

**UNITED STATES DISTRICT COURT
DISTRICT OF CONNECTICUT**

GUARDIAN FLIGHT LLC, *et al.*,

Plaintiffs,

v.

**AETNA LIFE INSURANCE
COMPANY, *et al.***

Defendants.

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Civil Action No. 3:24-cv-00680-MPS

**AETNA’S MOTION FOR PERMISSION TO FILE INTERLOCUTORY APPEAL
UNDER 28 U.S.C. § 1292(b) OF THIS COURT’S MAY 14, 2025, RULING
ON MOTIONS TO DISMISS**

Pursuant to Local Civil Rule 7(a), Defendants Aetna Life Insurance Company, Aetna Health, Inc., and Aetna Health and Life Insurance Company (“Aetna”) respectfully move for permission to file an interlocutory appeal pursuant to 28 U.S.C. § 1292(b) of this Court’s May 14, 2025 ruling on Motions to Dismiss. In support of the requested relief, Aetna states:

In compliance with L. Civ. R. 7(a), Aetna submits the accompanying memorandum of law demonstrating why an interlocutory appeal pursuant to 28 U.S.C. § 1292(b) is appropriate. Aetna therefore requests the Court amend this Court’s Ruling on Motions to Dismiss (ECF No. 264) (“Order”) to include the following statement:

In the opinion of the Court, this Order involves controlling questions of law as to which there is substantial ground for difference of opinion and an immediate appeal from the order may materially advance the ultimate determination of the litigation for the following three issues: (1) does the No Surprises Act create (“NSA”) a private remedy for untimely IDR award payments; (2) does derivative standing exist under Employee Retirement Income Security Act of 1974 (“ERISA”) when plan members whose medical claims were submitted to the IDR entities have no right to payment or benefits; and (3) is a Connecticut Unfair Trade Practices Act claim for untimely IDR award payments preempted by the NSA and/or ERISA.

This case is uniquely situated at a crossroads between unsettled federal law and a rapidly evolving national conversation regarding the scope and implications of the NSA. Since this Court’s

ruling the first to recognize a private right of action under the statute, and that it is unique in both its reasoning and result, its inclusion the appellate landscape is critical. This Court's decision will undoubtedly result in a surge of nationwide litigation over these issues. Accordingly, allowing appellate review *now* enables the parties to adjust their actions and avoid a protracted litigation spike that will ultimately trickle down to healthcare costs for health plan enrollees and patients. Appellate review here is especially warranted given the risk that Plaintiffs' claims will frustrate the purpose of the NSA by transmuting the IDR process (a cost-saving streamline of billing disputes) into even more litigation via private enforcement mechanisms.

As set forth in the accompanying memorandum of law, Aetna should be granted permission to file an interlocutory appeal pursuant to 28 U.S.C. § 1292(b) for the above three issues on numerous grounds, including, but not limited to, the following: (1) the three controlling questions are pure questions of law and if resolved in Aetna's favor, would mandate dismissal of the case or materially narrow the litigation; (2) each of the three controlling questions of law present a substantial ground for difference of opinion as they involve either conflicting authority (including a pending Fifth Circuit appeal on Aetna's first controlling question) and/or novel issues under ERISA and CUTPA, all of which lack binding precedent in this Second Circuit and merit interlocutory review; and (3) interlocutory review would materially advance the ultimate resolution of the litigation by eliminating or substantially narrowing the claims at issue, thereby avoiding costly discovery, extensive motion practice, and trial on legally infirm causes of action.

Aetna, therefore, respectfully asks this Court for permission to file an interlocutory appeal under 28 U.S.C. § 1292(b) of this Court's May 14, 2025 ruling on Motions to Dismiss and amend the Order as provided herein.

Respectfully Submitted,

By: s/ John B. Shely

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**ATTORNEYS FOR DEFENDANTS
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AND AETNA HEALTH AND LIFE
INSURANCE CO.**

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing was filed electronically on June 5th, 2025. Notice of this filing will be sent by operation of the Court's electronic filing system to all parties indicated on the electronic filing receipt.

s/ John B. Shely
John B. Shely

**UNITED STATES DISTRICT COURT
DISTRICT OF CONNECTICUT**

GUARDIAN FLIGHT LLC, *et al.*,

Plaintiffs,

v.

AETNA LIFE INSURANCE COMPANY, *et al.*

Defendants.

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Civil Action No. 3:24-cv-00680-MPS

**MEMORANDUM IN SUPPORT OF AETNA’S MOTION FOR PERMISSION TO FILE
INTERLOCUTORY APPEAL UNDER 28 U.S.C. § 1292(b) OF THIS COURT’S MAY 14,
2025, RULING ON MOTIONS TO DISMISS**

I. INTRODUCTION

This case stands at the intersection of unsettled federal law and escalating national impact that warrant immediate appellate review. First, a clear circuit split exists as to whether the No Surprises Act (“NSA”) creates a private right of action, and given that this Court’s decision is the first of its kind to find such a right, the inclusion of this Court’s reasoning and ruling in the appellate landscape will enrich the national conversation, which requires no further factual development to present these legal issues. Second, this ruling will certainly trigger a wave of copycat lawsuits by providers across the country. However, allowing prompt appellate review can curb this surge, giving parties and courts nationwide clear guidance, and avoids a protracted litigation spike that will ultimately result in higher healthcare costs for patients. Finally, the NSA’s intended purpose is at stake: to streamline out-of-network billing disputes and reduce healthcare costs through the introduction of the Independent Dispute Resolution (“IDR”) process. If providers can circumvent the IDR process via private enforcement claims such as those that Plaintiffs have brought here, then the cost-saving objectives of the NSA risk being undermined.

On May 14, 2025, this Court entered its Ruling on Motions to Dismiss (ECF No. 264) (“Order”), granting in part and denying in part the Motion to Dismiss filed by Defendants Aetna Health Inc., Aetna Life Insurance Co., and Aetna Health and Life Insurance Co. (collectively “Aetna”). Aetna now seeks permission to take an immediate interlocutory appeal from the Order under 28 U.S.C. § 1292(b), and stay all proceedings, and for the following reasons moves the Court to amend the Order to include the following statement:

In the opinion of the Court, this Order involves controlling questions of law as to which there is substantial ground for difference of opinion and an immediate appeal from the order may materially advance the ultimate determination of the litigation for the following three issues: (1) does the NSA create a private remedy for untimely IDR award payments; (2) does derivative standing exist under Employee Retirement Income Security Act of 1974 (“ERISA”) when plan members whose medical claims were submitted to the IDR entities have no right to payment or benefits; and (3) is a Connecticut Unfair Trade Practices Act claim for untimely IDR award payments preempted by the NSA and/or ERISA.

See FED. R. APP. P. 5(a)(3) (“If a party cannot petition for appeal unless the district court first enters an order granting permission to do so or stating that the necessary conditions are met, the district court may amend its order, either on its own or in response to a party’s motion, to include the required permission or statement.”).

II. NECESSITY FOR INTERLOCUTORY APPEAL

The Order involves three threshold and controlling legal issues that are ripe for appellate review and, if resolved in Aetna’s favor, would dispose of all or substantially all of Plaintiffs’ claims: (1) does the NSA create a private remedy for untimely IDR award payments; (2) does derivative standing exist under ERISA when plan members whose medical claims were submitted to the IDR entities have no right to payment or benefits; and (3) is a Connecticut Unfair Trade

Practices Act (“CUTPA”) claim for untimely IDR award payments preempted by the NSA and/or ERISA.

In particular, the Order’s ruling that the NSA creates a private right of action warrants immediate review. Since the NSA took effect on January 1, 2022, case law interpreting the statute remains sparse, with only one other district court (so far) addressing whether the NSA permits a private right of action—and holding directly contrary to this Court. This lack of precedent underscores the significance of this litigation and the importance of immediate appellate guidance. Forcing the parties to proceed through extensive discovery, expert analysis, and a full trial before resolving foundational legal questions would impose undue and entirely avoidable burdens on the Court and the parties.

An interlocutory appeal under 28 U.S.C. § 1292(b) is not merely appropriate; it is necessary to promote judicial economy and prevent the injustice of litigating claims that may ultimately fail as a matter of law. The very purpose of § 1292(b) is to allow early review of controlling legal issues where doing so will materially advance the termination of the litigation. Here, where the central questions concern unsettled statutory interpretation, ERISA standing, and federal preemption, interlocutory review is the most efficient and equitable path forward. Delaying appellate review until after trial would risk unnecessary expenditure of substantial resources and would undermine the efficiency § 1292(b) is designed to protect.

III. LEGAL STANDARD

In order to certify an order for interlocutory appeal, the district court must determine and state in writing that such order “[1] involves a controlling question of law [2] as to which there is substantial ground for difference of opinion and that [3] an immediate appeal from the order may materially advance the ultimate termination of the litigation” 28 U.S.C. § 1292(b); *see James*

v. Venture Home Solar, LLC, No. 3:21-CV-1306 (CSH), 2024 WL 446085, at *10 (D. Conn. Feb. 6, 2024). “The determination of whether Section 1292(b) certification is appropriate under the above standards is in the discretion of the district court.” *Silva v. Schmidt Baking Distribution, LLC*, No. 3:23-CV-01695-MPS, 2024 WL 3566168, at *1 (D. Conn. July 29, 2024) (quoting *Primavera Familienstiftung v. Askin*, 139 F. Supp. 2d 567, 569–70 (S.D.N.Y. 2001)).

“However, ‘[w]hen a ruling satisfies these criteria and involves a new legal question or is of special consequence, then the district court should not hesitate to certify an interlocutory appeal.’” *Id.* (alteration in original) (quoting *Balintulo v. Daimler AG*, 727 F.3d 174, 186 (2d Cir. 2013)). As set forth below, the Order satisfies the 1292(b) criteria and involves **both** new legal questions and is of special consequence. An interlocutory appeal should be certified.

IV. CONTROLLING QUESTIONS OF LAW

Three controlling questions of law exist for which a § 1292(b) appeal should be permitted: (1) does the NSA create a private remedy for untimely IDR award payments; (2) does derivative standing exist under ERISA when plan members whose medical claims were submitted to the IDR entities have no right to payment or benefits; and (3) is a CUTPA claim for untimely IDR award payments preempted by the NSA and/or ERISA.

“An order involves a ‘controlling question of law’ if reversal on that question would ‘result in dismissal’ or otherwise ‘significantly affect the conduct of the action.’” *Silva*, 2024 WL 3566168, at *2 (quoting *Askin*, 139 F. Supp. 2d at 570); *see also Klinghoffer v. S.N.C. Achille Lauro Ed Altri-Gestione Motonave Achille Lauro in Amministrazione Straordinaria*, 921 F.2d 21, 24 (2d Cir. 1990) (holding that where reversal of the district court’s order “would terminate the action,” it involves a “controlling” question of law). The issue “need not affect a wide range of pending cases” as long as it is controlling in the instant litigation. *Id.* “[T]he issue

must be ‘a pure question of law that the reviewing court could decide quickly and clearly without having to study the record.’” *Silva*, 2024 WL 3566168, at *2 (quoting *Williston v. Eggleston*, 410 F. Supp. 2d 274, 276 (S.D.N.Y. 2006)).

Here, the three controlling questions of law satisfy 28 U.S.C. § 1292(b) because, if resolved in Aetna’s favor, they would result in dismissal of the case in whole or in substantial part or would otherwise significantly impact the scope and conduct of the litigation and are purely legal questions. First, if the appellate court determines that the NSA does not create a private right of action for enforcement of untimely IDR payment awards, Plaintiffs’ first cause of action asserted solely under the NSA would be dismissed in its entirety. Further, this question is purely legal and does not depend on factual development. This is a textbook issue of statutory interpretation: whether Congress intended to confer a private enforcement mechanism for alleged delays in IDR determination payments. It is a threshold legal question that can be resolved on the face of the statute, without reference to any facts in dispute.

Second, the issue of whether Plaintiffs have standing under ERISA is likewise dispositive and presents a pure question of law suitable for interlocutory appeal. It is undisputed that Plaintiffs are not plan members under the relevant health plans. *See* 2d Am. Compl. (ECF No. 109) ¶ 32. Plaintiffs assert standing solely as assignees of plan participants, but Aetna has challenged their ability to pursue ERISA claims on the ground that the underlying plan members themselves would not have a right to payment or benefits for the disputed IDR awards. This issue does not turn on any individualized factual assessment. Rather, it involves the legal scope of derivative standing under ERISA’s civil enforcement provision, 29 U.S.C. § 1132(a). Specifically, it involves whether an assignee can assert an ERISA claim for failure to timely pay IDR determinations that the assignor could not assert. If the appellate court agrees with Aetna’s position, then Plaintiffs’ ERISA

claim must be dismissed in its entirety. Because this is a question of statutory interpretation and legal entitlement under ERISA's standing doctrine, it can, and should, be resolved as a matter of law on interlocutory review.

Third, Plaintiffs' claim under CUTPA presents a dispositive and purely legal question concerning federal preemption. Specifically, whether the NSA or ERISA preempts the application of Connecticut's consumer protection statutes to disputes over the timing of IDR-related payments. It is well established that preemption is a question of law appropriate for resolution on interlocutory appeal, particularly where the claim implicates federal statutory schemes that occupy the field or expressly displace state law. *See, e.g., Miara v. First Allmerica Fin. Life Ins. Co.*, 379 F. Supp. 2d 20, 70 (D. Mass. 2005) ("The controlling question of law worthy of First Circuit review and certified to the First Circuit [under 1292(b)] is: does ERISA preempt state law claims against an insurer, an insurance agency, and an insurance agent stemming from misrepresentations and assurances made by the insurance agent (acting on behalf of the insurer) in connection with the establishment of an employee benefit plan."). Here, both the NSA and ERISA govern the procedures and remedies available for out-of-network payment disputes, including the timing and enforcement of IDR awards.

Plaintiffs' attempt to recast alleged delays in payment as a violation of Connecticut consumer protection law directly implicates federal supremacy and raises the risk of inconsistent obligations across jurisdictions. Resolving the preemption issue now would avoid unnecessary discovery and trial preparation on a claim that may be entirely barred by federal law. Because the preemption analysis turns solely on statutory construction and the scope of federal regulatory authority (not disputed facts) this question is suited for interlocutory review under § 1292(b).

Each of these questions is a pure question of law that can be resolved without further factual development. The legal inquiries concern unsettled statutory interpretation, standing, and preemption, none of which depend on the factual record. Because each of these three issues involve a pure question of law that could affect the conduct of the action and has significant precedential value, each of them constitutes a “controlling question of law” within the meaning of § 1292(b). *See Silva*, 2024 WL 3566168, at *3 (finding pure question of law with substantial precedential value constituted “controlling question of law”).

V. SUBSTANTIAL GROUND FOR DIFFERENCE OF OPINION

Each of the three controlling questions of law also presents a substantial ground for difference of opinion. Courts in this Circuit have explained that this prong is met where: “(1) there is conflicting authority on an issue, or (2) the case is particularly difficult and of first impression within this Circuit.” *James*, 715 F. Supp. 3d at 218 (quoting *U.S. ex rel. Drake v. NSI, Inc.*, 736 F. Supp. 2d 489, 503 (D. Conn. 2010)).

With respect to the first controlling question of law—whether the NSA creates a private right of action—there is plainly conflicting authority. This Court expressly acknowledged the contrary view taken by the Northern District of Texas in *Guardian Flight LLC v. Health Care Services Corp.*, 735 F. Supp. 3d 742, 749 (N.D. Tex. 2024), where the court held, Congress did not intend to create a private cause of action for enforcement of untimely IDR awards under the NSA. *See Order*, at 13–14. While this Court “decline[d] to follow this approach,” the split reflects a substantial and unresolved legal disagreement over statutory interpretation. *Order*, at 14.

Moreover, the *Guardian Flight* decision is currently on appeal before the Fifth Circuit (No. 24-10561). The Fifth Circuit heard oral argument on February 24, 2025. Should it affirm the district court’s holding that the NSA does not create a private right of action, that would further

deepen the circuit split and emphasize the need for immediate interlocutory review by the Second Circuit. To date, no appellate court has definitively resolved this issue, and there is no controlling Second Circuit or Supreme Court authority on point. The combination of conflicting district court rulings, pending appellate review, and a lack of controlling precedent sufficiently establishes a substantial ground for difference of opinion.

The second controlling question of law— whether derivative standing exists under ERISA when plan members whose medical claims were submitted to the IDR entities have no right to payment or benefits for these particular charge of the Plaintiffs —also presents a substantial ground for difference of opinion. It is undisputed that Plaintiffs are not participants of the health plans at issue, but rather assert standing solely as assignees of plan members. 2d Am. Compl. (ECF No. 109) ¶ 32. While this Court analyzed standing through the lens of Article III, Aetna’s argument is premised on the more limited doctrine of derivative standing under ERISA, which is distinct from constitutional standing. *See* Mem. Supp. Aetna’s Mot. Dismiss Pls.’ 2d Am. Compl. (ECF No. 122) at 15–16.

ERISA’s statutory framework grants standing only to plan participants, beneficiaries, and fiduciaries. *See* 29 U.S.C. § 1132(a). However, a member may assign its rights, and when the member does so, an assignee has no greater rights than his assignor. *See Rojas v. Cigna Health & Life Ins. Co.*, 793 F.3d 253, 258–259 (2d Cir. 2015). Thus, it follows that for Plaintiffs here to have standing under ERISA, the beneficiaries must have had standing to bring an ERISA claim to require Aetna to pay Plaintiffs’ IDR awards. *Guardian Flight*, 735 F. Supp. 3d at 752. As the Northern District of Texas found in *Guardian Flight*, no standing exists because the beneficiaries suffered no concrete injury from the payer failing to pay IDR awards timely to the plaintiffs. *Id.*

However, the Court here found that Plaintiffs have both constitutional standing and

derivative standing. Order, at 23–25. The Court also applied a standard that is not clearly established in the Second Circuit by drawing all reasonable inferences in Plaintiffs’ favor. Order, at 9 n.3. These conflicting views on the scope of ERISA standing, particularly in the context of IDR payment enforcement, create a substantial ground for a difference of opinion, particularly when the plan members themselves are not independently entitled to benefits for the disputed IDR payments.

The third controlling question of law—whether the NSA and/or ERISA preempts a state-law claim under CUTPA for the untimely payment of IDR awards—raises an unresolved question that further supports interlocutory review. To date, Aetna is not aware of any federal or state court that has addressed whether a provider may assert a CUTPA claim based on alleged violations of the NSA’s payment deadlines. Given that the NSA establishes a comprehensive framework governing payment disputes and timing obligations¹ and ERISA broadly preempts state laws “relating to” employee benefit plans (*see* 29 U.S.C. § 1144(a)), this claim presents preemption issues. Accordingly, this particular legal question is not only unsettled, but also one that, if resolved in Aetna’s favor, would result in dismissal of Plaintiffs’ final remaining cause of action.

As stated herein, because the three controlling questions involve either direct conflicts in authority or novel legal issues of first impression within this Circuit, they plainly satisfy the second prong of § 1292(b).

¹ CMS has created an online portal for providers to submit complaints, such as the same payment complaints that Plaintiffs are making here. *See* Providers: Submit a Billing Complaint, <https://www.cms.gov/nosurprises/policies-and-resources/providers-submit-a-billing-complaint> (last modified Apr. 22, 2025) (portal allowing providers to submit billing complaints if they believe an insurer “is not complying with the Federal [IDR] process” or “want to report a violation of the [NSA]”). Further, CMS directs plans to make payments when a violation has been found. *See* CENTERS FOR MEDICARE & MEDICAID SERVS., CMS COMPLAINT DATA AND ENFORCEMENT REPORT ON HEALTH INSURANCE MARKET REFORMS (Nov. 2024), <https://www.cms.gov/files/document/november-2024-complaint-data-and-enforcement-report.pdf>.

VI. MATERIAL ADVANCEMENT OF ULTIMATE TERMINATION OF LITIGATION

The third § 1292(b) prong is also satisfied in this case, because an interlocutory appeal “may materially advance the ultimate termination of the litigation.” 28 U.S.C. § 1292(b); *see Koehler v. Bank of Bermuda, Ltd.*, 101 F.3d 863, 865–66 (2d Cir. 1996) (“The use of § 1292(b) is reserved for those cases where an intermediate appeal may avoid protracted litigation.”).

The three controlling questions of law on which Aetna seeks 1292(b) certification are case-dispositive if resolved in Aetna’s favor. Without interlocutory review, this case will proceed into burdensome and expensive discovery, require extensive motion practice, and culminate in a full trial on all causes of action. That process would consume significant judicial and party resources on claims that may ultimately be barred as a matter of law. By contrast, interlocutory review affords the opportunity to resolve these fundamental legal issues now. If the Second Circuit agrees with Aetna, the case would be dismissed or substantially narrowed, thereby materially advancing the ultimate resolution of the litigation. Such circumstances fall squarely within the purpose of § 1292(b) and warrant immediate appellate consideration.

VII. CONCLUSION

For these reasons, Aetna respectfully requests that the Court grant Aetna’s Motion for Permission to File an Interlocutory Appeal under 28 U.S.C. § 1292(b).

Respectfully Submitted,

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**ATTORNEYS FOR DEFENDANTS
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INSURANCE CO.**

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing was filed electronically on June 5, 2025. Notice of this filing will be sent by operation of the Court's electronic filing system to all parties indicated on the electronic filing receipt.

s/ John B. Shely
John B. Shely

General Information

Case Name	Guardian Flight LLC et al v. AETNA Life Insurance Company Inc et al
Court	U.S. District Court for the District of Connecticut
Date Filed	Thu Apr 11 00:00:00 EDT 2024
Judge(s)	Michael P. Shea
Federal Nature of Suit	Statutes: Other Statutory Actions [890]
Docket Number	3:24-cv-00680
Parties	AETNA Life Insurance Company Inc; Global Medical Response, Inc.; REACH Air Medical Services, LLC; CVS Pharmacy, Inc.; Cigna Health and Life Insurance Co.; Reach Air Medical Services LLC; Aetna Health Inc; Aetna Health and Life Insurance Company; CVS Health Corporation; Calstar Air Medical Services, LLC; Med-Trans Corporation; Air Evac EMS, Inc.; Guardian Flight LLC; AirMed International, LLC

**UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF CONNECTICUT**

GUARDIAN FLIGHT LLC, REACH AIR
MEDICAL SERVICES LLC, CALSTAR AIR
MEDICAL SERVICES, LLC, MED-TRANS
CORPORATION and AIR EVAC EMS, INC.,

Plaintiffs,

v.

AETNA LIFE INSURANCE COMPANY,
AETNA HEALTH, INC., AETNA HEALTH
AND LIFE INSURANCE COMPANY and
CIGNA HEALTH AND LIFE INSURANCE
COMPANY,

Defendants.

CIVIL ACTION NO. 3:24-CV-680
(MPS)(SDV)

**DEFENDANT CIGNA’S NOTICE OF JOINDER IN AETNA’S MOTION FOR
PERMISSION TO FILE INTERLOCUTORY APPEAL UNDER 28 U.S.C. § 1292(B) OF
THE COURT’S MAY 14, 2025, RULING ON MOTIONS TO DISMISS AND
MEMORANDUM IN SUPPORT**

Defendant Cigna Health and Life Insurance Company (“Cigna”), by and through its undersigned counsel, and pursuant to Local Civil Rule 7(a), files its Joinder in the Aetna Defendants¹ Motion for Permission to File Interlocutory Appeal Under 28 U.S.C. § 1292(b) of the Court’s May 14, 2025, Ruling on Motions to Dismiss and Memorandum in Support as follows:

1. On May 14, 2025, this Court entered its Ruling on Motions to Dismiss (Doc. 264.)
2. On June 5, 2025, Aetna filed its Motion for Permission to File Interlocutory Appeal under 28 U.S.C. § 1292(b) of this Court’s May 14, 2025, Ruling on Motions to Dismiss, and Memorandum in Support. (Doc. 274, 274-1.)
3. On June 13, 2025 Aetna filed its Notice of New Authority to apprise the Court of *Guardian Flight L.L.C. v. Health Care Service Corp.*, 2025 U.S. App. LEXIS 14509, No. 24-

¹ “Aetna Defendants” refers collectively to Aetna Health, Inc., Aetna Life Insurance Co., and Aetna Health and Life Insurance Co.

10561 (5th Cir. June 12, 2025) (“*Guardian Flight I*”) and *Guardian Flight, L.L.C. v. Med. Evaluators of Tex. Aso, L.L.C.*, 2025 U.S. App. LEXIS 14512, No. 24-20051, (5th Cir. June 12, 2025) (“*Guardian Flight II*”) in support of its pending motion for permission to file an interlocutory appeal. (Doc. 279, 279-1, 279-2; 274.)

4. Cigna hereby joins in and adopts Aetna’s Motion for Permission to File Interlocutory Appeal Under 28 U.S.C. § 1292(b) of the Court’s Ruling on Motions to Dismiss and Memorandum of Support as if fully set forth herein and requests that the relief sought therein be made applicable to Cigna, and for such other and further relief as the Court deems just and proper. (Doc. 274, 274-1.)

5. Cigna also joins and adopts Aetna’s Notice of New Authority as if fully set forth herein. (Doc. 279, 279-1, 279-2.)

HINSHAW & CULBERTSON LLP

/s/ Carol M. Rooney

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Company*

Dated: June 24, 2025

CERTIFICATE OF SERVICE

I certify that June 24, 2025, a true and correct copy of the forgoing was served via the Court's ECF system on all counsel of record.

/s/ Carol M. Rooney

Carol M. Rooney