

**UNITED STATES OF AMERICA
BEFORE FEDERAL TRADE COMMISSION**

In the Matter of
NORTH TEXAS SPECIALITY PHYSICIANS,

a corporation.

Docket No. 9312

COMPLAINT COUNSEL'S PRELIMINARY WITNESS LIST

Pursuant to the scheduling order in this matter, complaint counsel submits our preliminary witness list. We reserve the right:

- A. to present testimony, by deposition or orally by live witness, from any other person who has been or may be identified by respondents as a potential witness in this matter and any person from whom discovery is sought;
- B. to further supplement this witness list as circumstances may warrant, in accordance with the scheduling order;
- C. to identify rebuttal witnesses as soon as we have had an opportunity to depose the respondent's witnesses (and other company representatives), and once we have received the respondent's expert reports; and
- D. not to call any of the persons listed below to testify at the hearing, as circumstances may warrant.

Subject to these reservations of rights, our preliminary list of witnesses is as follows:

- NTSP’s explicit or implicit refusals to deal or collective de participations, or threats to do either.
- Utilization review, case management, quality assurance, and credentialing.

3. Thomas Quirk and Dr. David Ellis, United Healthcare of Texas

Thomas Quirk is CEO and President and Dr. Ellis is Medical Director for United Healthcare of Texas (“UHC”). We expect them and/or another representative of UHC to testify about:

- The nature of UHC.
- Different types of health insurance, including HMO and PPO products.
- NTSP and its participating physicians.
- Physician, hospital, and health plan competition in Tarrant County and adjacent Counties in Texas, as well as other areas.
- Communications and negotiations with NTSP or its participating physicians.
- The cost of physician services.
- Physician compensation under the FFS contracts that NTSP negotiated or sought to negotiate.
- Physician compensation under other FFS contracts.
- NTSP’s failure to timely messenger or convey to its participating physicians offers that did not provide for compensation acceptable to NTSP.
- NTSP’s explicit or implicit refusals to deal or collective de participations, or threats to do either.
- Utilization review, case management, quality assurance, and credentialing.

4. Dave Roberts, Dr. Chris Jagmin, and Celina Burns, Aetna, Inc.

Dave Roberts is Senior Network Manager, Dr. Chris Jagmin is Medical Director, Patient Management, and Celina Burns was General Manager for Aetna, Inc. We expect them and/or another representative of Aetna, Inc. to testify about:

- The nature of Aetna, Inc.
- Different types of health insurance, including HMO and PPO products.
- NTSP and its participating physicians.
- Physician, hospital, and health plan competition in Tarrant County and adjacent Counties in Texas, as well as other areas.
- Communications and negotiations with NTSP or its participating physicians.
- The cost of physician services.
- Physician compensation under the FFS contracts that NTSP negotiated or sought to negotiate.

- Physician compensation under other FFS contracts.
- NTSP's failure to timely messenger or convey to its participating physicians offers that did not provide for compensation acceptable to NTSP.
- NTSP's explicit or implicit refusals to deal or collective de participations, or threats to do either.
- Utilization review, case management, quality assurance, and credentialing.

5. Diane Youngblood, Health Texas Provider Network

Diane Youngblood is Vice President of Network Management for Health Texas Provider Network (“HTPN”). We expect Ms. Youngblood and/or another representative of HTPN to testify about:

- HTPN, which is an IPA.
- NTSP and its participating physicians.
- Communications with NTSP and/or its participating physicians.
- HTPN's affiliation with NTSP and/or its participating physicians and any other agreements between NTSP and HTPN.
- NTSP' explicit or implicit refusals to deal or collective de participations, or threats to do either.

6. Jim Mosley, Benefits Consultant for Effective Plan Management, Inc.

We expect Mr. Mosley and/or a representative of the City of Fort Worth to testify about:

- Effective Plan Management, Inc., which is a benefits consulting company for the City of Fort Worth.
- Physician, hospital, and health plan competition in Tarrant County, Texas and adjacent Counties.
- The purpose, nature, and affect of Effective Plan Management, Inc.'s and the City of Fort Worth's relationship with payors, third party administrators, brokers, or consultants in Tarrant County and adjacent Counties in Texas, as well as other areas.
- Communications with such entities.
- Criteria used in selecting a plan administrator.
- Discussions concerning contracting with physicians' organizations.
- The price of medical services, including physician services, and the effect of same on the City of Fort Worth.
- Standards used concerning or assessing minimum or desirable physician coverage levels in Tarrant County and adjacent Counties in Texas.
- Geographic access studies performed by or for City of Fort Worth.

- NTSP and its participating physicians.
- NTSP's physician boards and committees.
- The formation and purpose of NTSP.
- The operations and functions of NTSP.
- The creation and purpose of NTSP's polling instrument.
- The work Dr. Vance performed on NTSP's behalf.
- Different types of health insurance, including HMO and PPO products.
- Physician, hospital, and health plan competition in Tarrant County, Texas and adjacent Counties.
- NTSP's relationship and affiliation with physicians, physician organizations, payors, and employers.
- Communications and negotiations with physicians, physician organizations, payors, and employers.
- The cost of physician services.
- Physician compensation under the FFS contracts that NTSP negotiated or sought to negotiate.
- Physician compensation under other FFS contracts.
- NTSP's failure to timely messenger or convey to its participating physicians offers that did not provide for compensation acceptable to NTSP.
- NTSP's explicit or implicit refusals to deal or collective de participations, or threats to do either.
- Utilization review, case management, quality assurance, and credentialing.
- NTSP's purported efficiencies.

3. NTSP

We expect to call other representatives of NTSP to testify about:

- NTSP and its participating physicians.
- NTSP's physician boards and committees.
- The formation and purpose of NTSP.
- The operations and functions of NTSP.
- The creation and purpose of NTSP's polling instrument.
- Different types of health insurance, including HMO and PPO products.
- Physician, hospital, and health plan competition in Tarrant County, Texas and adjacent Counties.
- NTSP's relationship and affiliation with physicians, physician organizations, payors, and employers.
- Communications and negotiations with physicians, physician organizations, payors, and employers.
- The cost of physician services.

- Physician compensation under the FFS contracts that NTSP negotiated or sought to negotiate.
- Physician compensation under other FFS contracts.
- NTSP's failure to timely messenger or convey to its participating physicians offers that did not provide for compensation acceptable to NTSP.
- NTSP's explicit or implicit refusals to deal or collective departicipations, or threats to do either.
- Utilization review, case management, quality assurance, and credentialing.
- NTSP's purported efficiencies.

4. NTSP Participating Physicians and/or their Office Managers

We expect to call some of NTSP physician members and/or their office managers. We expect them to testify about:

- NTSP and its participating physicians.
- NTSP's physician boards and committees.
- The formation and purpose of NTSP.
- The operations and functions of NTSP.
- The creation and purpose of NTSP's polling instrument.
- Different types of health insurance, including HMO and PPO products.
- Physician, hospital, and health plan competition in Tarrant County, Texas and adjacent Counties.
- NTSP's relationship and affiliation with physicians, physician organizations, payors, and employers.
- Communications and negotiations with physicians, physician organizations, payors, and employers.
- The cost of physician services.
- Physician compensation under the FFS contracts that NTSP negotiated or sought to negotiate.
- Physician compensation under other FFS contracts.
- NTSP's failure to timely messenger or convey to its participating physicians offers that did not provide for compensation acceptable to NTSP.
- NTSP's explicit or implicit refusals to deal or collective departicipations, or threats to do either.
- Utilization review, case management, quality assurance, and credentialing.
- NTSP's purported efficiencies.

Respectfully Submitted,

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Dated: December 9, 2003

