# UNITED STATES DISTRICT COURT DISTRICT OF NEW JERSEY

GENESIS LABORATORY
MANAGEMENT LLC,

Plaintiff,

v.

UNITED HEALTH GROUP, INC., UNITED HEALTHCARE SERVICES, INC., OXFORD HEALTH PLANS, INC.,

Defendants.

Civil Case No.

**COMPLAINT** 

PLAINTIFF REQUESTS A TRIAL BY JURY

Plaintiff Genesis Laboratory Management LLC ("Plaintiff" or "Genesis"), by and through their attorneys, by way of Complaint against the Defendants UnitedHealth Group, Inc. United Healthcare Services, Inc., and Oxford Health Plans, Inc. (collectively "United" or "Defendants") alleges as follows:

# **THE PARTIES**

1. Plaintiff Genesis is a limited liability company organized and existing under the laws of the State of New Jersey with its principal place of business at 1912 Highway 35, Oakhurst, New Jersey, 07755.

- 2. Defendant UnitedHealth Group, Inc. is a publicly traded Delaware corporation with its principal place of business in Minneapolis, Minnesota. It issues health insurance and administers group health plans nationally through its various wholly-owned and controlled subsidiaries, including but not limited to United Healthcare Services, Inc. UnitedHealth Group, Inc. may be served with process by serving its registered agent for service The Corporation Trust Company, 1209 Orange Street, Wilmington, Delaware 19801.
- 3. Defendant United Healthcare Services, Inc. is a corporation organized under the laws of the State of Minnesota, with its principal place of business in Minnetonka, Minnesota. It is a foreign for-profit corporation operating in the State of New Jersey, and it issues health insurance and administers plans that are funded by plan sponsors in New Jersey. It is a wholly-owned subsidiary of UnitedHealth Group, Inc. United Healthcare Services, Inc. may be served with process by serving its registered agent for service CT Corporation System, 1010 Dale Street N, St. Paul, Minnesota, 55117-5603.
- 4. Defendant Oxford Health Plans, Inc. ("Oxford") is a wholly-owned subsidiary of UnitedHealth Group incorporated in Delaware with its principal place of business at 48 Monroe Turnpike, Trumbull, Connecticut 06611. Oxford is a foreign for-profit corporation operating in the State of New Jersey, and it issues health insurance and administers plans that are funded by plan sponsors in New

Jersey. Oxford may be served with process by serving its registered agent for service The Corporation Trust Company, 1209 Orange Street, Wilmington, Delaware 19801.

#### **JURISDICTION AND VENUE**

- 5. This Court has jurisdiction over this dispute under 28 U.S.C. § 1331 because Genesis asserts federal claims against United under the Families First Coronavirus Response Act ("FFCRA") and the Coronavirus Aid, Relief, and Economic Security ("CARES") Act. This Court also has jurisdiction over this dispute under 28 U.S.C. § 1332 because the amount in controversy exceeds \$75,000 and complete diversity of citizenship exists.
- 6. This Court has supplemental jurisdiction over Genesis's state law claims pursuant to 28 U.S.C. § 1367 because all claims alleged herein form part of the same case or controversy under Article III of the United States Constitution.
- 7. This Court has personal jurisdiction over Defendants because Defendants regularly conduct business in the State of New Jersey and have engaged in the conduct herein in New Jersey targeted toward New Jersey residents, business, and/or interests.
- 8. Venue is proper in this Court pursuant to 28 U.S.C. § 1391 because a substantial part of the events or omissions giving rise to the claims alleged herein occurred in this judicial district and because Defendants conduct a substantial

amount of business in this judicial district. In addition, many of Defendants' health plans, customers, and members can be found within this district.

#### **FACTUAL ALLEGATIONS**

- 9. Despite its reported earning of \$15.4 billion in profits in 2020, United is failing at its obligation to cover COVID testing. Indeed, while businesses across the country continued to grapple with economic loss in the face of a global pandemic, UnitedHealth Group reported that its first quarter 2021 revenues of \$70.2 billion grew \$5.8 billion or 9.0% year-over-year. A recent New York Times article specifically called out United for its shockingly low reimbursement rates and failure to fully cover COVID tests, noting that the American Academy of Pediatrics and the California Medical Association have been unable to receive satisfactory responses on these issues with United. *See* Sarah Kliff, NEW YORK TIMES, "Burned by Low Reimbursements, Some Doctors Stop Testing for Covid" (Feb. 3, 2021).
- 10. Congress took special and extraordinary steps during the pandemic to require health plans and health insurance issuers like United to cover and pay the cost of coronavirus testing as a mechanism to fight the pandemic. As part of these efforts, Congress prohibited health plans and health insurance issuers from imposing any prior authorization or other medical management requirements on testing for the

<sup>&</sup>lt;sup>1</sup> See https://www.unitedhealthgroup.com/newsroom/2021/2021-4-15-first-quarter-results.html.

diagnosis of COVID-19, whether obtained in- or out-of-network. *See* FFCRA § 6001(a). United's conduct is the antithesis of what Congress intended for health plans to do to combat COVID.

- 11. At issue in this dispute is United's failure to pay approximately 51,000 clean claims for COVID-19 diagnostic testing that Genesis provided and continues to provide to United members and beneficiaries. In addition to failing to reimburse Genesis for providing covered COVID testing services, United has acted in bad faith by erecting hurdles to payment without justification, such as by making approximately 51,000 burdensome medical records requests directed to Genesis or denying claims for immaterial reasons unrelated to the medical necessity of the testing.
- 12. In addition, United has underpaid or failed to pay for approximately 6,860 claims for testing services unrelated to COVID-19, including Pathology, Cytology Services, and Molecular Testing. Moreover, United has made burdensome and unjustified medical records requests directed to Genesis unrelated to the medical necessity of these tests.

## **Relationship Between the Parties**

13. Genesis is a New Jersey-based independent, full-service molecular diagnostic and anatomic pathology laboratory offering an array of testing services.

- 14. Genesis's laboratory is accredited by the College of American Pathologists and certified under the federal Clinical Laboratory Improvement Amendments ("CLIA") with license number 31D1103468. Genesis is licensed to accept specimens from all 50 states.
- 15. United is in the business of issuing and administering insurance contracts and administering health benefit plans, including to insureds, plan members, and beneficiaries within the State of New Jersey. United is required to make benefit payments from its own assets (for fully insured plans) or the assets of the relevant plan (for self-funded plans) when an individual covered by one of the plans obtains healthcare services covered by the plan.
- 16. Genesis is a non-participating, or out-of-network, provider of services in that it does not have a contract with United to accept rates for the services provided to United members or beneficiaries, notwithstanding multiple attempts to become in-network with United. Genesis submits claims for reimbursement of the testing services to United, including COVID-19 diagnostic testing and related testing, provided to United's members.

## **Genesis's Role in Fighting the COVID-19 Pandemic**

17. From the start of the COVID-19 pandemic, Genesis has offered COVID-19 in vitro diagnostic testing for the detection of the virus that causes COVID-19. Genesis also later offered COVID-19 antibody testing. Genesis began

offering and focusing its resources on COVID-19 testing services as part of its commitment to combatting the COVID-19 pandemic in New Jersey and nationally. Throughout the pandemic, Genesis has offered COVID-19 testing services 24 hours per day and 7 days a week to help clinicians quickly and accurately diagnose COVID-19 and detect the presence of COVID-19 antibodies and provide patients with timely infection information.

- 18. In total, from the start of the pandemic through the present, Genesis provided COVID-19-related testing services to over 51,000 patients who are members or beneficiaries of Defendants' health plans. This number continues to grow. Despite Defendants' failure to pay for these testing services, Genesis has never refused to treat their members. In fact, Genesis was induced to continue performing testing services for Defendants' members because United initially paid COVID-19 testing charges during the early stages of the pandemic before it routinely stopped doing so.
- 19. The testing services were medically necessary and appropriate according to recognized medical standards and standards announced by Congress and the Department of Health and Human Services.

## Federal Rules Require United to Pay Genesis for Out-of-Network COVID-19 Testing

20. Based on provisions of the FFCRA and CARES Act, as discussed below, Genesis had every expectation that United would honor its obligations and

reimburse Genesis for the COVID-19-related testing services provided to United's members and beneficiaries. Genesis has been, and continues to be, harmed by United's failure to pay valid claims that Genesis submitted to United for reimbursement for services to United's members and beneficiaries.

- 21. Congress, as well as the Trump and Biden Administrations, have clarified that group health plans and health insurance issuers like Defendants must cover and reimburse COVID-19 testing and related services. Such rules have been laid out not just in the text of the FFCRA and CARES Act, but also in a series of "Frequently Asked Questions" ("FAQs") documents issued and publicly posted by the federal Department of Health and Human Services ("HHS"). United's failure to properly reimburse Genesis for COVID-19 testing services violates these reimbursement rules, as explained in detail below.
- 22. Under Section 6001 of the FFCRA, as amended by Section 3201 of the CARES Act, United must provide benefits for certain COVID-19-related items and services, including COVID-19 testing, furnished beginning March 18, 2020. United "must provide this coverage without imposing any cost-sharing requirements (including deductibles, copayments, and coinsurance), prior authorization, or other medical management requirements." *See* FFCRA, § 6001(a); FAQs About Families First Coronavirus Response Act and Coronavirus Aid, Relief, and Economic

Security Act Implementation (hereinafter "FAQs"), Part 44, pp. 1-2 (February 26, 2021).

- 23. Moreover, the FAQs clarify that plans and issuers are prohibited from imposing specific screening criteria on coverage of COVID-19 diagnostic testing for an asymptomatic person who has no known or suspected exposure to COVID-19. Thus, "[w]hen an individual seeks and receives a COVID-19 diagnostic test from a licensed or authorized health care provider, or when a licensed or authorized health care provider refers an individual for a COVID-19 diagnostic test, plans and issuers generally must assume that the receipt of the test reflects an 'individualized clinical assessment' and the test should be covered without cost sharing, prior authorization, or other medical management requirements." FAQs, Part 44, pp. 2-3.
- 24. The CARES Act amendments to the FFCRA specify that health plans such as United must reimburse any provider of COVID-19 diagnostic testing, whether in-network or out-of-network. Specifically, Section 3202 of the CARES Act states that if United "does not have a negotiated rate with such provider, [United] shall reimburse the provider in an amount that equals the cash price for such service as listed by the provider on a public internet website[.]" *See* CARES Act, § 3202(a)(2), Pub. L. 116-136; *see also* 42 U.S.C. § 256b Note.
- 25. United also had the opportunity, as recognized by the CARES Act, to "negotiate a rate with such provider for less than [the cash price on the website],"

*id.*, but United did not make any effort to negotiate a rate with Genesis. To date, United still has not attempted to negotiate any rate with Genesis.

- 26. In compliance with Section 3202(b)(1) of the CARES Act, Genesis has posted on its public website (https://labofchoice.com/billing) the cash price of its COVID-19 diagnostic test since March 2020. The cash price listed by Genesis was \$256.65 until mid-April, when it was updated to \$513.00 at the time CMS doubled the fee schedule reimbursement amount for Medicare COVID-19 testing reimbursement.
- 27. Because United has not negotiated a rate with Genesis (or even attempted to do so), United is obligated to reimburse Genesis for COVID-19 testing services at a rate of \$513 per test from April 15, 2020 to the present and, prior to that, at the publicly listed rate of \$256.65, unless reimbursement for the type of claim at issue is adjusted by contract or by statute, which is the case for certain governmental health plan participants.
- 28. Federal guidance under the FFCRA and CARES Act is also clear that United's obligation extends to a wide array of coverage and testing types. The FFCRA/CARES Act payment rules apply to "group health plans and health insurance issuers offering group or individual health insurance coverage (including grandfathered health plans)." This definition specifically includes "both insured and self-insured group health plans," including "private employment-based group health

plans (ERISA plans), non-federal governmental plans...and church plans." *See* FAQs, Part 42, Q1 (April 11, 2020).

- 29. United's reimbursement obligations also apply to all manner of in vitro COVID-19 diagnostic testing, including serological (otherwise known as "antibody") testing, and tests administered at home through self-collection. *See* FAQs, Part 42, Q1 (April 11, 2020); FAQs, Part 43, Q4 (June 23, 2020).
- 30. Based on the above provisions, there can be no debate that federal law requires United to pay for COVID-19 testing services provided by Genesis. Regulators have even warned that plans and issuers shall not attempt to "limit or eliminate other benefits . . . to offset the costs of increasing the generosity of benefits related to the diagnosis and/or treatment of COVID-19." *See* FAQs, Part 42, Q9 (April 11, 2020).
- 31. United's failure to pay approximately 51,000 claims is a clear violation of those obligations. United's actions are particularly reprehensible given the increased operational costs and burdens that Genesis has undertaken to join the State of New Jersey in the fight against COVID-19. Genesis remained open and tested over 700,000 patients during the heart of the pandemic, absorbing increased costs to protect patients and employees, as well as obtaining and providing test results in a timely manner (usually within 48 to 96 hours). To absorb this risk without

reimbursement is the antithesis of what Congress mandated that health plans must do in the FFCRA and CARES Act.

## **United Inappropriately Withheld Payment for COVID-19 Testing Services In Bad Faith**

- 32. In connection with the COVID-19 diagnostic testing and related testing provided to United members who received testing services at issue in this lawsuit, Genesis timely submitted claims for payment to United and billed the cash price for the relevant service publicly posted on Genesis' website, as permitted by the CARES Act.
- 33. United's behavior with respect to payment for COVID testing services rendered by Genesis has been erratic and inconsistent. United has paid the majority of claims for COVID-19 diagnostic testing and related testing that Genesis submitted for testing provided at the outset of the pandemic in March, April, and May 2020. Genesis had no reason to expect that United would begin to deny payment for testing that Genesis provided to United members and beneficiaries beginning around June 2020, but that is precisely what happened. For testing provided from June 2020 and onward, United has been systematically denying payment for those claims, even though Genesis's testing, billing, documentation, and other practices have been the same throughout the COVID-19 pandemic.
- 34. Instead of issuing payment, United has elected to send an unreasonable number of requests for clinical records and other supporting documents for the

services that Genesis provided United's members and beneficiaries. United is demanding that Genesis produce voluminous patient treatment and other records with tight response time demands. Genesis cannot feasibly comply with United's requests.

- 35. For example, United has denied payment for a series of claims and is refusing to pay unless Genesis produces clinical and operational documentation within 30 days of United's request. This documentation included physician orders, requisitions, pathology laboratory standing orders, reports, "correspondence", patient intake forms, patient initial/visit consultation forms, copies of CLIA certificates for 6 years, CMS-116 applications, types of equipment used for testing, reagent supply lists and invoices for 6 months, lists of reference labs used and tests designated as send-out-tests, identification and credentials for every onsite technical lab staff member, specimen and transport logs, average daily test volumes, average daily send-out test volumes, inspection and proficiency test reports, information for how each testing specimen is received, and COVID-19 testing kits used and photographs of all contents of the kits.
- 36. For both COVID-related and non-COVID-related testing, Genesis does not have ready access to most of the clinical documents requested by United because it is a laboratory and not the treating provider. Although United issues its medical records requests to Genesis, Genesis could not respond to various items in the

request unless it submitted requests for these detailed clinical records to the treating provider ordering the test. Genesis has no control over whether other providers will comply with its documentation requests (much less in the 30-day window demanded by United). Moreover, these treating providers are often themselves within United's "network" of participating providers. Accordingly, United – not Genesis – has far greater access to and control over the documents it seeks because the source of the documents is with United's own participating providers.

Regardless of access to records, United's requests contravene the 37. instructions in the FFCRA, CARES Act, and follow-on FAQs, which clarify that United must reimburse out-of-network laboratories like Genesis without engaging in "medical management." It is disingenuous, not to mention illegal, for United to claim that it must review detailed clinical records to determine a patient's symptoms before covering the COVID-19 test. Federal guidance states that, under the FFCRA and CARES Act, plans and issuers cannot "use medical screening criteria to deny (or impose cost sharing on) a claim for COVID-19 diagnostic testing" for asymptomatic patients, and they "cannot require the presence of symptoms or a recent known or suspected exposure, or otherwise impose medical screening criteria on coverage of tests." FAQs, Part 44 Q1 (Feb. 26, 2021). Congress, in enacting the FFCRA, prohibited plans and issuers from "impos[ing] any cost sharing . . . requirements or prior authorization or other medical management requirements" in connection with COVID testing. FFCRA § 6601(a). United's actions in withholding payment on legitimate claims for services Genesis provided and demanding an unreasonable volume of documentation are clear violations of United's FFCRA and CARES Act reimbursement obligations.

- 38. United's own conduct in paying claims belies its argument that it lacks the necessary documentation to pay for COVID tests. United is paying a much higher percentage of Genesis COVID testing claims when the dollars at issue belong to its self-funded plan customers and far fewer claims when it is United itself that is at risk for the payment. For example, United's abusive requests and pre-payment review processes are far less prevalent when its customers' self-funded plans are involved versus fully insured plans where United's own dollars are at stake. United's tactics are not in good faith because United is simply trying to reduce its own spend rather than acting out of legitimate concern that Genesis is not properly documenting its reimbursement claims. Otherwise, United would not be paying such a large share of the claims of its self-funded plan customers where United is acting only as administrator. United is also engaging in aggressive records requests and pre-payment review processes with respect to the claims unrelated to COVID-19 testing.
- 39. In addition to withholding payment and demanding United produce voluminous patient documentation, United has denied claims (for both COVID

testing as well as testing unrelated to COVID, including Anatomic Pathology, Cytology Services, and Molecular Testing) based on its erroneous determination that a "place of service" (POS) code on the claim is incorrect. Regardless of United's preference for a different POS code, the presence of one POS code or the other is not material to payment and should not affect whether the claim is reimbursable. Moreover, United's insistence of a code other than POS Code 81 is inconsistent with what other insurers require as well as industry practice. United's position is especially unreasonable given CARES Act guidance demonstrates that United must cover all manner of diagnostic testing, regardless of where performed. *See* FAQs, Part 43, Q4 (June 23, 2020).

- 40. United's refusal to reimburse Genesis for COVID-19 testing services violates the CARES Act and state law. United's abusive records requests and withholding of payment directly violate a Congressional mandate requiring health plans to reimburse in- and out-of-network COVID testing services during the pandemic.
- 41. In New Jersey, United has a duty to acknowledge and promptly adjudicate claims, in addition to its duties to engage in good faith and fair dealing with regard to the implied contractual relationship that exists between Genesis and United. United has breached these duties and Genesis has suffered damages.

42. Genesis has attempted to engage in communications and discussions with United in an effort to resolve the issue short of litigation, including by telephone and email communications with various United employees. Genesis also transmitted a detailed demand letter to United fully setting out its positions prior to filing suit. See Exhibit A. Moreover, prior to filing suit, Genesis asked United if it would give Genesis the courtesy of accepting service of the complaint, but United refused, insisting that Genesis incur the cost of a private process server simply to make Genesis jump through more hoops, a strategy that United has pursued all along. United's efforts so far have only consisted of asking for delays and extensions without substantively addressing the payment issues involved. Given United's failure to reimburse Genesis for the medically necessary COVID-19 testing services at issue, and refusal to engage on this issue for more than three months, United leaves Genesis no option but to file suit.

## COUNT I

## Violation of the FFCRA and CARES Acts

- 43. Genesis re-alleges each allegation contained above as if fully set forth herein.
- 44. United offers group health plans and is a health insurance issuer offering group or individual health insurance coverage, as those terms are defined under section 6001 of the FFCRA.

- 45. The COVID-19-related testing services that Genesis provided to United's health plan members and beneficiaries constitute in vitro diagnostic products for the detection of COVID-19 or the diagnosis of the virus that causes COVID-19, as provided by section 6001 of the Families First Coronavirus Response Act.
- 46. Genesis did not have a negotiated rate with United for the provision of these services.
- 47. In compliance with the CARES Act, Genesis posted its cash price for COVID-19 testing on its public website.
- 48. Under section 3202(a)(2) of the CARES Act, if a health plan such as United does not have a negotiated rate with a provider such as Genesis for providing COVID-19 testing related services, the health plan is obligated to pay the provider its posted cash price for providing those services.
- 49. United, despite numerous and persistent demands and requests, has failed and refused to provide anything remotely close to Genesis's cash price for providing the COVID-19 testing related services. United has paid nothing for the vast majority of COVID tests that Genesis has provided for United's members.
  - 50. By reason of the foregoing, Genesis has been injured.

51. Based on the above, Genesis is entitled to judgment against United in an amount to be determined at the trial of this matter, plus interest thereon, together with the costs and disbursements of this action, including reasonable attorneys' fees.

#### **COUNT II**

#### **Breach of Implied Contract**

- 52. Genesis re-alleges each allegation contained above as if fully set forth at length herein.
- 53. United has shown, by a course of conduct, dealings, and the circumstances surrounding the relationship, to Genesis that United would pay for the COVID testing services provided to United's members and beneficiaries.
- 54. Accordingly, an implied contract has been created through United's course of conduct and interaction with Genesis.
- 55. For example, United paid Genesis' cash price for COVID-19 testing and related services in March, April, and May 2020 because Genesis rendered valuable testing services for the benefit of United and its members. Genesis had no reason to believe that United would reverse course and withhold payment without justification.
- 56. The parties' implied contract indicated that United would pay Genesis the statutorily defined value of Genesis's services (as provided by the FFCRA and the Cares Act) for the COVID testing services provided by Genesis.

- 57. Genesis rendered medically necessary testing services to the patients identified, and in doing so, Genesis reasonably expected United to properly compensate Genesis.
- 58. A reasonable person in the position of United would know, or reasonably should have known, that Genesis was performing the services expecting that United would pay for them appropriately.
- 59. Despite indicating to Genesis by a course of conduct, dealings and the circumstances surrounding the relationship that United would properly and timely reimburse Genesis for the cash price of testing services, United failed to do so on numerous occasions.
- 60. The failure of United to properly reimburse Genesis constitutes a breach of the implied contract between United and Genesis.
  - 61. As a result of this breach, Genesis has been damaged.
- 62. Based on the above, Genesis is entitled to compensatory damages, interest, costs of suit, attorneys' fees, and such other relief as the Court deems equitable and just.

## **COUNT III**

## Breach of the Covenant of Good Faith & Fair Dealing

63. Genesis re-alleges each allegation contained above as if fully set forth at length herein.

- 64. New Jersey law implies in every contractual relationship, including in the implied contract between Genesis and United, a covenant of good faith and fair dealing.
- 65. United acted in bad faith with the purpose of depriving Genesis of the rights and benefits under the contract. United lacked any reasonable basis for denying Genesis the rights and benefits under the implied contract. United breached the covenant through acts of commissions and omission described herein that are wrongful and without justification, and which denied Genesis the "benefit of the bargain" intended by the parties' implied contract.
  - 66. As a result of this breach, Genesis has been damaged.
- 67. Based on the above, Genesis is entitled to compensatory damages, interest, costs of suit, attorneys' fees, and such other relief as the Court deems equitable and just.

#### **COUNT IV**

## **Unjust Enrichment & Quantum Meruit**

- 68. Genesis re-alleges each allegation contained above as if fully set forth at length herein.
- 69. Genesis provided valuable COVID-19 testing services as well as testing services unrelated to COVID-19 to United members and to United as the claims administrator and/or insurer.

- 70. By providing medically necessary testing services to United members, Genesis conferred a benefit upon United because Genesis's provision of healthcare services facilitated United's obligations to arrange and pay for COVID-19 testing services and other testing services for its members. In addition, United benefited from the insurance premiums from members and beneficiaries in exchange for out-of-network healthcare coverage. To satisfy its legal obligations, United required the services of Genesis to render the testing services. Genesis rendered testing services to United's members and beneficiaries. Thus, Genesis conferred a benefit on United.
- 71. United knew that Genesis provided the medically necessary testing services to members in satisfaction of United's obligations to its members. Moreover, at all relevant times, United refused to pay Genesis for the COVID testing services Genesis provided to the patients at all, or to pay correctly, contrary to the CARES Act requirements.
- 72. United voluntarily accepted, retained, enjoyed, and continues to accept, retain, and enjoy the benefits conferred by Genesis, with the knowledge that United expects to and is entitled to payment for such services.
- 73. Despite proper demand being made on United for payment for these services, United has failed to reimburse Genesis for the services provided. United has received and retained a benefit and has been unjustly enriched through the use

of funds that earned interest or otherwise added to its profits when said money should have been paid in a timely and appropriate manner to Genesis.

74. As a result of United's unjust enrichment, Genesis has suffered damages. Based on the above, Genesis is entitled to compensatory damages, interest, costs of suit, attorneys' fees, and such other relief as the Court deems equitable and just.

#### **COUNT V**

## **Promissory Estoppel**

- 75. Genesis re-alleges each allegation contained above as if fully set forth at length herein.
- 76. United undertook conduct that conveyed to Genesis that coverage for COVID testing would be afforded to patients, but then refused to issue proper payment when the bills were submitted by Genesis.
- 77. United expected, or reasonably should have expected, that Genesis would rely on United's compliance with the CARES Act.
- 78. United's pattern and practice of behavior in paying Genesis for testing services at the beginning of the pandemic (March, April, and May 2020) induced Genesis's reasonable reliance on the promise to pay.

- 79. Genesis detrimentally relied on United's promises to pay by continuing to provide testing services to United members. Genesis's reliance on the promises caused it to suffer a definite and substantial detriment and has caused it damage.
- 80. Based on the above, Genesis is entitled to compensatory damages, interest, costs of suit, attorneys' fees, and such other relief as the Court deems equitable and just.

#### **COUNT VI**

#### **Violations of New Jersey HINT & HCAPPA**

- 81. Genesis re-alleges each allegation contained above as if fully set forth at length herein.
- 82. Pursuant to the Healthcare Information Networks and Technologies Act ("HINT"), N.J.S.A. 17B:30-23, 17:48-8.4, 17:48A-7.12, 17:48E-10.1, 17B:26-9.1, 17B:27-44.2, and 26:2J-8.1, and the corresponding regulations, N.J.A.C. 11:22-1.1 *et seq.*, United is required to remit payment to a healthcare provider for an "eligible" non-capitated claim for medical services no later than thirty (30) calendar days following electronic receipt of the claim by United, or forty (40) calendar days following non-electronic receipt of the claim by United. In the alternative, United is required to notify the provider within seven (7) calendar days if all or a portion of the claim cannot be adjudicated because the diagnosis coding, procedure coding, or

any other data required to be submitted with the claim was missing, pursuant to the Health Claims Authorization, Processing and Payment Act ("HCAPPA").

- 83. All overdue payments must bear simple interest at the rate of twelve (12) percent *per annum*, pursuant to HCAPPA.
- 84. Despite its statutory duties, United as a matter of practice and/or policy delayed payment of properly submitted claims from Genesis and did not pay the claims correctly, and then did not pay interest on delayed payments. By delaying payment of a claim, United earned and continues to earn profits from its use of the funds or profits that they would not have earned or continued to earn if payments were made in a timely manner.
- 85. Genesis has submitted "clean" or "eligible" non-capitated claims for services rendered to the patients identified on a claims spreadsheet that Genesis will supply to United and file with the Court under terms compliant with the Health Insurance Portability and Accountability Act. United failed to pay these claims within the prescribed statutory time period despite numerous attempts by Genesis to address and resolve these issues with United. These practices by United are in violation of HINT and HCAPPA.
- 86. As a result of United's violations of HINT and HCAPPA, Genesis has been damaged.

87. Based on the above, Genesis is entitled to compensatory damages, interest, costs of suit, attorneys' fees, and such other relief as the Court deems equitable and just.

WHEREFORE, Genesis prays that the Court grant the following relief:

- (i) Compensatory damages plus interest thereon, as allowed by law;
- (ii) All costs and disbursements of this action, including reasonable attorneys' fees and expenses; and
- (iii) Such other and further relief as the Court deems just and proper.

## **JURY DEMAND**

Genesis demands a trial by jury on all issues so triable.

## **DESIGNATION OF TRIAL COUNSEL**

Please take notice that the undersigned is designated as trial counsel in the above-captioned matter.

Respectfully submitted this 2nd day of June 2021.

#### KING & SPALDING LLP

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