light of this Court’s ruling on Defendants’ Motion to Dismiss [ECF No. 42].

The four requests relate to several kinds of programs or practices intended to incentivize patients to utilize lower cost, high quality providers (referred to herein as “tiered networking programs”, the term utilized by this Court in its opinion). This Court characterized Saint Francis’ claims as follows:

Saint Francis’ allegations generally fall into two categories of allegedly anticompetitive conduct: first, HHC’s acquisition of physicians and physician practices and control over referrals, including through its exclusive contract to use an orthopedic surgery

robot; and second, HHC's refusal to participate in tiered networking programs.

[ECF No. 100 at p. 18].

This Court dismissed Saint Francis' claim for damages due to Defendants' interference with tiered networking programs, while otherwise denying Defendants' motion: "[T]he motion is granted to the extent Plaintiff claims that Defendants violated antitrust law by refusing to participate in tiered networking and other similar programs. The motion is denied in all other respects." [ECF No. 100 at p. 47].

Based on this Court's ruling, Defendants have taken the position that these four requests seek only irrelevant documents. Exhibit B¹. But while the four requests address tiered networking programs, as modified by Saint Francis, they are also, in part, relevant to Saint Francis' remaining claims, relating to physician acquisition and control of referrals. Saint Francis has modified the four requests so that they focus on issues that are relevant to the remaining claims.

The following sets forth the original requests and Saint Francis' modifications of these requests:

11. All documents ~~relating to consideration of entry into~~ discussing whether to participate in bundled pricing arrangements.

12. All documents ~~relating to~~ discussing whether to participate in the State of Connecticut employees BlueCare Prime Plus POS program, ~~including without limitation all documents relating to consideration of whether to participate in such program and all documents relating to communications to physicians concerning such program.~~

13. All documents ~~relating to~~ discussing whether to participate in the State of Connecticut Network of Distinction program, ~~including without limitation all documents relating to consideration of whether to participate in such program and all documents relating to communications to physicians concerning such program.~~

¹ Plaintiffs later withdrew their objection to the two custodians mentioned on Exhibit B.

34. ~~All documents discussing the use or proposed~~ All documents discussing whether to participate in the use by any health plan ~~(or of health plans generally or hypothetically)~~ of financial incentives to affect choices of providers, including (a) tiered networks, (b) differentials in copayment, deductibles, or premiums, or (d) other financial payments or penalties.

The first three modifications were proposed during the meet and confer process with Defendants, *see* Exhibit C, but Defendants have maintained their objections to these modified requests. Saint Francis has since modified Request 34 as well, to comport with its other modifications.

Thus, the requests as modified read as follows:

11. All documents *discussing whether to participate* in bundled pricing arrangements.

12. All documents *discussing whether to participate* in the State of Connecticut employees BlueCare Prime Plus POS program.

13. All documents *discussing whether to participate* in the State of Connecticut Network of Distinction program.

34. All documents *discussing whether to participate* in the use by any health plan of financial incentives to affect choices of providers, including (a) tiered networks, (b) differentials in copayment, deductibles, or premiums, or (d) other financial payments or penalties.

(Emphasis added).

These requests have thus been modified to seek only documents relating to Defendants' consideration of whether to participate in various forms of tiered network programs. The requests as modified no longer seek documents concerning the nature of these programs, the impact of HHC's participation decisions with respect to these programs, HHC's specific actions to interfere with these programs, or the effect of these programs or of HHC's actions with regard to these programs on competition, all topics which were covered by the original requests.

These modified requests are highly relevant to the remaining claims for two reasons. First, they seek documents relating to HHC's motivation for not participating in, and/or attempting to interfere with, tiered networking programs. Saint Francis believes that HHC took such actions because it feared that these programs, intended to reward low cost, high quality hospitals, would disadvantage HHC because of its high price and relatively low quality. Statements in the documents that directly or indirectly support that conclusion could constitute evidence that HHC or its affiliates are in fact high priced, lower quality facilities, relevant facts which are contested issues in this case. In its answer, HHC denied Saint Francis' allegations on these issues in response to ¶¶ 2, 164, 172, 173, 174, 177, 185, 189 and 192 of Saint Francis' Amended Complaint. *See* HHC Answer (Document 104).

Second, the modified requests seek documents that could reveal that Defendants expected to be successful in deterring some payors from adopting the subject practices. The ability of a firm to impose burdensome terms on third parties (such as deterring a payor from adopting an innovative program that the payor desired) is proof of market power, an element of Saint Francis' remaining claims.

Discovery based on these requests is certainly proportional to the needs of the case. The burden (reflected in the parties' previously agreed upon search terms for these requests) is trivial in the context of the discovery being conducted in this case.

Nevertheless, despite both written communications and telephone conferences between the parties, Defendants are unwilling to produce the requested documents.

II. THE MODIFIED REQUESTS ARE HIGHLY RELEVANT TO THE CLAIMS IN THIS CASE

Saint Francis' Amended Complaint illustrates the relevance of these modified requests.

First, statements in the documents that HHC did not want incentive programs to be adopted, because these programs would likely steer patients away from HHC facilities, would help establish that HHC is, indeed, higher priced, since these programs are intended to encourage utilization of lower cost providers. Amended Complaint ¶¶ 96, 100, 103, 105, 106 (Doc. No. 33). The Amended Complaint alleges that Hartford Hospital has very high prices and low quality as compared to other hospitals in the market, including Saint Francis. *Id.* ¶¶ 2, 24-25, 73. The Complaint further alleges that HHC is able to charge higher prices because of, among other things, the acquisition of physician practices and control of referrals, which enhance its market power. *Id.* ¶¶ 7, 89, 161, 172, 174, 192. The Complaint explains that these higher prices are anticompetitive, causing consumers to ultimately pay more for healthcare. *Id.* ¶¶ 1, 181. As the Complaint explains:

Because of the higher prices and lesser quality at Hartford HealthCare, any shifts in patients away from other hospitals to Hartford HealthCare as a result of Hartford HealthCare’s control of the referrals, acquisition of physicians and the other anticompetitive conduct described above results in more patients receiving care that is of lesser quality and higher priced.

Amended Complaint ¶ 198. *See also, Id.* ¶¶ 182-183.

Consistent with the Complaint, evidence of high prices or poor quality is highly relevant to proof of anticompetitive effects. Direct harm to competition can be proven by factors “such as reduced output, increased prices, or decreased quality” *Ohio v. Am. Express Co.*, 138 S. Ct. 2274, 2284 (2018) (emphasis added). *US Airways, Inc. v. Sabre Holdings Corp.*, 106 F. Supp. 3d 265, 281 (S.D.N.Y. 2015), *aff’d*, 938 F.3d 43 (2d Cir. 2019) (“forcing [purchasers] to pay above-market prices,” can be anticompetitive.) Courts recognize harm to competition where a low price competitor is eliminated, since that reduces pricing pressure on the other competitors. *See United States v. H&R Block, Inc.*, 833 F. Supp. 2d 36, 79-80 (D.D.C. 2011). *See also Saint Alphonsus Med. Ctr.—Nampa, Inc. v. St. Luke’s Health Sys., Ltd.*, No. 1:12-cv-00560 (BLW), 2014 WL

407446, at *13-14 (D. Idaho Jan. 24, 2013), *aff'd*, 778 F.3d 775 (9th Cir. 2015) (In a case challenging a physician practice acquisition by a hospital, recognizing that substantial market share would give a health system “dominant bargaining position over health plans,” leading to increased prices that the plans “will pass on to consumers in the form of higher health care premiums and higher deductibles”). This language, and Saint Francis’ allegations regarding HHC’s high prices, were quoted in this Court’s Ruling and Order in support of the Court’s conclusion that Saint Francis adequately pleaded anticompetitive conduct. [ECF 100 at 20]

Second, the Amended Complaint alleges that HHC possesses dominant market power, which has been enhanced by its acquisitions and control of referrals, the claims remaining in the case. *See e.g.*, Amended Complaint ¶¶ 6. (“As a result of its acquisitions of physician practices and other anticompetitive conduct, Hartford HealthCare has substantially increased its hospital market share to dominant levels.”), ¶ 174 (“Hartford HealthCare’s use of its physician practice acquisitions and control of referrals to shift volume away from other hospitals in the market and increase its market share has also directly enhanced its bargaining power with health plans and its ability to obtain higher rates.”) (Doc. No. 33) It also alleges that Hartford HealthCare is able to refuse to enter into innovative arrangements with payors because of its market power. *Id.* ¶ 115.

The modified requests could yield evidence showing that HHC believed that it was able to keep payors from entering into tiered networking programs, either by virtue of its nonparticipation or in other ways. Such statements would be evidence of HHC’s market power. The Supreme Court has held that market power was present when conduct brought about an “appreciable restraint,” *Northern Pac. Ry. Co. v. United States*, 356 U.S. 1, 11 (1958), or where the defendant “has the power to raise prices or impose other burdensome terms such as a tie-in, with respect to any appreciable number of buyers,” *Fortner Enters., Inc. v. United States Steel Corp.*, 394 U.S. 495,

503-4 (1969). Successful efforts to keep payors from entering into desired new and innovative arrangements to reduce prices and increase quality would certainly impose burdensome terms on those payors. Moreover, HHC's belief that it could interfere with tiered networking programs would be evidence that Defendants can exclude the enhanced competition promoted by these programs. This is significant because market power involves "the power to control prices or exclude competition." *United States v. Grinnell Co.*, 384 U.S. 563, 571 (1966). *See also In re Intel Corp. Microprocessor Antitrust Litig.*, No. 05-1717-JJF, 2007 WL 137152, at *5 (D. Del. Jan. 12, 2007). (Discovery relevant to market power permitted).

III. THE REQUESTS DO NOT IMPOSE A SIGNIFICANT BURDEN AND ARE PROPORTIONAL TO THE NEEDS OF THE CASE

This discovery is certainly proportional to the needs of the case. This is a substantial antitrust case, in which Saint Francis claims tens, if not hundreds, of millions of dollars in damages. Complaint at ¶ 88. The Amended Complaint also alleges that Defendants' activities have caused "serious harm to health care competition and consumers in the Hartford County area," Complaint ¶ 1, and have "increase[d] health care costs to health plan markets and patients" *id.* ¶ 6, "caus[ing] significant harm throughout the market. *Id.* ¶ 7. *See also Id.* ¶ 8.

The burden from responding to these four requests, as modified, is very modest. The search terms for these four requests agreed upon by the parties prior to the Court's order on the Motion to Dismiss, identify only 6,412 documents to be reviewed, of which a little over 4,000 are "unique hits", identified as responsive only because of these Requests. *See* Exhibits D and E. (Agreed upon search terms and an extract of the number of hits for the four search terms at issue.) This represents a tiny fraction of the total volume of documents (more than 800,000) each side has agreed to review to date. *See* Exhibit D. Such a minimal burden is certainly warranted here.

IV. CONCLUSION

For the foregoing reasons, this Court should compel Defendants to fully and completely respond to the requests enumerated above

Date: May 12, 2023

Respectfully submitted,

/s/William S. Fish, Jr. (with permission)

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Attorneys for Plaintiff

CERTIFICATE OF SERVICE

I hereby certify that on May 12, 2023, the foregoing was electronically filed with the Clerk of the Court using the CM/ECF system which will send notification of such filing to all counsel of record.

/s/David A. Ettinger

David A. Ettinger

**INDEX OF EXHIBITS TO PLAINTIFF’S MEMORANDUM IN SUPPORT OF MOTION
TO COMPEL PRODUCTION OF DOCUMENTS BY DEFENDANTS**

<u>Exhibit</u>	<u>Description</u>
A	Plaintiff's First Request for Production of Documents to Defendants
B	February 21, 2023 Dillickrath email to Ettinger
C	February 28, 2023 Ettinger email to Dillickrath re Request Modifications
D	February 3, 2023 Email chain confirming search terms and Search Terms Hit Report
E	Hit Report for Requests at issue

Exhibit A

UNITED STATES DISTRICT COURT
DISTRICT OF CONNECTICUT

SAINT FRANCIS HOSPITAL AND MEDICAL
CENTER, INC.,

Plaintiff,

v.

HARTFORD HEALTHCARE CORPORATION,
HARTFORD HOSPITAL, HARTFORD
HEALTHCARE MEDICAL GROUP, INC.,
INTEGRATED CARE PARTNERS, LLC,

Defendants.

Case No. 22-cv-00050

Judge Alfred Covello

Magistrate Judge Robert Richardson

**PLAINTIFF'S FIRST REQUEST FOR PRODUCTION OF DOCUMENTS TO
DEFENDANTS**

Plaintiff, Saint Francis Hospital and Medical Center, Inc., by its attorneys, Honigman LLP, and Hinckley, Allen & Snyder, pursuant to Fed. R. Civ. P. 34, request that Defendants make available copies of the documents and things described below, including all such documents in the possession, custody or control of its attorneys or such attorneys' employees, within 30 days of the date hereof, at the law offices of Honigman LLP, 660 Woodward Avenue, 2290 First National Building, Detroit, Michigan, 48226 and the law offices of Hinckley, Allen & Snyder LLP, 20 Church Street, Hartford, CT 06103.

The following instructions and definitions shall apply to each of the requests contained below:

DEFINITIONS AND INSTRUCTIONS

As used herein, the following definitions and instructions shall apply:

1. The Documents sought herein must be produced for inspection and copying within thirty (30) calendar days of receipt hereof.
2. Documents sought herein shall include all documents in your possession, custody or control and/or that can be obtained by you from your employees, administrators, officers,

commissioners, officials, agents, representatives, sureties and/or indemnitor. This request shall be deemed continuing and supplemental documents shall be required to be produced immediately if you, directly or indirectly, obtain further or different documents or information from the time documents are first produced to the time of the trial of this matter.

3. These requests require that Defendant produce electronically stored information (“ESI”) in accordance with the parties’ agreement on the discovery of electronically stored information.

4. Documents attached to each other must not be separated.

5. If any document responsive to a request no longer exists, but you have reason to believe that the document existed at one time, state the circumstances under which the document was lost or destroyed.

6. If any documents are withheld from production based on a claim of privilege, provide for each such document a statement of the claim of privilege and all facts relied on in support thereof, including the document's author(s), addressee(s), date, title, subject matter, all recipient(s) of the original and of any copies, its present location(s), and the requests to which the document is responsive. For each author, addressee, and recipient, state the person's full name, title, and employer or firm, and denote all attorneys with an asterisk. For each document withheld under a claim that it constitutes or contains privileged attorney work product, also state whether You assert that the document was prepared in anticipation of litigation or for trial and, if so, identify that litigation. Submit all non-privileged portions of any responsive document claimed to be privileged.

7. The “Relevant Period” includes January 1, 2016 to present. Unless otherwise stated, these document requests are limited to all documents generated during, or applicable to, the Relevant Period. All such documents should be produced.

8. The term “computer files” means any information, including, without limitation, data and software, stored in or accessible through any computer or other information retrieval system, together with all instructions and other materials necessary to use or interpret such documents, but does not include archived documents, voicemails or text messages.

9. The terms “relate to” or “relating to” mean constitute, consist of, discuss, refer to, reflect on, arise out of, or be in any way or manner, directly or indirectly, in whole or in part, legally, factually, or logically connected with the matter discussed.

10. The singular form of any word shall be deemed to include the plural, and vice versa.

11. The term “including” shall mean “including but not limited to.”

12. The terms “and” and “or” shall be construed both conjunctively and disjunctively.

13. The terms “every,” “each,” “any,” or “all” mean each and every.

14. “Reports” include both paper and electronic reports, including without limitation, electronic reports which can be generated by your computer systems or applications.

15. A reference to employment or employees in connection with physicians shall also include physicians subject to professional services agreements and any other affiliations.

16. The “Relevant Area” includes Hartford County. Requests that reference the Relevant Area seek only documents relating in whole or in part to activities in Hartford County.

17. The term “Acquisition” includes (a) the acquisition of assets by, or lease of assets to, Hartford HealthCare from, or joint venture with, a physician practice; (b) a contract to operate

a physician practice; (c) the affiliation or employment by Hartford HealthCare of any physicians or clinical staff formerly or currently affiliated with, or employed by, a physician practice or healthcare facility formerly independent from Hartford HealthCare; and (d) all agreements entered into by Hartford HealthCare concurrently with, or in any way connected to, agreements to acquire, contract with, or otherwise affiliate with any provider. The term “Acquisition” includes not only past or consummated acquisitions but also pending or planned acquisitions, and includes all transactions involving one or more of the elements above.

18. The terms “You”, “Your” and “Hartford HealthCare” include, individually and collectively, Hartford HealthCare Corporation, and its and their parents, subsidiaries, affiliates, hospitals, clinics, other health care facilities, physician practice groups (and including Hartford Hospital, Hospital of Central Connecticut, ICP and Hartford HealthCare Medical Group), predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

19. The term “ICP” includes, individually and collectively, Integrated Care Partners, LLC, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity

20. The term “Hartford Hospital” includes, individually and collectively, Hartford Hospital, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice

groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

21. The term “Hospital of Central Connecticut” includes individually and collectively, Hospital of Central Connecticut, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

22. The term “Hartford HealthCare Medical Group” includes, individually and collectively, Hartford HealthCare Medical Group, Inc, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

23. The term “Saint Francis” includes, individually and collectively, Saint Francis Hospital and Medical Center, Inc., and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

24. The term “SoNE” includes, individually and collectively, Southern New England Health Care Organization, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

25. The term “Bristol Hospital” includes, individually and collectively, Bristol Hospital, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

26. The term “Manchester Memorial” includes, individually and collectively, Manchester Memorial Hospital, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

27. The term “UConn John Dempsey Hospital” includes, individually and collectively, University of Connecticut John Dempsey Hospital, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees,

consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

28. The term “Middlesex Cardiology” includes, individually and collectively, Middlesex Cardiology, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

29. The term “Cottage Grove Cardiology” includes, individually and collectively, Cottage Grove Cardiology, and its and their parents, subsidiaries, affiliates, hospitals, clinics, physician practice groups, predecessors and/or successors, if any, and its and their current and/or former representatives and employees; and any person acting on its or their behalf and also includes all officers, directors, employees, consultants, attorneys, authorized agents and/or all other persons acting or purporting to act on behalf of any such entity.

30. If you are unable to respond to a request, you should so state and should:

- (a) State why you are unable to respond to a request;
- (b) Identify the source, if any, from which responsive information can be obtained; and
- (c) Produce as much responsive information as you are able.

31. For all databases or other data compilations submitted in response to this Request for Documents, provide all instructions and documentation, including data dictionaries, reasonably necessary to use or interpret such databases or data compilations.

32. Identify all search terms utilized in connection with review of documents for production pursuant to this request, and all custodians whose documents were searched pursuant to this request. The custodians whose documents are to be searched should include, among others, all individuals identified in Defendants' Initial Disclosures.

33. This Request incorporates by reference all definitions and procedures in the District's Standing Order and in the Stipulation and Proposed Order Regarding Protocol for Discovery in this case.

DOCUMENT REQUESTS

1. All documents relating to any comparison between any rates, charges, reimbursement or margins at (a) Hartford Hospital, Hospital of Central Connecticut or Hartford HealthCare Medical Group physicians and (b) any other hospital or group of hospitals.

ANSWER:

2. All documents relating to the Rand Corporation study concerning hospital rates.

ANSWER:

3. Documents sufficient to show changes in average reimbursement rates paid (both overall and adjusting for case mix) for each managed care plan (by product) with which You contract from 2015 to the present separately by year.

ANSWER:

4. Documents sufficient to show rates paid to Hartford Hospital, Hospital of Central Connecticut or Hartford HealthCare Medical Group physicians by any managed care payor.

ANSWER:

5. All documents relating to any actual or considered termination, departicipation, withdrawal or nonrenewal of a contract with any payors or health plans, or the threat or communication of any such actual or possible actions.

ANSWER:

6. All documents evidencing or relating to Your negotiations with Anthem, Aetna, United, Cigna or ConnectiCare, excluding any documents relating only to billing or billing disputes, including all communications relating to rates.

ANSWER:

7. A complete set of contracts, including all extensions, all attachments to and modifications of such contracts, between each of Hartford Hospital, Hartford HealthCare, Hospital of Central Connecticut, Hartford HealthCare Medical Group, or ICP on the one hand, and Anthem, Aetna, Cigna, United or ConnectiCare on the other hand.

ANSWER:

8. All plans or reports addressing managed care negotiation strategy, relating to, in whole or in part, Your hospitals or other facilities in the Relevant Area.

ANSWER:

9. All documents discussing whether or not Hartford HealthCare facilities or ICP should enter into risk contracts, including without limitation any documents relating to the advantages or disadvantages of risk contracting and any documents involving calculations relating to actual or potential risk contracting.

ANSWER:

10. All documents relating to SoNE.

ANSWER:

11. All documents relating to consideration of entry into bundled pricing arrangements.

ANSWER:

12. All documents relating to the State of Connecticut employees BlueCare Prime Plus POS program, including without limitation all documents relating to consideration of whether to participate in such program and all documents relating to communications to physicians concerning such program.

ANSWER:

13. All documents relating to the State of Connecticut Network of Distinction program, including without limitation all documents relating to consideration of whether to participate in such program and all documents relating to communications to physicians concerning such program.

ANSWER:

14. All documents relating to comparisons and/or differences in quality or in any quality metrics at:

- (d) Hartford Hospital or Hospital of Central Connecticut; and
- (e) Any other hospital or group of hospitals.

ANSWER:

15. All documents relating to any assessments of the quality or safety of care provided by Your hospitals or physicians in the Relevant Area, including all documents related

to: data or reports submitted by You or received from quality or safety rating organizations; or quality measurements or benchmarking.

ANSWER:

16. All documents relating to Hartford Hospital's Leapfrog safety scores or results.

ANSWER:

17. Annual financial statements (including income statements) for Hartford Hospital, Hospital of Central Connecticut and Hartford HealthCare Medical Group.

ANSWER:

18. All financial analyses with respect to Hartford HealthCare Medical Group, including without limitation analyses of profits or losses or analyses of the contribution to hospital or other facility volumes, profits or revenues by Hartford HealthCare Medical Group or physicians in Hartford HealthCare Medical Group.

ANSWER:

19. All analyses, studies or reports relating to consumer preferences for healthcare facilities or providers in the Relevant Area, including without limitation all patient or customer surveys and focus group studies.

ANSWER:

20. All documents relating to any consultants' analyses, studies or recommendations relating in whole or in part to competition in Hartford County.

ANSWER:

21. All documents relating in whole or in part to competition among hospitals, physicians or physician groups, hospital service lines, networks, health insurance or managed care in the Relevant Area, including all market studies, forecasts, SWOT analyses, consultants' reports, competitive or environmental assessments and surveys, including all documents relating to:

- (a) The market shares, strengths or weaknesses, opportunities or threats faced by, or competitive positions of, Hartford Hospital, Hospital of Central Connecticut, ICP, Hartford HealthCare Medical Group, any other Hartford HealthCare facilities, any physicians or physician groups, or any other hospital or any other facility;

- (b) The geographic areas in which Your facilities compete, including but not limited to references to service areas, patient origin, or patient flow (based on patient ZIP codes or otherwise); or
- (c) The relative strength or weakness of any hospitals, other facilities, physicians or physician groups.

ANSWER:

22. All medical staff plans, and all business plans, strategic plans and marketing plans relating to (in whole or in part) Hartford Hospital, Hospital of Central Connecticut, ICP or Hartford HealthCare Medical Group.

ANSWER:

23. All documents relating to Saint Francis, Bristol Hospital, UConn Dempsey, or Manchester Memorial, including documents relating to patient admissions, membership of physicians on the hospitals' medical staffs, physician referrals, physician alignment or loyalty, or financial condition, strengths or weaknesses.

ANSWER:

24. All business plans, strategic plans and competitive assessments relating to Care Partners of Connecticut, and all documents discussing the possible formation of Care Partners of Connecticut.

ANSWER:

25. All business plans, service line plans and other plans relating in whole or in part to Hartford Hospital, Hospital of Central Connecticut, ICP, Hartford HealthCare Medical Group, cardiology, cardiac surgery, oncology or orthopedics.

ANSWER:

26. All business plans and strategic plans relating to the Bone and Joint Institute.

ANSWER:

27. All documents relating in whole or in part to the possible acquisition of Eastern Connecticut Health Network.

ANSWER:

28. Documents sufficient to show for each of Hartford Hospital and Hospital of Central Connecticut (separately):

- (a) For each year, total patient days, patient discharges, inpatient gross revenue and inpatient net revenue;
- (b) For each year, outpatient visits, outpatient gross revenue and outpatient net revenue;
- (c) The total number of licensed, available and staffed beds on the first day of each year, and the average daily census for each year;
- (d) For each year, separately for inpatient and outpatient services, the dollar amount of each hospital's revenues received and the number of inpatients, inpatient days and outpatient treatment episodes, broken out separately by each of the following principal sources of payment: (i) Medicare; (ii) Medicare Advantage; (iii) Medicaid; (iv) other health plan (separately for each); (v) patients (out of pocket); (vi) no source of payment (charity care patients treated for free of charge); (vii) bad debt; and (viii) any other source.

ANSWER:

- 29. Documents sufficient to show:
 - (a) Separately for each inpatient admission at each of Hartford Hospital and Hospital of Central Connecticut (separately) during the Relevant Period: admitting, attending and primary care physician, attending and admitting physician specialty, payments, direct costs, contribution margin, date of

admission and discharge, service line descriptions, patient zip code and DRG.

- (b) Separately for each outpatient visit at each Hartford HealthCare facility in Hartford County during the Relevant Period, admitting, attending and primary care physician, attending and admitting physician specialty, payment, direct costs, contribution margin, date of admission, service line descriptions, patient zip code and CPT or other procedure codes; and identity of facility.

ANSWER:

30. Documents sufficient to show the number of patients or cases, from January 1, 2019, by physician, which any physician has admitted, referred to, acted as attending physician for, or otherwise treated at, each Hartford HealthCare hospital or other facility in the Relevant Area.

ANSWER:

31. Documents sufficient to identify (separately) all physicians (by name, location and specialty) for each year in the Relevant Period:

- (a) Employed by You and practicing (in whole or in part) in the Relevant Area; or

- (b) Serving on the active medical staff of (a) Hartford Hospital or (b) Hospital of Central Connecticut

including for each such physician:

- (i) The physician's medical specialty, sub-specialty, and board certifications; and
- (ii) The physician's professional license number, or any other uniform physician identification number and any professional identification number used for reimbursement.

ANSWER:

32. All documents relating to numbers of physician by specialty, either in total or by employer, practicing in (in whole or in part) the Relevant Area.

ANSWER:

33. Documents sufficient to show ICP's physician roster for each year within the Relevant Period.

ANSWER:

34. All documents discussing the use or proposed use by any health plan (or of health plans generally or hypothetically) of financial incentives to affect choices of providers, including

(a) tiered networks, (b) differentials in copayment, deductibles, or premiums, or (d) other financial payments or penalties.

ANSWER:

35. All documents relating to Your policies, procedures or practices concerning the referral of patients for hospitalization or for inpatient or outpatient treatment, including all documents relating to policies, instructions, guidance, reports, recommendations, questions, incentives or suggestions with respect to referrals; all communications to particular physicians relating to referrals; all documents relating to physician admission or referral patterns; and all tabulations, calculations, summaries, discussions and analyses of referrals, but excluding any documents relating only to individual patient referrals.

ANSWER:

36. All documents relating to methods or measures of physician compensation, including criteria for payment and all documents setting forth communications to physicians relating to criteria for payment.

ANSWER:

37. All documents relating to use of the EPIC system to monitor physician referrals or any other aspect of physician behavior or performance.

ANSWER:

38. Documents sufficient to show the fields, ordering instructions and menus for any electronic ordering systems to the extent applicable to referrals for specialty physicians or for particular facilities or services, whether contained in an electronic medical records system or elsewhere.

ANSWER:

39. With respect to each of Drs. Peter Byeff, Brian Byrne, Jason Chang, David Hosmer, Joseph Sinning, Joerg Rathmann, Patricia DeFusco, Aneesh Tolat, Sabeena Arora, Joseph Ingrassia, David Casey, Muzibul Chowdhury, Marko Lujic, Vladimir Daoud, Kimberly A. Caprio, Bret M. Schipper, Niamey Wilson, Maame Dankwah-Quansah, Barry J. Gordon, Arzu Demirci, Saira Rani, Patricia Lampugnale, Ulysses Wu, Paul Anthony, Ramkumar Sankaran, Martin Keibel, Jesse Eisler, Michael Aron, Steven Selden, Shishir Mathur, Patrick Senatus, Darshan Shah, Gayethri Narayanswamy or Narinder Maheshwari, the physicians in Middlesex Cardiology or the physicians currently or previously practicing at Cottage Grove Cardiology, and/or their physician practices, documents sufficient to show admissions at or referrals to any Hartford HealthCare facility by each such physician or physician group for each year from 2016 to present.

ANSWER:

40. All documents relating to policies, procedures or practices concerning trauma case referrals to any hospital.

ANSWER:

41. All documents relating to the effect on physician referrals, referrals to any of Your hospitals or other facilities, or admissions at any of Your hospitals or other facilities of:

- (a) Any actual or proposed Acquisition in the Relevant Area; or
- (b) Any actual or contemplated plan, strategy, practice or course of action with regard to physician Acquisitions.

ANSWER:

42. All documents relating to ICP's referral policy or network engagement strategy.

ANSWER:

43. All documents relating to or constituting physician scores, score cards, report cards, reports, or incentives for physicians belonging to ICP.

ANSWER:

44. All documents relating to including or not including particular physicians or physician groups as eligible for reimbursement for on-call services, excluding documents relating only to payments to specific physicians for such services.

ANSWER:

45. All documents relating to including or not including particular physicians or physician groups as eligible for reimbursement for nuclear medicine test review, excluding documents relating only to payments to specific physicians for such services.

ANSWER:

46. All documents relating to including or not including particular physicians or physician groups as eligible for reimbursement for echocardiogram review, excluding documents relating only to payments to specific physicians for such services.

ANSWER:

47. All presentations, agendas, minutes of meetings, summaries, and hand-outs relating to or presented to any management committee, executive committee, board of directors or trustees, other governance committee or any group or committee with similar responsibilities including responsibility for physician-hospital relationships, physician recruitment, strategic or

business planning, or for reviewing contracts with health insurers or reimbursement or fee schedules.

ANSWER:

48. All projections, pro formas, forecasts, business plans, calculations of hospital or physician cases, revenues or profitability or calculations of value or fair market value, relating to Cottage Grove Cardiology, Middlesex Cardiology or any of Drs. Peter Byeff, Brian Byrne, Jason Chang, David Hosmer, Joseph Sinning, Joerg Rathmann, Patricia DeFusco, Aneesh Tolat, Sabeena Arora, Joseph Ingrassia, David Casey, Muzibul Chowdhury, Marko Lujic, Vladimir Daoud, Kimberly A. Caprio, Bret M. Schipper, Niamey Wilson, Maame Dankwah-Quansah, Barry J. Gordon, Arzu Demirci, Saira Rani, Patricia Lampugnale, Ulysses Wu, Paul Anthony, Ramkumar Sankaran, Martin Keibel, Jesse Eisler, Michael Aron, Steven Selden, Shishir Mathur, Patrick Senatus, Darshan Shah, Gayethri Narayanswamy or Narinder Maheshwari and/or their physician practices.

ANSWER:

49. All documents relating to any actual or potential effects on competition, competitors, revenues, return on investment, market share, hospital volumes, service line volumes, admissions or discharges, reimbursement rates or managed care relationships of:

- (a) Any actual or proposed Acquisition in the Relevant Area;
- (b) Any group or series of Acquisitions;

- (c) Any actual or contemplated plan, strategy, practice or course of action with regard to physician Acquisitions or employment of physicians;
- (d) Any policies, practices or procedures with regard to referrals;
- (e) Marketing, community outreach, sponsorship, advertising or communications efforts, either collectively or individually;
- (f) Construction of additional facilities or expansion of facilities;
- (g) Employment of physicians who had not previously been in private practice in Hartford County;
- (h) Establishment of the Bone & Joint Institute; or
- (i) Purchases of ambulatory surgery centers.

ANSWER:

50. Documents (except documents solely relating to environmental, tax, human resources, OSHA or ERISA issues) sufficient to identify any prior, pending, or potential Acquisition, or any Acquisition that was considered, evaluated or discussed by Defendants, including, for each such Acquisition:

- (a) Documents sufficient to show any transactions, agreements or understandings, between Hartford HealthCare and the other party to any such transaction (e.g. seller, lessor, or other contracting party) that were entered into or negotiated concurrent with or in connection with such transaction, including without limitation all contracts or agreements, non-competition provisions, agreements regarding consideration for assets or

goodwill, side-letters, and any other documents reflecting any understandings and any letters with specific individuals; and

- (b) All documents relating to the value, benefits, costs, advantages or disadvantages of any such transaction.

ANSWER:

51. For each Acquisition, documents sufficient to describe in detail:

- (a) The assets acquired, including any valuation of those assets, and business structure of the acquired firm (e.g. corporation, partnership);
- (b) The identity of each physician and mid-level provider who affiliated with or was employed by Hartford HealthCare as a result of or in connection with the Acquisitions; and
- (c) Any documents relating to any actual or projected effects of any such Acquisition on patient volumes, admissions, competition, competitors, revenues, or on any other hospital, including Saint Francis.

ANSWER:

52. All documents relating to consideration of the Acquisition of Middlesex Cardiology or Cottage Grove Cardiology.

ANSWER:

53. With respect to each Acquisition, produce documents sufficient to identify:
- (a) Non-physician staff working for the physician's prior practice who were hired by You.
 - (b) Any interests in buildings relating to the physician's prior practice which were acquired by You.
 - (c) Any equipment relating to the physician's prior practice which was acquired by You.
 - (d) Any furnishings or fixtures relating to the physician's prior practice which were acquired by You.
 - (e) Any patient lists and patient records relating to the physician's prior practice which were transferred to You.
 - (f) Any billing and payment records relating to the physician's prior practice which were transferred to You.
 - (g) Any accounts receivable relating to the physician's prior practice which were acquired by You.
 - (h) Any accounts payable relating to the physician's prior practice which were assumed by You.

ANSWER:

54. All documents referring to or discussing costs or difficulties (including length of time required) in connection with recruiting of physicians.

ANSWER:

55. All documents that discuss or reference Your reasons and/or strategies for employing physicians that were already practicing in the Relevant Area rather than recruiting new physicians from outside of the Relevant Area to practice in the Relevant Area.

ANSWER:

56. All documents related to actual or possible physician targets for acquisition, employment or affiliation within the Relevant Area.

ANSWER:

57. All documents referring to antitrust concerns or the antitrust laws as applicable to any actual or possible Acquisitions.

ANSWER:

58. Documents sufficient to show the identity of each physician from Middlesex Cardiology Group or Cottage Grove Cardiology Group who joined Hartford HealthCare Medical Group.

ANSWER:

59. All documents relating to decisions concerning the geographic placement of physician clinics.

ANSWER:

60. All contract templates, standard contracts or forms of contract between ICP and physician members or between Hartford HealthCare Medical Group and employed physicians.

ANSWER:

61. Produce complete organizational charts for each of the Defendants, including organizational charts sufficient to show leadership at each of Hartford Hospital and Hospital of Central Connecticut at the service line level, as well as at the Vice President and Director level for all Defendants.

ANSWER:

62. Documents sufficient to show all physician medical director positions or similar positions at Hartford Hospital or Hospital of Central Connecticut that existed at any time during the Relevant Period, including without limitation, for each such position, title, duties,

responsibilities, activities undertaken, compensation, and the identity of any physicians who serve or have served in any such positions.

ANSWER:

63. All documents relating to the creation of medical director or similar positions, the determination of compensation for such positions, of the offering of such positions to particular physicians.

ANSWER:

64. All documents relating to Your policies, procedures or practices concerning whether to perform orthopedic procedures on an inpatient or outpatient basis.

ANSWER:

65. All documents relating to Your purchase of the Mako robot, including all documents relating to exclusivity or the unavailability of the Mako robot to other hospitals and all documents relating to the benefits from such exclusivity.

ANSWER:

66. All documents relating to marketing or advertising involving the Mako robot.

ANSWER:

67. All pro formas, projections and forecasts relating to the purchase and/or use of the Mako robot.

ANSWER:

68. All documents discussing the Mako robot and its relationship to physician recruitment, retention or the acquisition of physician practices.

ANSWER:

69. All documents relating to the investigation of Hartford HealthCare by the Antitrust Division of the Department of Justice, including without limitation all documents produced to the Department of Justice.

ANSWER:

70. All documents relating to or referring to communications with Starling Medical Group.

ANSWER:

71. All forecasts, projections and budgets relating to (in whole or in part) Hartford Hospital, Hospital of Central Connecticut, or Hartford HealthCare Medical Group.

ANSWER:

72. All marketing plans relating to (in whole or in part) Hartford Hospital, Hospital of Central Connecticut, Hartford HealthCare Medical Group, or facilities in Hartford County.

ANSWER:

73. All analyses of fair market value in connection with the potential employment of physicians or purchase of physician practices.

ANSWER:

74. All documents discussing Your procedures or policies relating to integration of physicians.

ANSWER:

Date: April 25, 2022

Respectfully submitted,

/s/ William S. Fish, Jr.
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/s/ David A. Ettinger

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Attorneys for Plaintiffs

CERTIFICATE OF SERVICE

I hereby certify that on April 25, 2022, the foregoing was electronically served to all counsel of record.

By: s/David A. Ettinger
David A. Ettinger (P26537)

Exhibit B

From: Thomas Dillickrath <TDillickrath@sheppardmullin.com>
Sent: Tuesday, February 21, 2023 9:55 AM
To: Ettinger, David A.; Fabien, Paul L.
Cc: Stephen Weissman; Eric J. Stock; Leo Caseria; Joseph Antel
Subject: Discovery following MTD ruling

[EXTERNAL EMAIL]

David--Following up on our call last week, in light of the Court's ruling on our Motion to Dismiss, we request that you withdraw Requests 11, 12, 13, and 34 from your April 25, 2022 Requests for Production as well as the associated search terms. In addition, we request that you remove Patricia Hasselman and David Zinkerman from your list of custodians.

These Requests and their corresponding search terms are directly related to the issues dismissed by the Court, and are unlikely to result in the production of information relevant to the remaining issues in this case. Given their roles at HHC, these custodians' documents are similarly unlikely to be of relevance to the remaining issues in this case. Given the lack of relevance, removal of these search terms and custodians will only serve to make discovery more efficient for both parties, and avoid significant and unnecessary burden.

Please let us know if you agree.

Tom

Sent from my iPhone

Attention: This message is sent by a law firm and may contain information that is privileged or confidential. If you received this transmission in error, please notify the sender by reply e-mail and delete the message and any attachments.

Exhibit C

From: Ettinger, David A. <DEttinger@honigman.com>
Sent: Tuesday, February 28, 2023 2:32 PM
To: Thomas Dillickrath; Joseph Antel; Leo Caseria; Stephen Weissman; Eric J. Stock; Fabien, Paul L.; William Fish, Jr.
Subject: Proposal re withdrawn requests
Attachments: 47100556v1_Requests 11, 12, 13, 34 from Plaintiff's First Request for Documents - 47100556v4_Requests 11, 12, 13, 34 from Plaintiff's First Request for Documents.pdf

We propose that the four requests you have identified (11-13 and 34) be modified and narrowed, not eliminated, per the attached. They are relevant to market power, among other things.

The two managed care custodians you have identified should have documents responsive to a wide variety of other requests, including, among others, Requests 1-6 and 8-9. So even if the four requests at issue were completely eliminated, that would not justify eliminating these individuals as custodians.

We could modify the search terms applicable to Requests 11-13 and 34, but given the very few hits that they generate, this seems unnecessary.

We have no comment on the requests to Saint Francis that you propose to eliminate. Most have nothing to do with the dismissed claims. I assume you have included them to reduce the number of hits from your search terms.

David A. Ettinger

HONIGMAN LLP

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**Honigman celebrates 75 years of service
1948 - 2023**

This e-mail may contain confidential or privileged information. If you are not the intended recipient, please delete it and notify the sender of the error.

Requests 11, 12, 13, 34 from Plaintiff's First Request for Documents

11. All documents ~~relating to consideration of entry into~~ discussing whether to participate in bundled pricing arrangements.

12. All documents ~~relating to~~ discussing whether to participate in the State of Connecticut employees BlueCare Prime Plus POS program, ~~including without limitation all documents relating to consideration of whether to participate in such program and all documents relating to communications to physicians concerning such program.~~

13. All documents ~~relating to~~ discussing whether to participate in the State of Connecticut Network of Distinction program, ~~including without limitation all documents relating to consideration of whether to participate in such program and all documents relating to communications to physicians concerning such program.~~

34. ~~All documents discussing the use or proposed~~ Documents sufficient to show the use by any health plan ~~(or of health plans generally or hypothetically)~~ of financial incentives to affect choices of providers, including (a) tiered networks, (b) differentials in copayment, deductibles, or premiums, or (d) other financial payments or penalties.

Document comparison by Workshare Compare on Tuesday, February 28, 2023
11:29:17 AM

Input:	
Document 1 ID	interwovenSite://HMSCDMS/ACTIVE/47100556/1
Description	#47100556v1<ACTIVE> - Requests 11, 12, 13, 34 from Plaintiff's First Request for Documents
Document 2 ID	interwovenSite://HMSCDMS/ACTIVE/47100556/4
Description	#47100556v4<ACTIVE> - Requests 11, 12, 13, 34 from Plaintiff's First Request for Documents
Rendering set	Standard

Legend:	
Insertion	
Deletion	
Moved from	
Moved to	
Style change	
Format change	
Moved deletion	
Inserted cell	
Deleted cell	
Moved cell	
Split/Merged cell	
Padding cell	

Statistics:	
	Count
Insertions	7
Deletions	12
Moved from	2
Moved to	2
Style change	0
Format changed	0
Total changes	23

Exhibit D

From: Thomas Dillickrath <TDillickrath@sheppardmullin.com>
Sent: Friday, February 3, 2023 2:18 PM
To: Ettinger, David A.
Cc: Joseph Antel; Fabien, Paul L.; Burandt, Nicholas A.; wfish@hinckleyallen.com; jmirman@hinckleyallen.com; amillinger@hinckleyallen.com; Weissman, Stephen; Stock, Eric J.; France, Jamie; Obear, Joshua; Staib, Karen; Fahey, Patrick; Leo Caseria
Subject: Re: St. Francis v. Hartford HealthCare

[EXTERNAL EMAIL]

Confirmed.

Sent from my iPhone

On Feb 3, 2023, at 2:05 PM, Ettinger, David A. <DEttinger@honigman.com> wrote:

Though we think there is some duplication in here, and will respond further on that, we believe that this is a reasonable number of hits, and would like you to commence the review of the documents using these search terms.

David A. Ettinger
Leader, Antitrust & Trade Regulation Practice Group

HONIGMAN LLP
O 313.465.7368
M 248.737.0923
dettinger@honigman.com

**Honigman celebrates 75 years of service
1948 - 2023**

From: Joseph Antel <JAntel@sheppardmullin.com>
Sent: Monday, January 30, 2023 4:15 PM
To: Fabien, Paul L.
Cc: Thomas Dillickrath; Burandt, Nicholas A.; wfish@hinckleyallen.com; jmirman@hinckleyallen.com; amillinger@hinckleyallen.com; Weissman, Stephen; Stock, Eric J.; France, Jamie; Obear, Joshua; Staib, Karen; Fahey, Patrick; Leo Caseria; Ettinger, David A.
Subject: RE: St. Francis v. Hartford HealthCare
Attachments: 20230130_SF v. HHC_Plaintiff_Terms (v.7).xlsx

[EXTERNAL EMAIL]

Paul—See attached for a revised hit report. Note that, per my January 20 email, due to the way that searches have been structured, populating hits with families on a search term level is a time-consuming, manual process. To avoid delay, we have provided the attached report without family counts at the individual search term level. You can see total hits plus families in the summary tab, however. We can generate hits plus families on a search term level if requested, but be aware that it may take some time.

Joseph Antel

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JAntel@sheppardmullin.com | [Bio](#)

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Project Medic - Plaintiff Terms (v.7)

	Total Hits	Total Hits (with family)
All Documents Terms	210,310	643,739
Attachments + Loose Files Terms	93,076	365,575
Metadata Terms	33,940	46,904
Combined Totals	294,626	854,107

Request No.	Name	Documents with hits	Unique hits
1	((rate* OR price* OR reimb* OR pricing) W/10 (benchmark* OR compar* OR "Saint Francis" OR "St Francis" OR Fran OR Trinity OR SoNE)) w/20 ("Hartford Hospital" OR HOC OR HH OR ICP OR Central)	3,113	1,535
2	(rand w/100 rate*)	617	347
5	((term* OR depar OR departic* OR cancel* OR (renew w/3 not*)) w/10 (United OR UH OR UHC OR Cigna OR Aetna OR Anthem OR BC OR Blues OR BCBS OR Connecticutcare)) w/20 ("Hartford Hospital" OR "medical group" OR HHC MG OR HOC OR HH OR Central)	2,678	1,566
6	((United OR UH OR UHC OR Cigna OR Aetna OR Anthem OR BC OR Blues OR BCBS OR Connecticutcare) w/10 (reimburse* OR rate*)) w/20 ("Hartford Hospital" OR HOC OR HH OR Central) AND (increase* OR high* OR greater)	3,489	2,375
8.2	((strateg* OR plan) w/5 ("managed care" OR reimb* OR negot* OR payer* OR payor) w/10 xfirstword) AND ("Hartford Hospital" OR HOC OR HH OR Central)	138	56
9	(risk OR capitat* OR (percent w/3 premium)) w/5 (weakness* OR refus* OR decline* OR cost* OR unprofit* OR loss*) w/20 ("Hartford Hospital" OR HC OR HH OR Central OR ICP)	2,133	993
10	(SoNE OR "Southern New England" OR (Francis w/5 partners)) w/30 (market OR "market share" OR compet* OR threat* OR weakness* OR poach OR take OR acquire OR employ OR capture OR shift OR recruit OR hire OR switch OR Starling OR CMG OR "Grove Hill" OR risk* OR recruit* OR BDC OR "balanced score card" OR "balanced scorecard" OR strength* OR opportunit* OR network OR roster OR domin* OR scale OR panel)	4,268	1,798
10.1	(SoNE OR (Francis w/3 partners) w/10 xfirstword)	35	1
11	(bundle* w/10 (UH OR UHC OR Cigna OR Aetna OR Anthem OR BC OR Blues OR BCBS OR Connecticutcare)) w/20 ("Hartford Hospital" OR HC OR HH OR Central OR ICP)	313	147
12	((Prime OR POS) w/20 (Anthem OR BC OR Blue OR BCBS)) w/20 (strateg* OR plan* OR threat* OR prevent* OR agree OR reject* OR harm OR partic* OR refus* OR decline* OR stop*) AND (State OR Conn*)	4,144	3,026
13	((network w/3 distinction) AND (state OR Conn*)) w/100 (strateg* OR plan OR agree* OR threat* OR prevent* OR refus* OR decline* OR compet* OR stop* OR unprofit*)	641	405
14	((quality OR safety OR outcome* OR mortality OR morbidity OR complications OR readmission* OR CMS OR star) w/10 (benchmark OR compar* OR "Saint Francis" OR "St Francis" OR Fran OR Trinity OR SoNE OR (Francis w/5 partners))) w/20 ("Hartford Hospital" OR HOC OR HH OR Central)	3,486	1,843
15	((quality OR safety) w/10 xfirstword) AND (outcome OR mortality OR morbidity OR complications OR readmission*) w/20 (weakness OR shortfall OR defici* OR high OR low OR grade OR score OR improve* OR excess) AND ("Hartford Hospital" OR HOC OR HH OR Central)	11,105	10,049
18	((revenue* OR admission* OR discharge* OR profit) w/10 (HHC MG OR "HHC Medical Group" OR "medical group")) w/10 (hospital OR HOCC OR "central Conn*" OR HH OR "Hartford Hospital") AND (contribut* OR generate* OR add* OR increase* OR grow* OR refer*)	3,809	1,853
21.4	((compet*) w/10 (cardiothoracic OR heart OR card* OR neuro OR ortho* OR oncol* OR cancer OR asc* OR surgery)) w/20 ("Hartford Hospital" OR Central OR HOCC OR central Conn* OR Central Region OR Medical Group OR HHC MG OR HHC Medical Group)	3,863	937
21.5	(weak* OR damage OR loss* OR target OR prevent OR opportunity OR harm OR beat OR capture OR injure) w/10 ("St Francis" OR "Saint Francis" OR Fran OR Trinity OR SoNE OR "Bristol Hospital" OR Dempsey OR UConn OR "Manchester Memorial")	17,336	3,489
21.6	(Francis OR "Bristol Hospital" OR UConn OR Dempsey OR ECHN OR "Manchester Memorial") w/10 xfirstword	5,914	0
23.1	(Francis OR SF OR "St Francis" OR "Saint Francis" OR Fran OR "Bristol Hospital" OR UConn OR Dempsey OR "Manchester Memorial" OR ECHN) w/10 (refer* OR opportunity OR leakage OR capture OR weak* OR loss*)	22,854	4,029
23.2	((Francis OR SF OR "St Francis" OR "Saint Francis" OR Fran OR "Bristol Hospital" OR UConn OR Dempsey OR "Manchester Memorial" OR ECHN) w/10 (hire OR hiring OR employ* OR poach OR recruit OR acquire* OR acquis*)) w/10 (physician* OR dr OR doctor* OR group OR provider* OR PCP*)	5,971	1,245
23.3	(Francis OR "Bristol Hospital" OR UConn OR Dempsey OR ECHN OR "Manchester Memorial") w/10 xfirstword	5,914	0
27.1	((ECHN OR Prospect OR "Manchester Memorial" OR Memorial OR Rockville) w/20 (acquis* OR acquire* OR LOI OR purchase OR bid OR RFP)) w/20 (market OR "market share" OR volume* OR refer* OR loyal* OR team OR ancillary OR captur* OR control* OR refer* OR discharge* OR admission* OR admit OR admits OR compet*)	1,191	453
34	((tier* OR (narrow w/3 network*) OR "high performance" OR steer*) w/10 (United OR UH OR UHC OR Cigna OR Aetna OR Anthem OR BC OR Blues OR BCBS OR Connecticutcare OR payor* OR payer* OR "managed care" OR "health plan*" OR HMO OR PPO)) w/20 (prevent OR stop OR interfere OR threat OR compet* OR roadblock OR impede* OR barrier OR impact OR DOJ OR antitrust)	1,314	645
35.1	((refer* OR captur* OR leak* OR (network w/3 engagement)) w/10 (instruct* OR direct OR compel OR mandate OR require OR incentive* OR penal* OR penalize OR reward* OR increase* OR reduc* OR limit* OR prevent*)) AND ("Hartford Hospital" OR HOCC OR "Central Conn" OR HH) AND (policy OR policies OR procedure* OR practice* OR rule* OR system OR process*)	41,255	10,677

Request No.	Name	Documents with hits	Unique hits
35.2	(referral* OR refer* w/10 (case* OR patient* OR procedur* OR business OR accounts)) OR captur* OR leak* (OR network w/3 engagement) w/10 (instruct* OR incentive* OR penal* OR penalize OR reward* OR increase* OR reduc* OR limit* OR prevent*) AND ("Hartford Hospital" OR HOCC OR "Central Conn" OR HH) AND (policy OR policies OR procedure* OR practice* OR rule* OR system OR process*)	25,131	0
36	(physician* OR surg* OR docs OR doctor* OR drs) w/10 ((compensat* OR stipend OR package OR bonus* OR increase* OR incentive*) w/30 (St Francis OR Saint Francis OR Fran OR Catholic OR Trinity OR SoNE OR compet* OR domin* OR scale OR market share))	7,884	3,368
37	((physician* OR provider* OR surg* OR docs OR doctor* OR drs) w/20 (leak* OR (out w/3 network) OR (network w/3 engagement) OR retention OR retain* OR outmigration OR outflow* OR (in w/3 network))) w/10 (EPIC OR default OR EMR)	2,019	771
40	(refer* OR loyal* OR control OR captur* OR leak* OR (out w/3 network) OR (network w/3 engagement) OR retention OR retain* OR outmigration OR migrat* OR outflow* OR (in w/3 network)) w/5 trauma	2,175	632
41	(referral* OR leak* OR admission* OR admit* OR discharge* OR outmigration OR outflow*) w/10 (employ* OR recruit* OR acquis* OR acquir* OR buy OR hire OR hired OR PSA OR contract) w/10 (physician* OR provider* OR docs OR doctor* OR dr OR group)	23,868	14,977
42	(captur* OR leak* OR (out w/3 network) OR (network w/3 engagement) OR outmigration OR referral* OR outflow*) w/10 (instruct* OR incentive* OR penal* OR penalize OR reward* OR increase* OR reduc* OR limit* OR prevent* OR SoNE) AND (policy OR policies OR procedure* OR practice* OR rule* OR system OR process*)	43,921	13,264
43	((Score OR card OR score card OR repor OR dashboard) w/10 xfirstword) AND ((ICP OR integratedcare OR integrated) AND ((physician* OR provider* OR surg* OR docs OR doctor* OR drs) w/100 (refer* OR ancillary* OR leak* OR compliance OR adher* OR network* OR (network w/3 engagement) OR metric* OR outflow* OR outmigration OR migrat* OR retention OR retain*)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	1,497	215
44	((on w/3 call) OR on-call) w/10 (comp* OR pay* OR reimb*) AND ((complan* OR comply OR complied OR loyal* OR support* OR adhere* OR threat* OR contingent OR dependent OR refer* OR team OR jersey) w/30 (physician* OR provider* OR surg* OR docs OR doctor* OR card* OR surg* OR heart OR drs OR dr)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	6,683	2,390
45	((("nuclear medicine" OR (nuclear w/3 scan*) OR "nuc med") w/10 (comp* OR pay* OR reimb*) w/50 (complan* OR comply OR complied OR loyal* OR support* OR adhere* OR threat* OR contingent OR dependent OR refer* OR team OR jersey OR leak*)) w/50 (physician* OR provider* OR docs OR doctor* OR card* OR heart OR drs OR dr) AND ("Hartford Hospital" OR HOC OR HH OR Central)	68	30
46	((echo* OR ecg) w/10 (comp* OR pay* OR reimb*)) w/30 (complan* OR comply OR complied OR loyal* OR team OR jersey OR support* OR adhere* OR threat* OR contingent OR dependent OR refer* OR leak*) w/30 (physician* OR provider* OR card* OR heart OR docs OR doctor* OR dr OR drs) AND ("Hartford Hospital" OR HOC OR HH OR Central)	1,773	343
49a.1	((("market share" OR admission* OR discharge* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR referral* OR leverage OR monop* OR strength OR scale OR essential* OR domin*) w/20 (Middlesex OR "Cottage Grove" OR CG)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	23,657	59
49a.2	((("market share" OR admission* OR discharge* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR referral* OR leverage OR monop* OR strength OR essential* OR scale OR domin*) w/20 (Byeff OR Byrne OR Chang OR Hosmer OR Sinning OR Rathmann)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	4,154	399
49a.3	((("market share" OR admission* OR discharge* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR referral* OR leverage OR monop* OR strength OR essential* OR scale OR domin*) w/20 (DeFusco OR Tolat OR Arora OR Ingrassia OR Casey OR Chowdhury)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	6,339	1,706
49a.4	((("market share" OR admission* OR discharge* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR referral* OR leverage OR monop* OR strength OR essential* OR scale OR domin*) w/10 (Lujic OR Daoud OR Caprio OR Schipper OR Wilson OR Gordon)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	8,699	2,670
49a.5	((("market share" OR admission* OR discharge* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR referral* OR leverage OR monop* OR strength OR essential* OR scale OR domin*) w/20 ("Dankwah-Quansah" OR Demirci OR Rani OR Lampugnale OR Wu)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	8,513	2,084
49a.6	((("market share" OR admission* OR discharge* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR referral* OR leverage OR monop* OR strength OR essential* OR scale OR domin*) w/20 (Mathur OR Senatus OR Shah OR Narayanswamy OR Maheshwari)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	6,017	908
49a.13	((Middlesex OR "Cottage Grove") w/10 xfirstword)	4,213	0
49c.1a	((hire* OR employ* OR recruit*) w/5 (dr OR doctor* OR physician* OR pcp OR specialist*) w/10 ("St Francis" OR "Saint Francis" OR Fran OR Trinity OR SoNE OR UConn OR "Bristol Hospital" OR "Manchester Memorial" OR monop* OR domin* OR referral* OR essential* OR "market share" OR discharge* OR admission* OR Dempsey)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	8,389	622
49c.1b	((hire* OR employ* OR recruit*) w/5 (card* OR ortho* OR oncol* OR surgeon* OR provider*) w/10 ("St Francis" OR "Saint Francis" OR Fran OR Trinity OR SoNE OR UConn OR "Bristol Hospital" OR "Manchester Memorial" OR monop* OR domin* OR referral* OR essential* OR "market share" OR discharge* OR admission* OR Dempsey)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	5,637	812

Request No.	Name	Documents with hits	Unique hits
49c.2a	((acquire OR acqui* OR buy) w/5 (dr OR doctor* OR physician* OR pcp OR specialist*)) w/10 ("St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR UConn OR "Bristol Hospital" OR "Manchester Memorial" OR monop* OR domin* OR scale OR strength OR essential* OR scale OR "market share" OR refer* OR Dempsey)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	1,199	99
49c.2b	((acquire OR acqui* OR buy) w/5 (card* OR ortho* OR oncol* OR surgeon* OR practice* OR group* OR provider*)) w/10 ("St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR UConn OR "Bristol Hospital" OR "Manchester Memorial" OR monop* OR domin* OR scale OR strength OR essential* OR scale OR "market share" OR refer* OR Dempsey)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	951	193
49d	((compet* OR "market share" OR discharge* OR revenue* OR admission* OR admits OR discharge* OR disch OR bargaining OR opportunity OR leverage OR "must have" OR rate* OR reimb* OR monop* OR strength OR essential* OR domin* OR scale) w/10 (referral*)) w/50 ("Hartford Hospital" OR HOC OR HH OR Central)	9,199	3,080
49h	((("market share" OR volume OR discharge* OR revenue* OR admission* OR admits OR discharge*) w/10 (BJI OR "bone and joint" OR "bone & joint") w/50 ("Hartford Hospital" OR HOC OR HH OR Central) AND (project* OR plan* OR budget* OR forecast*))	5,759	2,048
49i	((compet* OR "market share" OR discharge* OR revenue* OR admission* OR admits OR discharge* OR disch OR strength* OR opportunit* OR monop* OR essential* OR domin* OR scale) w/5 (asc OR "ambulatory surgery" OR "surgery center")) w/20 ("Hartford Hospital" OR HOC OR HH OR Central) AND (project* OR plan* OR budget* OR forecast*)	1,666	573
52.2	((("market share" OR admission* OR discharge* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR referral* OR leverage OR monop* OR essential* OR domin*) w/20 (Middlesex OR "Cottage Grove" OR CG)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	23,482	0
52.4	((Middlesex OR "Cottage Grove") w/10 xfirstword)	4,213	0
54	((recruit* OR hire* OR hiring) w/5 (barrier* OR difficult* OR challeng* OR shortage* OR scarce* OR shortfall*)) w/5 (card* OR ortho OR heart OR orthoped* OR surg* OR oncol* OR pcp OR provider* OR physician* OR doc OR drs OR cancer)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	2,349	0
55	((recruit* OR hire* OR hiring) w/5 (barrier* OR difficult* OR challeng* OR shortage* OR scarce* OR shortfall*)) w/5 (card* OR ortho OR heart OR orthoped* OR surg* OR oncol* OR pcp OR provider* OR physician* OR doc OR drs OR cancer)) AND ("Hartford Hospital" OR HOC OR HH OR Central)	2,349	0
56	((target w/10 (hire OR employ* OR recruit* OR buy OR team OR acquire* OR acqui*)) w/10 (physician* OR provider* OR surg* OR docs OR doctor* OR drs OR card* OR heart OR ortho OR cancer OR oncol OR group* OR practice OR pcp* OR primary)) w/50 ("Hartford Hospital" OR HOC OR HH OR Central)	1,624	437
57	(hire* OR hiring OR employ* OR recruit* OR acquire* OR buy OR acqui* OR referral*) w/30 (antitrust OR anti-trust OR "anti trust")	2,655	1,447
59	((clinic* OR office*) w/5 (physician* OR docs OR doctor* OR drs OR provider*)) w/5 ("service area*" OR "catchment area*" OR demographic OR zip*) AND ("Hartford Hospital" OR HOC OR HH OR Central)	216	0
63.1a	((medical w/3 director*) OR (director* w/3 (heart OR card* OR ortho* OR neuro* OR oncol* OR cancer OR ortho* OR "service line" OR "service lines" OR neuro*)) AND (compensat* OR stipend OR package OR bonus* OR increase* OR incentive*)) w/20 (Middlesex OR "Cottage Grove" OR Starling OR CMG OR "Grove Hill" OR Post OR Patel OR Walker OR Saint OR Scott OR Jarrod)	356	0
63.1b	((medical w/3 director*) OR (director* w/3 (heart OR card* OR ortho* OR neuro* OR oncol* OR cancer OR ortho* OR "service line" OR "service lines" OR neuro*)) AND (compensat* OR stipend OR package OR bonus* OR increase* OR incentive*)) w/20 (Byeff OR Byrne OR Chang OR Hosmer OR Sinning OR Rathmann OR DeFusco OR Tolat OR Arora OR Ingrassia OR Casey OR Chowdhury OR Lujic OR Daoud)	604	0
63.2a	((medical w/3 director*) OR (director* w/3 (heart OR card* OR ortho* OR neuro* OR oncol* OR cancer OR ortho* OR "service line" OR "service lines" OR neuro*)) AND (compensat* OR stipend OR package OR bonus* OR increase* OR incentive*)) w/20 (Caprio OR Schipper OR Wilson OR "Dankwah-Quansah" OR Gordon OR Demirci OR Rani OR Lampugnale OR Wu)	296	105
63.2b	((medical w/3 director*) OR (director* w/3 (heart OR card* OR ortho* OR neuro* OR oncol* OR cancer OR ortho* OR "service line" OR "service lines" OR neuro*)) AND (compensat* OR stipend OR package OR bonus* OR increase* OR incentive*)) w/20 (Sankaran OR Keibel OR Eisler OR Aron OR Selden OR Mathur OR Senatus OR Shah OR Narayanswamy OR Maheshwari OR anthony)	313	261
63.3	((medical w/3 director*) OR (director* w/3 (heart OR card* OR ortho* OR neuro* OR oncol* OR cancer OR ortho* OR "service line" OR "service lines" OR neuro*)) w/20 (compensat* OR stipend OR package OR bonus* OR increase* OR incentive*)) w/20 (refer* OR admission* OR discharge* OR "market share" OR "St Francis" OR "Saint Francis" OR Fran OR Trinity OR SoNE OR Catholic)	863	254
63.4a	((medical w/3 director*) OR (director* w/3 (heart OR card* OR ortho* OR neuro* OR oncol* OR cancer OR ortho* OR "service line" OR "service lines" OR neuro*)) AND (compensat* OR stipend OR package OR bonus* OR increase* OR incentive*)) w/20 (Middlesex OR "Cottage Grove" OR Starling OR CMG OR "Grove Hill" OR Post OR Patel OR Walker OR Saint)	337	0
63.4b	((medical w/3 director*) OR (director* w/3 (heart OR card* OR ortho* OR neuro* OR oncol* OR cancer OR ortho* OR service line OR service lines OR neuro*)) AND (compensat* OR stipend OR package OR bonus* OR increase* OR incentive*)) w/20 (Scott OR Jarrod OR Byeff OR Byrne OR Chang OR Hosmer OR Sinning OR Rathmann OR DeFusco OR Tolat OR Arora OR Ingrassia OR Casey OR Chowdhury OR Lujic OR Daoud)	633	0

Request No.	Name	Documents with hits	Unique hits
64	((ortho OR orthopedic OR surg*) w/10 (inpatient w/10 outpatient)) w/20 (rate* OR cost OR costs OR reimb*)	873	222
65,66	((Mako w/50 ((only w/10 offer*) OR exclus* OR advert* OR opportunit* OR SWOT OR Francis OR SF OR Trinity OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR sole OR exclusive OR unique* OR distinguish OR market* OR promote* OR outreach OR public*))	5,528	2,000
67	((clinic* OR office*) w/5 (physician* OR docs OR doctor* OR drs OR provider*)) w/5 ("service area*" OR "catchment area*" OR demographic OR zip*) AND ("Hartford Hospital" OR HOC OR HH OR Central)	216	0
68	((Mako w/20 (recruit* OR employ* OR team OR jersey OR hire* OR hiring))	2,136	321
70	((Starling OR CMG OR "Grove Hill" OR Patel OR Sarit OR Gollieher OR Vinci OR Faircloth OR Polukhin OR Jarrod) w/10 (threat* OR refer* OR loyal* OR adhere OR complian* OR leak* OR "Saint Francis" OR "St Francis" OR Fran OR Catholic OR Trinity OR SoNE)	16,011	7,604
70.1	((Starling w/10 xfirstword)	3,148	2,292
73	((fmv OR (fair w/3 value)) w/10 (physician* OR provider* OR surg* OR dr OR docs OR doctor* OR drs OR practice OR group OR employ* OR hire* OR recruit* OR PSA) w/50 (referral* OR admission* OR discharg*)) w/50 ("Hartford Hospital" OR HOC OR HH OR Central)	170	107
74	((policy OR policies OR procedure* OR process*) w/10 ((physician OR provider* OR surg* OR docs OR doctor* OR drs) w/5 integrat*) AND ("Hartford Hospital" OR HOC OR HH OR Central)	875	361

Request No.	Name	Documents with hits	Unique hits
1.1	((rate* OR price* OR reimb* OR pricing) W/10 (benchmark* OR compar* OR "Saint Francis" OR "St Francis" OR Fran OR Catholic OR Trinity OR St. Francis OR SoNE) w/20 ("Hartford Hospital" OR HOC OR HH OR ICP OR Central)	1,988	1,096
8.1	((strateg* OR plan OR BDC OR "balanced score card" OR "balanced scorecard") w/10 (United OR "managed care" OR payer* OR payor* OR HMO OR PPO OR "health plan*" OR UH OR UHC OR Cigna OR Aetna OR Anthem OR BC OR Blues OR BCBS OR Connecticare)) w/10 xfirstword) AND ("Hartford Hospital" OR HOC OR HH OR Central)	301	183
19	(satisf* OR prefer* OR "market perception" OR NRC OR "market research" OR reputation OR "focus group*" OR survey*) w/10 xfirstword AND ("Hartford Hospital" OR HOC OR HH OR Central)	3,182	3,016
20	((Kaufman OR Bain OR McKinley OR Alvarez OR Deloitte OR AlixPartners OR FTI OR Boston OR plan OR dive) w/10 xfirstword) w/50 ("Hartford Hospital" OR HOC OR HH OR Central) AND (market OR markets OR compet*)	982	12
21.1	("market share" OR SWOT OR monop* OR domin* OR essential* OR strength) w/50 ("Hartford Hospital" OR Central OR HOCC OR "central Conn*" OR "Central Region")	40,851	27,757
21.2	((compet* OR assess* OR "market share" OR market OR strateg* OR plan OR dive) w/10 xfirstword) w/50 ("Hartford Hospital" OR HOC OR HH OR Central) AND (compet* OR market OR domin* OR monop*)	3,055	542
21.3	(snapshot OR profile OR threat OR competitor) w/50 ("St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE OR "Bristol Hospital" OR Dempsey OR Uconn OR "Manchester Memorial")	7,254	3,580
22	((plan OR business OR strateg* OR compet* OR marketing OR bdc OR balanced scorecard OR balanced score card OR "medical staff") w/10 xfirstword) w/100 ("Hartford Hospital" OR HOCC OR Central Region OR central Conn* OR ICP OR HHCMG OR HHC Medical Group OR Medical Group)) AND (market OR compet*)	11,489	4,110
24	((CarePartners OR Tufts) w/5 xfirstword) AND (plan OR strateg* OR "business case")	2,555	2,400
25.1	((plan* OR BDC OR "service line" OR quality OR rate* OR "balanced score card") w/10 xfirstword) w/50 (card* OR heart OR "Hartford Hospital" OR Central OR HOCC OR "central Conn*" OR ICP OR integratedcare OR HHCMG OR "medical group" OR "service line" OR cancer OR oncology OR ortho OR orthopedic* OR surg*) AND (market OR markets OR compet*)	8,169	1,410
25.2	((("balanced scorecard" OR environmental OR "service line" OR quality OR rate* OR compet* OR strateg*) w/10 xfirstword) w/50 (card* OR heart OR "Hartford Hospital" OR Central OR HOCC OR "central Conn*" OR ICP OR integratedcare OR HHCMG OR "medical group" OR "service line" OR cancer OR oncology OR ortho OR orthopedic* OR surg*)) AND (market OR markets OR compet*)	9,047	1,546
26	((plan* OR service OR BDC OR "balanced score card" OR "balanced scorecard" OR environmental OR compet* OR strateg*) w/10 xfirstword) w/20 (bone OR joint OR BJI OR CJRI)	1,854	1,518
27.2	((ECHN OR Prospect OR "Manchester Memorial" OR Memorial OR Rockville) w/10 xfirstword) AND (acquis* OR acquire* OR LOI OR purchase OR bid OR RFP) AND (market OR "market share" OR volume* OR refer* OR loyal* OR team OR ancillary OR captur* OR control* OR discharge* OR admission* OR admit OR admits OR compet*)	510	462
48.1	(project* OR roi OR roic OR "rate of return" OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR "business plan" OR forecast* OR BDC OR "balanced score card" OR "balanced scorecard" OR "fair market value" OR fmv) w/20 (Middlesex OR "Cottage Grove" OR CG)	5,155	0
48.2	(project* OR roi OR roic OR "rate of return" OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast* OR "business plan" OR BDC OR "balanced score card" OR "balanced scorecard" OR "fair market value" OR fmv) w/20 (Walker OR Scott OR Jarrod OR Byeffer OR Byrne OR Chang OR Hosmer OR Sinning)	5,992	3,073
48.3	(project* OR roi OR roic OR "rate of return" OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast* OR "business plan" OR BDC OR "balanced score card" OR "balanced scorecard" OR "fair market value" OR fmv) w/20 (Rathmann OR DeFusco OR Tolat OR Arora OR Ingrassia OR Casey OR Chowdhury OR Lujic)	1,888	769
48.4	(project* OR roi OR roic OR "rate of return" OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast* OR "business plan" OR BDC OR "balanced score card" OR "balanced scorecard" OR "fair market value" OR fmv) w/20 (Daoud OR Caprio OR Schipper OR Wilson OR "Dankwah-Quansah" OR Gordon OR Demirci)	3,892	1,022

Request No.	Name	Documents with hits	Unique hits
48.5	(project* OR roi OR roic OR "rate of return" OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast* OR "business plan" OR BDC OR "balanced score card" OR "balanced scorecard" OR "fair market value" OR fmv) w/20 (Mathur OR Senatus OR Shah OR Narayanswamy OR Maheshwari)	2,159	789
48.6	(project* OR roi OR roic OR "rate of return" OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast* OR "business plan" OR BDC OR "balanced score card" OR "balanced scorecard" OR "fair market value" OR fmv) w/20 (Rani OR Lampugnale OR Wu OR Anthony OR Sankaran OR Keibel OR Eisler OR Aron OR Selden)	4,260	2,627
48.7	((Middlesex OR "Cottage Grove" OR CG) w/10 xfirstword) AND (project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast OR plan OR bdc OR "balanced scorecard" OR "balanced score card" OR budget OR "fair market value" OR fmv OR refer* OR ancillary)	1,103	46
48.8	((Walker OR Saint OR Scott OR Jarrod OR Byeffer OR Byrne OR Chang OR Hosmer OR Sinning) w/10 xfirstword) AND (project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast OR plan OR bdc OR "balanced scorecard" OR "balanced score card" OR budget OR "fair market value" OR fmv OR refer* OR ancillary)	1,461	1,038
48.9	((Rathmann OR DeFusco OR Tolat OR Arora OR Ingrassia OR Casey OR Chowdhury OR Lujic) w/10 xfirstword) AND (project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast OR plan OR bdc OR "balanced scorecard" OR "balanced score card" OR budget OR "fair market value" OR fmv OR refer* OR ancillary)	529	324
48.10 (Note, this was inadvertently numbered 48.1 in HHC's 11/4 Rpt)	((Daoud OR Caprio OR Schipper OR Wilson OR "Dankwah-Quansah" OR Gordon OR Demirci) w/10 xfirstword) AND (project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast OR plan OR bdc OR "balanced scorecard" OR "balanced score card" OR budget OR "fair market value" OR fmv OR refer* OR ancillary)	445	214
48.11	((Mathur OR Senatus OR Shah OR Narayanswamy OR Maheshwari) w/10 xfirstword) AND (project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast OR plan OR bdc OR "balanced scorecard" OR "balanced score card" OR budget OR "fair market value" OR fmv OR refer* OR ancillary)	139	84
48.12	((Rani OR Lampugnale OR Wu OR Anthony OR Sankaran OR Keibel OR Eisler OR Aron OR Selden) w/10 xfirstword) AND (project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast OR plan OR bdc OR "balanced scorecard" OR "balanced score card" OR budget OR "fair market value" OR fmv OR refer* OR ancillary)	2,628	2,267
49a.7	((Middlesex OR "Cottage Grove" OR CG) w/10 xfirstword) AND ("market share" OR discharge* OR admission* OR leverage OR "managed care" OR monop* OR domin* OR scale OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE) AND ("Hartford Hospital" OR HOC OR HH OR Central)	730	0
49a.8	((Byeffer OR Byrne OR Chang OR Hosmer OR Sinning OR Rathmann) w/10 xfirstword) AND ("market share" OR discharge* OR admission* OR leverage OR reimb* OR "managed care" OR payor* OR payer* OR money OR monop* OR domin* OR scale OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE) AND ("Hartford Hospital" OR HOC OR HH OR Central)	198	3
49a.9	((DeFusco OR Tolat OR Arora OR Ingrassia OR Casey OR Chowdhury) w/10 xfirstword) AND ("market share" OR discharge* OR admission* OR leverage OR reimb* OR "managed care" OR payor* OR payer* OR money OR monop* OR domin* OR scale OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE) AND ("Hartford Hospital" OR HOC OR HH OR Central)	176	32
49a.10	((Lujic OR Daoud OR Caprio OR Schipper OR Wilson OR Gordon) w/10 xfirstword) AND ("market share" OR discharge* OR admission* OR leverage OR reimb* OR "managed care" OR payor* OR payer* OR money OR monop* OR domin* OR scale OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE) AND ("Hartford Hospital" OR HOC OR HH OR Central)	80	17
49a.11	((("Dankwah-Quansah" OR Demirci OR Rani OR Lampugnale OR Wu) w/10 xfirstword) AND ("market share" OR discharge* OR admission* OR leverage OR reimb* OR "managed care" OR payor* OR payer* OR money OR monop* OR domin* OR scale OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE) AND ("Hartford Hospital" OR HOC OR HH OR Central)	169	33
49a.12	((Mathur OR Senatus OR Shah OR Narayanswamy OR Maheshwari) w/10 xfirstword) AND ("market share" OR discharge* OR admission* OR leverage OR reimb* OR "managed care" OR payor* OR payer* OR money OR monop* OR domin* OR scale OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE) AND ("Hartford Hospital" OR HOC OR HH OR Central)	105	62
49e	((("market share" OR volume OR discharge* OR revenue* OR admission* OR admits OR discharge* OR disch) w/20 (marketing OR brand OR media OR advert* OR ads)) w/20 ("Hartford Hospital" OR HOC OR HH OR Central)	2,119	1,234
49f.1	((("market share" OR discharge* OR revenue* OR admission* OR admits OR disch) w/10 (construction OR build*)) w/50 ("Hartford Hospital" OR HOC OR HH OR Central)	1,695	1,119

Request No.	Name	Documents with hits	Unique hits
52	(project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast* OR BDC OR "balanced score card" OR "balanced scorecard" OR "business plan" OR "fair market value" OR fmv OR referral*) w/20 (Middlesex OR "Cottage Grove" OR CG)	7,435	1,121
52.1	((Middlesex OR "Cottage Grove" OR CG) w/10 xfirstword) AND (project* OR roi OR roic OR return OR "pro forma" OR proforma OR hurdle OR (business w/3 case) OR forecast OR plan OR bdc OR "balanced scorecard" OR "balanced score card" OR budget OR "fair market value" OR fmv OR referral* OR (refer w/5 (case OR patient* OR procedur* OR business)) OR ancillary)	995	0
52.3	((Middlesex OR "Cottage Grove" OR CG) w/10 xfirstword) AND ("market share" OR discharge* OR admission* OR leverage OR monop* OR domin* OR "St Francis" OR "Saint Francis" OR Fran OR Catholic OR Trinity OR SoNE) AND ("Hartford Hospital" OR HOC OR HH OR Central)	719	0
71	((project* OR forecast* OR budget*) w/10 (Hartford Hospital OR HH OR "Harford Hospital" OR "Hartford region" OR HOCC OR "Central Region" OR "central Conn*" OR HHCMG OR "HHC Medical Group" OR "medical group")) w/10 xfirstword) AND (compet* OR market* OR domin* OR quality OR reimb*)	1,304	962
72	((plan w/5 marketing) w/10 xfirstword) AND ("Hartford Hospital" OR HOCC OR "Central Region" OR "central Conn*" OR ICP OR integratedcare OR integrated OR HHCMG OR "HHC Medical Group" OR "Medical Group")	300	188

Request No.	Name	Documents with hits	Unique hits
10.2	("Saint Francis" OR "St Francis" OR "Trinity Health" OR St. Francis OR SoNE OR (Francis w/3 partners))	3,565	0
21.7	("Saint Francis" OR "St Francis" OR "Trinity Health" OR St. Francis OR SoNE OR (Francis w/3 partners) OR "Bristol Hospital" OR Dempsey OR ECHN OR "Manchester Memorial")	5,007	0
23.4	("Saint Francis" OR "St Francis" OR "Trinity Health" OR St. Francis OR SoNE OR (Francis w/3 partners) OR "Bristol Hospital" OR UConn OR Dempsey OR ECHN OR "Manchester Memorial")	12,228	7,220
49a.14	("Middlesex card*" OR "Cottage Grove")	6,326	0
52.5	("Middlesex card*" OR "Cottage Grove")	6,326	0
70.2	{starling}	15,390	15,386

Exhibit E

Request No.	Name	Documents with hits	Unique hits
11	(bundle* w/10 (UH OR UHC OR Cigna OR Aetna OR Anthem OR BC OR Blues OR BCBS OR Connecticare)) w/20 ("Hartford Hospital" OR HC OR HH OR Central OR ICP)	313	147
12	((Prime OR POS) w/20 (Anthem OR BC OR Blue OR BCBS)) w/20 (strateg* OR plan* OR threat* OR prevent* OR agree OR reject* OR harm OR partic* OR refus* OR decline* OR stop*) AND (State OR Conn*)	4,144	3,026
13	((network w/3 distinction) AND (state OR Conn*)) w/100 (strateg* OR plan OR agree* OR threat* OR prevent* OR refus* OR decline* OR compet* OR stop* OR unprofit*)	641	405
34	((tier* OR (narrow w/3 network*) OR "high performance" OR steer*) w/10 (United OR UH OR UHC OR Cigna OR Aetna OR Anthem OR BC OR Blues OR BCBS OR Connecticare OR payor* OR payer* OR "managed care" OR "health plan*" OR HMO OR PPO)) w/20 (prevent OR stop OR interfere OR threat OR compet* OR roadblock OR imped* OR barrier OR impact OR DOJ OR antitrust)	1,314	645