IN THE COURT OF COMMON PLEAS 1 CUYAHOGA COUNTY, OHIO 2 3 TRACY ANN SMITH, ADMINISTRATRIX, etc., Plaintiffs, 5 Case No. 327828 VS 6 Judge Fuerst UNIVERSITY HOSPITALS OF 7 CLEVELAND, et al., 8 Defendants. 9 10 11 12 DEPOSITION OF KELLY STED TUESDAY, DECEMBER 21, 1999 13 14 The deposition of KELLY STED, the Witness 15 16 herein, called by counsel on behalf of the Defendants for examination under the statute, 17 taken before me, Vivian L. Gordon, a Registered 18 Diplomate Reporter and Notary Public in and for 19 the State of Ohio, pursuant to issuance of 20 21 subpoena and notice, at the offices of QualChoice Health Plan, 6000 Parkland Boulevard, Mayfield 22 23 Heights, Ohio, commencing at 9:30 o'clock a.m. on the day and date above set forth. 24 25

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APPEARANCES:
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     On behalf of the Plaintiff
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          BY:
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(Thereupon, STED Deposition

Exhibits A thru D were marked for purposes of identification.)

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KELLY STED, a witness herein, called for examination, as provided by the Ohio Rules of Civil Procedure, being by me first duly sworn, as hereinafter certified, was deposed and said as follows:

EXAMINATION ${f OF}$ KELLY STED

BY-MS. CUTHBERTSON:

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Q. Ms. Sted, my name is Patti Cuthbertson and I represent University Hospitals of Cleveland in a lawsuit brought by the family of Patricia Ann Smith against the hospital and several attending physicians. We are here today pursuant to a notice and subpoena duces tecum.

Let me ask you to do this. You told me previously that you haven't been deposed before. It's a question and answer session. You need to answer orally so the court reporter can take down your answers. But any time I do not make myself clear or you don't understand the question, please let me know or otherwise when

you answer, I will assume that you understood. 2 If you need to take a break, please let me know and we can do that. If at any time 3 you need to look at any of the documents produced 4 5 to me, please feel free to do so. Α. All right. 6 7 Please state your name, spelling it 8 for the court reporter. 9 Α. Kelly Ann Sted. K-E-L-L-Y, A-N-N, S-T-E-D. 1 0 11 Q. And what is your current work address? 12 Α. 6000 Parkland Boulevard, Mayfield Heights, 44124. 13 Q. And what is your home address, please? 14 3209 Lucerne L-U-C-E-R-N-E Avenue, Α. 1 5 that's Parma, 44134. 1 6 Tell me what your current position is 1 7 and who your employer is. 1 8 Manager of enrollment at QualChoice 19 Α. Health Plan. 2 0 Ο. How long have you held that position? 2 1 22 8-1/2 years. Well, that position, September of '98 I became the manager. Prior to 23 that I was supervisor. 2 4 Q. Supervisor of enrollment? 25

A. Of enrollment.

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- Q. How long did you hold that position?
- A. I am going to guess here. It's been a couple years. It was a couple years prior to me becoming a manager.
- Q. I don't want you to guess. If at any time during the deposition you are not sure of an answer, or you don't know, just tell me that you don't know.
- A. Okay. I am not sure of the time period I was supervisor.
- Q. How long have you been with OualChoice?
 - A. 8-1/2 years. August of '91.
- Q. Tell me what are your responsibilities as a manager of enrollment.
- A. To oversee the member maintenance activities, the addition, deletion, any activities having to do with membership maintenance, as well as group and billing activities, COBRA administration, Medicare and Medicaid maintenance.
- Q. During the time period 1994, 1995, what was your title at that point and what were your responsibilities?

- A. I'm not sure I remember what title I had at that time. I was still in the enrollment department and would have been responsible at that time for actually performing member maintenance. So the addition of applications, et cetera.
- Q. Were you familiar with the various types of plans under which QualChoice enrollees could be insured?
 - A. Yes.

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- Q. Are you familiar with the documentation that needed to be completed by the enrollee and by QualChoice to make those plans work?
 - A. Yes.
- Q. Are you familiar with the billing
 procedures then in terms of QualChoice and
 getting, you know, payments and bills taken care
 of?
- A. In regard to claims?
- 21 Q. Yes.
- A. Not really, no.
- Q. Who would be responsible for that at that point in time?
- A. 1994, again, I am not sure. I can't

1 remember. Let me go ahead and show you what's 2 marked as Defendant's Exhibit A. I will ask you 3 to take a look at that document and tell me if 4 5 you have seen it before? Α. 6 No. 7 Q, At any time prior to this deposition within the last six or eight weeks, did you 8 receive any legal papers? 9 In regard to this case? Α. 10 Q, Yes. 11 12 Α. No. Q, How did you become aware that your 13 deposition was requested for today? 14 Gaye and I worked together. 15 Α. Q. A number of documents were requested 16 in the duces tecum. Have you been involved in 17 gathering documents to be produced to us today? 18 Α. Yes. 19 Did you have a chance to -- strike Q, 20 that. 21 Did you review anything in preparation 22 for today's deposition? 23 In regard to the documents? 24 Α.

Q.

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Yes.

Α. Yes, to make sure that they were 1 applicable to this case in that time period. 2 3 Can you tell me what documents you reviewed? 4 The provider directory from April of Α. 5 '94, as well as the addendum from, I believe, 6 7 May of '94. 8 Q. Anything else? 9 The certificate of coverage for that period of time. 1 0 11 Q. Were you able to locate any documents, such as the application or enrollment form for 12 13 the decedent in this case, Patricia Ann Smith? Α. No. 14 15 At the time period we have been talking about, 1994, '95, would there be any 16 documents other than an enrollment form which 17 1 8 would be submitted by an enrollee to QualChoice? No. For the purpose of enrolling with 19 Α. 20 us? Q, 2 1 Yes. No. 22 Α. I was provided with a number of 23 Q. documents pursuant to the duces tecum. Why don't 24 I have you first identify the documents that were 25

produced. 1 2 I am going to hand you what we have marked as Defendant's Exhibit B. I will ask you 3 to take a look at that and identify that document 4 for us. 5 This is a certificate of coverage from 6 Α. approval date 1993, and this was in effect at the 7 time Mrs. Smith came on. 8 Q. So this would have been in effect as 9 of what date? 10 Α. It was approved in -- I believe that's 11 12 the approval day. 13 THE WITNESS: Gaye, confirm that. MS. ADAMS MASSEY: Yes. 14 January '93, and it was in effect at 15 Α. the time of her enrollment in May of '94. 16 Did these certificates of coverage 17 18 change during the time period Ms. Smith was enrolled through late 1995? 19 I can't answer that, I don't know. 20 Q . How would I find out if I wanted to 21 22 know whether that changed? I suppose we would have to check with 23 Α.

someone in the benefits area here. I don't know

if I can give you the best person that would be.

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Q . But someone in the area of benefits is who I would need to make inquiry with. 2 Let me hand you what is marked --3 Again, I am quessing on that. I am 4 Α. not sure about the person. 5 Q. Okay, that's fine. Let me hand you 6 what we have marked as Exhibit C and I would ask 7 you to identify that document for us. 8 This is an addendum to the provider 9 Α. directory to show any additions, changes, status 10 changes, deletions. 11 Do you know the time period in which 12 that document would have been in effect? 13 May of '94. 14 Α. Until when? 0, 15 I don't recall how often they were Α. 16 17 sending them out back then. Q. Okay. And finally, I will hand you 18 what's marked as Defendant's Exhibit D and ask 19 you to identify that as well. 20 This is the full directory of medical Α. 2 1 22 providers for the time period April of '94. There is some handwritten notations on 23 the front. It's 4-1-94. Is that your writing? 24 Actually it's the writing of someone 25 Α.

who was formerly in the department. Q. Who is that?

- A. Valerie Fosnight.
- Q. Could you spell that name, please?
- A. F-O-S-N-I-G-H-T.
- Q. But it's your understanding that that directory was in effect as of April 1, 1994?
 - A. Yes.

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Q. I am going ahead and at least walk through the duces tecum with you, and I am going to hand you Exhibit A back.

With respect to sub A, are there any documents that you are aware of that would be responsive to that request?

- A. No.
- Q. Are those documents, such as the bills, explanation of benefits, purged after a period of time?
 - A. That, I don't know.
- Q. Are you aware of whether those documents such as billing statements are retained for any period of time?
 - A. I don't know.
- 24 On sub B, that was a request for any third-party payments, third-party request for

payments made by the Family Practice Center.

Are you aware of whether there are any documents responsive to that request?

A. No.

- Q. If I wanted to make further inquiry and find out how long billing statements are retained, for example, is there a particular person or department that I would direct that request to?
 - A. In regard to claims?
 - Q. Yes. And payments.
- A. I would think our claims manager currently might be able to answer that. I am guessing.
- Q. How long, if you know, are the enrollee application forms maintained now?
- A. We keep them on site until they terminate. We then keep them for three months in case there is a COBRA election, and then they are sent off site. And off site they are kept, I am not even sure how long.
- Q. And am I using the correct terminology? It's called an enrollee --
- A. Applications.
- Q. -- application.

- A. Actually I believe we call them enrollment applications, to be specific.
- Q. Did you call them enrollment applications back in '94 and '95? The same terminology?
 - A. Yes.

- Q. And as far as we know, there are no documents responsive to sub C?
 - A. No.
 - Q. Let me ask you another question.

When a participating physician or a network provider departs the locality or no longer chooses to be a provider, in 1994, '95, was information sent to an enrollee informing them of that?

- A. That a provider had left our network; that there was a change?
 - Q, Yes.
- A. Again, in the addendums, it lists -- let's see if the actual section is correct here.

 I don't know how it was worded.

It indicates physician, additions, address changes, status changes, and deletions in these addendums. And again, I am not sure how often they were sent out back in '94 or '95, if

it was quarterly, I don't know. **so** those kind of changes were updated in here, and if physicians left the network, letters were sent to the members indicating such, giving them an opportunity to choose someone else.

That also applied if a physician changed addresses, would not be within a certain group any longer or at a certain address or affiliated with a certain facility; again, giving them a chance to chose another provider.

- Q. Do you know whether the letters such as you have described would be maintained by QualChoice for any period of time?
- A. I couldn't say that for certain. It's possible.
- Q. And then in terms of sub E, F, G and H, I think we have discussed all the documents that would be potentially responsive to those requests and there is none other than what have been produced here today?
 - A. No.

Q. Would there be any other documents other than billing statements that we have discussed, registration forms, or the enrollment application particular to an enrollee such as

Patricia Ann Smith that would be maintained now several years after she was no longer a QualChoice insured?

A. Not that I can think of.

Q. Tell me what period of time Ms. Smith was a QualChoice insured.

A. From May of '94 through November of '95.

Q. In following up on an early question, we talked about whether there would be any other documents available relative to Ms. Smith. Would there be any other computer stored information

Q. In following up on an early question, we talked about whether there would be any other documents available relative to Ms. Smith. Would there be any other computer stored information regarding Ms. Smith; billing statements, registration forms, consultants, anything like that?

A. None of those forms would be on line, no.

Q. Is there any document that corroborates the time period in which she was a QualChoice insured?

A. Those dates?

Q. Yes.

A. Basically just using the on line history of her enrollment record.

Q. What is included in the on line

history of her enrollment record? 1 2 Basically her -- what is the word I am looking for -- the demographic information, her 3 name, address, date of birth, ID number. 4 physician, group number, which would include 5 information regarding the type of plan she had. 6 7 0. Can that --8 Α. I'm sorry. Q. No, go ahead. 9 The dates that her policy were entered 10 Α. into the system, certain information. 11 0. Can that be printed off the computer? 12 I don't know. Can it be? 13 Α. Yes. Q. Is the ability there? 14 Yes, the ability is there. Α. 15 Q. That's the first question. 16 17 Α. Yes. Q. 18 Okay. MS. CUTHBERTSON: Off the record. 19 (Thereupon, a discussion was had off 20 the record.) 21 Are you familiar, do you know the type 22 of plan under which Ms. Smith was covered? Does 23 it have a particular name? 24 It was marketed as a point of service 25 Α.

plan.

- Q. And was that the plan under which she was covered during the entire time she was a QualChoice enrollee?
 - A. Yes.
- Q. Is that the correct terminology; QualChoice enrollee or QualChoice insured?
- A. QualChoice enrollee or insured. We refer to them as enrollees.
- Q. And that was an employer group sponsored plan?
 - A. Yes, it was a group plan.
- Q. I am going to go ahead and hand you what's been marked as Defendant's Exhibit B. You have already identified that for us as the certificate of coverage. Is this a true and correct copy of the certificate of coverage that would have been applicable to Ms. Smith?
 - A. Yes.
- \mathbb{Q} . Were there other documents provided other than what we have marked as exhibits -- strike that.

What documents were provided to enrollees just prior to or at the time of enrollment with respect to the QualChoice

coverage?

- A. In addition to the certificate of coverage, and the provider directory, there would have been a schedule of benefits at that time.

 Any other information that might have been input at that time, I don't recall. But those are the primary pieces that I am sure of.
- Q. Is there some accompanying information or instructions for the enrollee to complete the enrollment form?
- A. That would have been given to them from their employer. We wouldn't have sent those documents until after they were enrolled with us.
- Q. Is that a document that QualChoice would have provided to the employer for distribution?
 - A. The certificate?
- Q. No, the registration form.
 - A. We provide them the stock, right.
 - Q. What is the schedule of benefits?
 - A. That outlines the different co-pays, out-of-pocket co-insurance amounts for a specific plan, for a specific group.
 - Q. Were you able to locate the document that would have been in effect under which Ms.

Smith was covered?

- A. No.
- Q. **Do** you know if back in **1994** whether QualChoice would have sent a representative to Cleveland Board of Education, for example, Ms. Smith's employer, to give information to employees about the QualChoice plan?
 - A. I don't know.
- Q. Who at QualChoice would be the person that might know the answer to that question?
 - A. I think someone in marketing.
- \mathbb{Q} . Just tell me briefly, what is included in that certificate of coverage? What does it tell them?
- A. Everything. Eligibility and effective date. Continuation of coverage in regard to COBRA, things like that. How your plan works. Medical services, hospital care.

It goes into mental health and substance abuse, hospice, transplant, admissions by out of network physicians, case management, exclusions, coordination of benefits, Medicare and your coverage, grievances and appeals, subrogation, and miscellaneous provisions, and then there is a definition section.

0. Is there basically a textbook or 1 reference, if you will, for the enrollee? 2 Α. Yes. 3 Q, About what their plan covers? 4 It doesn't go into amounts. This is Α. 5 not group specific, whereas the schedule I 6 7 referred to would be more group specific, but this will go into how a point of service plan 8 works. 9 And in some respects, what the 10 enrollee's rights and responsibilities are under 11 12 the plan? Yes. 13 Α. Q. Does every enrollee have to select a 14 primary care physician? 15 Α. For this point of service plan, no. 16 Q. 17 In order to receive the highest level of benefits, must an enrollee select a primary 18 care physician? 19 Α. Yes. 20 Q, And must that physician be a 21 participating provider? 22 23 Α. Yes. Why don't you tell me what is a 24

primary care physician, as QualChoice defines

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- A. As we would define it in the case of someone over the age of 18, it would be either a family practice or an internal medicine provider, as described in the directory of providers, who manages the care of an enrollee and develops a relationship with that enrollee.
- Q. Are you familiar -- strike that.

 Now, the primary care physicians are not employees of QualChoice?
 - A. No.
- Q. They have a contractual arrangement, if you will, with QualChoice to provide certain kinds of covered services?
 - A. I believe so.
 - Q. Are you --
- A. I am not at all affiliated with the provider relations area.
- 19 Q. Would that question be better answered 20 by someone other than yourself?
 - A. Yes.
- Q. And that would be someone in provider relations?
- 24 A. Yes.
- 25 Q. In the certificate of coverage,

physicians who are in-network physicians are described as privately practicing physicians. What is your understanding of what that means?

- A. I don't know that I have one.
- Q. That's fine.

I think what you told me is that enrollees are not limited to in-network primary care physicians; they can choose an out of network physician; is that right?

- A. Yes, that's correct.
- Q. In order to get the various level of benefits, you need to choose that in-network physician?
- A. Right. There are three levels of benefits with the point of service plan. If you select an in-network primary care physician manager and allow him or her to manage your care and get services through that provider, that's option one, highest level of benefits.

Option two means you still see someone in the network, although you don't necessarily claim him as your primary care physician. Option two, which means probably a higher co-pay, probably a higher co-insurance.

Option three means you access care out

of network. Again, even higher amounts are going to be paid per visit, but you still have a benefit provided.

- Q. Does the enrollee have to indicate their primary care physician on their enrollment application?
- A. That's one way to select a provider, yes.
- Q. How else would an enrollee be able to select a provider?
- A. They can send something under separate cover in writing at a later date. They can call our customer service line, or they can do it through their group who then would contact enrollment or customer service to update that information.
- Q. And those were the ways to do it back in 1994?
 - A. Yes.

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- Q. Is an enrollee who has dependents required to choose a primary care physician for those dependents?
 - A. Not under a point of service plan, no.
 - Q. If the dependents -- strike that.

 If the enrollee wanted the dependents

to receive the option one level of coverage, would the enrollee have to choose a primary relationship care physician in-network?

A. Yes.

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- Q. For the dependents?
- A. Right.
- Q. Ms. Smith had two dependent children, one named Asia and one named Andrea.

Have you made inquiry as to whether the enrollment forms for those minor children are still available?

- A. If there are dependents on her policy, they would have been listed on her enrollee form. They wouldn't have their own.
- Q. Again, the whole point of this plan with the three levels of benefits is that the enrollee has the option to choose not only the level of benefits, but to choose the provider of those benefits?
 - A. Correct.
 - Q. I'm sorry, those services?
- A. Correct.
- 23 Q. Can an enrollee change their primary care physician?
- 25 A. Yes.

Q. And back in 1994, 1995, if an enrollee wanted to change their PCP -- I will use the shorthand -- what did they need or what option did they have to accomplish that?

- A. The same as we discussed. In writing or via phone.
- Q. If there was a telephone change, did the enrollee have to sign something authorizing or confirming that change?
 - A. No. Not to my memory, at least.
- Q. Is there someone else who might be better able to answer that question?
- A. If there is, I can't think. Possibly provider relations or maintenance, again.
- Q. I will go ahead and show you what's marked as Exhibit D.

Tell me, again, how does the provider directory get to the enrollee? What are the mechanisms for that to reach the enrollee?

- A. Okay. I believe that it's provided to them by their employer, and they become a new employee. And at that time, we mailed them in the new packet, as well.
 - Q. Mailed them to the employers?
 - A. **To** the enrollees.

- Q. Or to the enrollees?
- A. Uh-huh.

- Q. And you described something you called a new packet. What would be in the new packet of information?
- A. Okay. And that's what we discussed earlier. The provider directory, the certificate of coverage, their ID cards, a schedule of benefits, and any accompanying riders, which, I don't know what applied at that time, and then there might be various other brochures, et cetera. And again, I don't know what would have been included for this particular group at that time.
- Q. Are you aware of whether in 1994, '95, there was a brochure that described selecting your PCP, changing your PCP, something other than these documents here, these exhibits we have referred to?
 - A. Outside of these, no. Not that I remember.
 - You don't remember one? **Would** that be more the responsibility or purview of the marketing department?
- A. Right.

Q. Would it be the expectation of QualChoice that enrollees would refer to the documents such as we have marked today as Exhibits B, C and D? Α. Oh, yes. **a** . To obtain services, to choose a PCP, to change their PCP, to have described to them the level of benefits and other things? Α. Yes. And again, Exhibits B, C and D, are fair and accurate representations of what Ms. Smith would have received as an enrollee back in May of 1994? Α. Yes. Would you go ahead and take a look at Q, pages 9 through 12, which are the family practitioners listed in Exhibit D. Now, those practitioners are listed by individual physician, am I right? Α. Yes. Q, The individual -- strike that.

There is no listing for the Family

Practice Center at University Hospitals of Cleveland in your provider directory?

> Α. No.

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- Q. The arrangements, I mean the providers are of the individual physicians only? Α. Right. Q. Are you aware of whether any of these physicians are affiliated with QualChoice other than the fact that they have agreed to provide covered services? I am not sure I understand that. Α. Q. I will rephrase it. As far as you know, these various physicians listed here aren't employees or otherwise affiliated with QualChoice, are they? Α. As far as I know, no. Q. Okay. Now, Dr. Michael Rowane is a family practitioner listed in Exhibit D. wonder if you would turn to the page where Dr. Rowane's name appears. There is nothing under his name, is there, that identifies him as being a University Hospitals of Cleveland physician, is there?
- 21 A. No.

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- Q. It just says Michael Rowane, with his identification number and address?
- A. Yes. And phone number.
- Q. And phone number.

He is not listed as part of any group practice, is he, like some of the others listed there? Α. No. Q, Was it ever the practice of QualChoice to try to steer a patient to a particular physician or physician group? Α. No. Ο, Has it ever been the practice of OualChoice to do that? No. Α. **So** basically an enrollee who wants to 0. receive the network highest level of benefits can go to any one of those family practitioners listed there? Yes. Α.

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- Q. Who is accepting new patients?
- A. Who is accepting new patients or who has accepted someone to be a new patient.
- Q. Okay. Now, in fact, back on page 81

 -- it's the very last page -- there is an important -- the page is captioned important notice, and that informs the enrollees that the selection of provider is solely their responsibility; is that right?

Take your time to read it.

(Pause.)

A. Yes.

- Q. **So** QualChoice doesn't select the PCP for the enrollees?
 - A. No, not for a point of service.
 - Q. If a patient -- or strike that.

If an enrollee was to stay, for example, they wanted to change primary care practitioners, would you be the person that would receive those kinds of questions or inquiries regarding that?

- A. Myself, customer service possibly.
- Q. Was that true back in '94, '95?
- A. Yes.
- po you ever recall back in that time frame, or really to today, ever receiving any complaint from a QualChoice enrollee that they were not given a choice of PCP and were assigned to a physician?
 - A. Not for a point of service plan.
- Q. I think I know the answer, but with respect to Ms. Smith, you don't ever remember receiving some phone call from her that she was assigned to a primary care practitioner, not

allowed to choose?

- A. No.
- Q. Would you keep in your possession, custody and control documents relative, complaints or telephone inquiries that you would get along the lines of the question I just asked?
- A. They would have been kept with the enrollment application.
- Q. And you didn't find any such document with respect to Ms. Smith?
 - A. No.

MS. CUTHBERTSON: Why don't you go ahead, Jeanne, and while you are doing that I will check my notes quick.

Q. My name is Jeanne Tosti and I am here representing the plaintiff in this case.

Could you tell me what a point of service plan is? Just generally.

A. It outlines three options for accessing benefits. The first option one, which is the highest level benefits, is available to those people who not only name or select a primary care physician, but access services

through that primary care physician.

Q. Now, you discussed those before and I am just wondering, point of service, why that title is used.

I understand your previous descriptions of those three levels in selecting various in plan providers or out of plan providers, but what does point of service refer to?

- A. I am not sure I can answer that for you. That was the marketed name of the plan that I described.
- 13 Q. Now, you have absolutely no records on
 14 Patricia Smith prior to May 1994; is that
 15 correct?
 - A. Prior to her enrolling with us?
- 17 Q. Yes.

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- 18 A. No.
- 20 documentation of what occurred in regard to her health care prior to that enrollment date; correct?
- 23 A. No.
- Q. Do you know whether all of the physicians at the Family Practice Center at

University Hospital were QualChoice plan providers?

- A. I don't know.
- Q. Do you know how University Hospitals was organized in regard to how care was being provided at the Family Practice Center?
 - A. I don't.

- Q. Now, the QualChoice plan required that the patients select a primary care physician; correct?
- A. In order to achieve option one benefits.
- Q. At the Family Practice Center, many times the care provided there was provided by resident physicians, attending physicians, nurse practitioners.

Did QualChoice pay the bills for all of those things? If there was a designated primary care physician on their enrollment form, but they in actuality were receiving care from a variety of people at the Family Practice Center, did QualChoice pay the bills for that?

- A. I am not sure I can answer that. It's outside of the scope of enrollment.
 - Q. Who would answer that?

- A. I would think a claims person, but I am not sure.
- Q. Now, you indicated QualChoice had no responsibility for selecting a physician for the enrollees; correct?
 - A. Correct.

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- Q. But you really have no knowledge or documentation as to how the patients ended up selecting whoever they put on their enrollment form; correct?
 - A. I'm sorry.
- Q. You have no knowledge or documentation as to the process or as to what went into a particular patient selecting a primary care physician; correct?
 - A. As far as how to go about doing it?
- Q. As to how in a particular situation that enrollee selected that physician as a primary care physician? You don't know how that process occurred?
- A. I just know the end result. We ended up selecting.
- Q. You don't know whether that name was suggested to them?
- A. No.

- Q. Or whether somebody said, you know, this is a good provider, or what the various factors were? Α. Correct. The only thing QualChoice has is a document from the enrollee that has a physician's name on it, and that physician is one of the physicians from the provider directory; correct? Α. Correct. 0. And in Patricia Smith's case, QualChoice, as far as you know, has no documentation as to how Dr. Rowane was selected as her primary care provider; correct? Α. No. MS. TOSTI: That's all the questions I have. EXAMINATION OF KELLY STED BY-MS. CUTHBERTSON: O. One last question. If a potential enrollee had a primary
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care physician from whom they had obtained services and then subsequently became a QualChoice enrollee, they would need to identify that physician to QualChoice in order to receive the highest level of benefits, assuming that

physician is an in-network provider?

- A. If they had obtained services prior to enrolling with us?
 - Q. Yes.

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- A. I'm not sure we would be concerned with those services.
- Q. No, my -- and good point. Let me rephrase that.
 - A. Okay.
- Q. If the person, if a potential enrollee had been obtaining services from a primary care physician and subsequently became a QualChoice enrollee, the enrollee would have to identify that physician to QualChoice in order to keep receiving services from that physician at the highest level of benefits, assuming that doctor is an in-network provider?
- A. Yes. Well, I'm sorry. Maybe I misunderstood, but I had a thought there, wait.

Yes, they would need to identify that provider in order to obtain option one, but they could potentially continue to see that provider and still obtain option two benefits even though they didn't make us aware this is my primary care physician.

1	Q. And that choice rests solely with the
2	enrollee?
3	A. Correct.
4	MS. CUTHBERTSON: That's all we have.
5	Do you want to instruct her about reading? Maybe
6	you have a practice here.
7	You have a right to read and review
8	this transcript. Ms. Adams Massey will instruct
9	you. You also have the right to waive reading
10	and signing of the deposition.
11	I will let her advise you one way or
12	the other.
13	THE WITNESS: I would like to read it
14	to make sure.
15	MS. CUTHBERTSON: We will waive the
16	seven day reading rule and I will order a copy.
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18	(Deposition concluded at 10:30 a.m.;
19	signature not waived.)
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1	AFFIDAVIT
2	I have read the foregoing transcript from
3	page 1 through 37 and note the following
4	corrections:
5	PAGE LINE REQUESTED CHANGE
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17	KELLY STED
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23	Notary Public
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25	My commission expires

CERTIFICATE 2 State of Ohio, SS: 3 County of Cuyahoga.) 4 I, Vivian L. Gordon, a Notary Public within 5 and for the State of Ohio, duly commissioned and 6 qualified, do hereby certify that the within named KELLY STED was by me first duly sworn to 7 testify to the truth, the whole truth and nothing but the truth in the cause aforesaid; that the 8 testimony as above set forth was by me reduced to stenotypy, afterwards transcribed, and that the 9 foregoing is a true and correct transcription of the testimony. 10 I do further certify that this deposition was taken at the time and place specified and was 11 completed without adjournment; that I am not a relative or attorney for either party or 12 otherwise interested in the event of this action. 13 IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal of office at Cleveland, 14 Ohio, on this 28th day of December, 1999. 15 16 Vivian L. Gordon, Notary Public 17 Within and for the State of Ohio 18 My commission expires June 8, 2004. 19 20 21 22 23 24 25

1	EXAMINATION OF KELLY STED	
2	BY-MS. CUTHBERTSON:	11
3	BY-MS. TOSTI:	8
4	BY-MS. CUTHBERTSON:	8
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6	Exhibits A thru D	2
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