IN THE COURT OF APPEALS
STATE OF GEORGIA

GEORGIA COURT OF APPEALS DOCKET NO.: A26A0295

ORTHO SPORT & SPINE PHYSICIANS, LLC,

APPELLANT,

VS.

JOHN ERNEST SNOWDEN, ET AL

APPELLEES.

APPELLANT'S BRIEF

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I. INTRODUCTION

Appellant Ortho and Spine Physicians LLC ("Ortho") is a non-party that provided $**18,096** in medical services to the plaintiff, who initiated the underlying personal injury lawsuit. Previously, defendants/Appellees sought and obtained an order in trial court, entitling them to a wide array of financial information and data that violated Ortho's privacy interests. This gave rise to an initial appeal, where this Court reversed the trial court in *Medernix*.[1]

Upon remand, the trial court was obligated to follow this Court's instructions and the limitations this Court set forth in its decision. Instead, the trial court ultimately entered several proposed orders drafted entirely by defense counsel, which require Ortho to produce, yet again, a plethora of medical and financial information outside the parameters of *Medernix*, which limits information sought to "*patients for the same types of treatment at the same medical facility during the same general time period as Ochoa*."[2]

Compounding the matter, the Orders further required Ortho to produce a number of new documents that were never requested by Appellees (including

[1] *Medernix, LLC v. Snowden*, 372 Ga. App. 48, 55 (2024)("Given the extensive breadth of sensitive financial information that would be contained in the Database Report, the requested Report was not reasonably calculated to lead to discovery of admissible evidence, and the Report was so overly broad that the trial court abused its discretion in denying Ortho Sport's request for a protective order prohibiting its production to the defendants.").

[2] *Medernix* at 53-54 (emphasis in original).

several new financial reports) and even ordered to produce HIPAA-protected personal identifying information for Ortho's prior, unrelated patients despite the fact that Appellees' explicitly stated they were not seeking any HIPAA-protected personal identifying information. The Orders violate (i) the law of the case and this Court's holding in *Medernix*; (ii) Ortho's procedural due process rights; and (iii) the procedural and substantive due process rights of Ortho's prior patients with regard to their personal medical information.

It is clear at this juncture, that whatever the purpose of the underlying discovery may be, it is not related to the underlying litigation.[3] Whether it is motivated by Appellee's counsel's private animus[4] or a desire to acquire wide swaths of information for Appellees' insurance carriers strategic use in other

[3] This matter should be rendered moot. Plaintiff in the underlying civil action filed a dismissal **with** prejudice after this appeal was initiated. [R. 3166]. Appellees claim that their consent to dismissal is required, and do not consent to dismissal. [*See* R. 3188]. Whether Plaintiff requires Appellees' consent to dismiss her claims with prejudice is dubious, as there is no doubt that Plaintiff can amend or dismiss any of her individual claims. *See* O.C.G.A. § 9-11-15(a)("A party may amend his pleading as a matter of course and without leave of court at any time before the entry of a pretrial order."); *Fowler v. Vineyard*, 261 Ga. 454, 456 (1991)(Holding that a plaintiff's voluntary dismissal with prejudice constitutes an adjudication on the merits.) Irrespective, Appellee's counsel's ulterior motives force Ortho to spend real money– and this Court to expend its limited and valuable judicial resources– on what is ostensibly a moot matter.

[4] Ortho's owner has sued defense counsel for defamation, wherein Ortho's owner recently prevailed at the Supreme Court. *Oskouei v. Matthews*, 321 Ga. 1 (2025). [R. 3227-49].

matters,[5] the requested data is both legally improper and not being acquired for the case at hand.

II. JURISDICTIONAL STATEMENT

A discovery order directed at a disinterested third party is directly appealable under the collateral order doctrine.[6] Jurisdiction is vested in this Court.[7]

On June 12, 2025, Ortho filed a timely Notice of Appeal, appealing the Orders entered by the trial court on May 14, 2025. [R. 5-6].

III. ENUMERATION OF ERRORS

Error (1): The Orders violate the law of the case and disregard this Court's instructions on remand from *Medernix*.

Error (2): The Orders improperly ordered the production of new financial reports and documents that were never requested.

Error (3): The Orders violate patients' procedural and substantive due process rights.

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[5] The Orders being appealed allow both Appellees'counsel and their insurance carriers to keep and use the information they acquire in other litigation in perpetuity. [R. 2715-16; 2728; 2734].

[6] *See Hickey v. RREF BB SBL Acquisitions, LLC*, 336 Ga. App. 411, 413 (2016).

[7] *See* Ga. Const., Art. VI, §5, 3.

IV. MATERIAL FACTS AND RELEVANT PROCEDURAL HISTORY

A. Background and Prior Appeal

Ortho employs the physicians who provided medical treatment to Plaintiff Glenda Ochoa ("Plaintiff") following the accident underlying this suit. Plaintiff Ochoa incurred $18,096 in medical services from Ortho. [R. 1895-96].

Within the underlying lawsuit, Appellees served and/or filed copious document requests, subpoenas, and discovery motions against Ortho and its employed physicians. [R. 73-74; 166-95; 413-33; 438-58; 922-1016; 1017-53; 1136-52; 1275-76; 1281-96; 1329-49; 1891; 2586; 2608-22; 2696-2705].

Pertinent to the instant appeal, Appellees served sixty-four (64) Requests for Production of Documents ("Requests") upon Ortho in or around January 2023. Appellees' Requests sought, in part, to have Ortho utilize its electronic medical records software to create and subsequently produce an "eClinicalWorks Report 37.08", containing large swaths of confidential health, treatment, financial, and operational information regarding unrelated Ortho patients ("Database Report"). [R. 998-1007].

It is undisputed that the aforementioned operational and financial data sought by Appellees are undoubtedly Ortho's trade secrets. [R. 1326]. As such, Ortho timely objected to Appellees' Request and motion practice ensued. [R. 166-95; 922-1016; 1017-53; 1136-52; 1281-96; 1329-49]. After initial motions

practice, on November 15, 2023, the trial court entered a series of Orders – drafted by Appellees and adopted without revision – requiring the creation and production of the Database Report. [R. 1365-73]. Ortho subsequently appealed.

In *Medernix, LLC v. Snowden et al*, 372 Ga. App. 48 (2024),[8] this Court first analyzed Appellees' Request for the Database Report. The Court's analysis began by acknowledging the gravity of Appellees' Request and the information/documents sought therein:

> "[Appellees] requested that [Ortho Sport] generate eClinicalWorks Report 37.08, 'Financial Analysis at CPT Level (With Everything),' which was a spreadsheet that would list, for every Ortho Sport patient, the amount billed for each visit or procedure at every Ortho Sport location, categorized by CPT code; the amount written-off, adjusted, or accepted in satisfaction for each such bill; the payor of each bill; and information about who referred each patient to Ortho Sport… The [Appellees] requested that the Database Report include information for the past three years, and further advised that all "HIPAA-protected personal identifying information ... could be redacted.[9]"

This Court went on to issue a well-reasoned opinion, vacating the trial court's Orders, in part. Specifically, this Court held:

> [T]he information contained in the Database Report that the [Appellees] sought to have Ortho Sport create would be far more extensive in scope. **The Report would include detailed financial information about each of Ortho Sport's patients, regardless of the type of treatment received, the clinic location where the treatment occurred, or the physician providing the treatment. The Database Report also would include all CPT Codes for every visit**

[8] Both Ortho Sport and its third-party claims manager, Medernix, LLC, appealed the aforementioned orders in companion cases.
[9] *Medernix, LLC v. Snowden et al*, 372 Ga. App. 48, 49-50 (2024).

> **and every treatment of every patient, the name of a payor on an account if other than the patient, and the names of all sources of patient referrals**...
>
> Given the extensive breadth of sensitive financial information that would be contained in the Database Report, the requested Report was not reasonably calculated to lead to discovery of admissible evidence, and the Report was so overly broad that the trial court abused its discretion in denying Ortho Sport's request for a protective order prohibiting its production to the defendants.[10]

Although this Court conclusively **reversed** Appellees' Request for the Database Report, this Court acknowledged that prior payment amounts "from other patients *for the same types of treatment at the same medical facility during the same general time period as [Plaintiff]* may have some relevance..."[11] Accordingly, this Court remanded the foregoing discovery inquiry to the trial court with direction**.**

This Court instructed the trial court to (1) determine whether a more limited report from the eClinicalWorks program could be generated consistent with the limitations expressed in its opinion and (2) apply the balancing test originally set forth in *Atlanta Journal-Constitution v. Jewell* and weigh the requesting party's

[10] *Medernix, LLC v. Snowden et al*, 372 Ga. App. 48, 54-56 (2024).
[11] *Medernix* at 53-54.

(i.e., Appellees') alleged need for the sensitive materials against the harm that would result from its disclosure.[12]

On remand, the trial court held two hearings regarding the foregoing discovery inquiry. The first hearing occurred on October 15, 2024, which the trial court continued at Appellees' behest, pending the resolution of a Petition for Certiorari before the Georgia Supreme Court addressing identical discovery requests asserted against Ortho for the same Database Report. [T., Vol 15, pp. 10-12 & 56]. Defense counsel's Petition for Certiorari was ultimately denied.[13]

B. April 3, 2025 Hearing and Technical Details

The trial court held a second hearing on April 3, 2025 to comply with the instructions set forth by this Court upon remand. [R. 2822]. Despite numerous

[12] *Medernix, LLC v. Snowden et al*, 372 Ga. App. 48, 52-56 (2024)(*citing Atlanta Journal-Constitution v. Jewell*, 251 Ga. App. 808, 812 (2001); *Bethune v. Bethune*, 363 Ga. App. 273, 276-78 (2022)(vacating trial court's discovery ruling and remanding for application of the balancing test required in cases where a party seeks discovery of unprivileged but sensitive materials).

[13] *Stephen Murray et al v. Ortho Sport & Spine Physicians, LLC et al*., Supreme Court of Georgia, Case No.: S25C0217 (cert. denied)(January 14, 2025).

deviations from the stated purpose,[14] there was testimony presented regarding the creation of eClinicalWorks Reports. Ortho presented testimony from its Director of Revenue Cycle Management, Faith Beltzhoover, and Appellees presented testimony from its consultant/witness, Lori Green. Ms. Beltzhoover thoroughly explained that Ortho was unable to generate any database report evincing payment or adjustment data at the ***treatment/CPT[15] code level*** for patients whose medical

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[14] Ortho's Counsel:

> Your Honor, at this point I want to lodge a very firm objection because we're supposed to be here to discuss eClinicalWorks. The purpose of this is not to go into, well… now we want to seek this information through a different method, that's a different issue. That was not the purpose of this rule nisi. That is –

The Court:

> Well, the purpose of this rule nisi for anything is this: I'm at a year-plus, and every step of the way there has been some roadblock. And, listen, I've done-- I tell you what, you think this is hard. I've got a likely billion-dollar divorce case coming up I do 50-million-dollar cases.
>
> You know, to me, personally, I think discovery is simple. I do. And I'm the kind of judge that is going to peel back layers and I'm going to find solutions. You know, there's a process, but, you know, as the rules say, the Court can conduct the order of the business of the Court in any necessary way to get to the answers, as long as it's judicial, it's measured, things of that nature. [T. Vol. 16.: 115:7-116:5].

[15] "CPT" codes stand for Current Procedural Terminology codes. "CPT codes are a national uniform coding structure created for use in billing and overseen by the American Medical Association ... A code represents at least two things: the procedure or service performed and the level of complexity involved in it." *United States v. Moss*, 34 F.4th 1176, 1181-82 (11th Cir. 2022).

expenses were paid at ***claim***[16] ***or global levels***. [T., Vol. 16: 71:8-23; 76:1-16; 77:17-23; 78:6-79:3; 92:23-93:9; 95:7-25].

There are three ways a payment can be made (1) at the treatment/CPT level; (2) at the claim level; and (3) at the global level. A treatment/CPT code level payment is a payment for the ***specific*** type of treatment rendered to the patient. [T. Vol. 16: 96:6-97:7; 112:18-113:2]. A claim level payment is a payment for ***every*** treatment/CPT code rendered to a patient on any particular date of service. [T. Vol. 16: 90:17-91:4]. A global payment is a payment made to the patient's ***entire*** outstanding balance. [T. Vol. 16: 93:4-9].

Although most in-network insurance companies operate under a participation agreement with pre-negotiated reimbursement rates for most (if not all) specific treatment types/CPT codes, the vast majority of other payors do not. [T., Vol. 16: 71:8-23; 76:1-16; 77:17-23; 78:6-79:3; 92:23-93:9; 95:7-25] Instead, most payors reimburse medical services at the claim or global levels, including self-pay or "medical lien" patients, out-of-network health insurance, worker's

[16] eClinicalWorks refers to a "claim" as a "date of service." Hence, one "claim" includes all of the treatment/CPT codes provided to the subject patient during any one particular "date of service." "Claims" include various, and everchanging, treatment/CPT codes. One "claim" can include five treatment/CPT codes, ten treatment/CPT codes, twenty treatment/CPT codes, or more. Each "claim" – and the treatment/CPT codes contained therein – is unique and varies depending upon the type and complexity of treatment provided during the subject date of service. [T., Vol 16.: 91:18-92:6].

compensation insurance, disability insurance, med-pay/personal injury protection ("PIP"), etc. Id.

Moreover, the manner in which the payor submits a payment determines how the payment is reflected in eClinicalWorks. Id. Put simply, if a payor submits a global payment for the entire account, a global payment is reflected; if a payor submits a claim payment, a claim payment is reflected; and if a treatment/CPT level payment is submitted, a treatment/CPT level payment is reflected. Id.

Appellees' witness, Ms. Greene, was unfamiliar with how a global payment could even be reflected in eClinicalWorks, evidencing her inexperience with various payor types, including self-pay or "medical lien" patients and med-pay/PIP. [T., Vol. 16: 93:4-18]. **More importantly, Ms. Greene acknowledged that payments submitted at the claim and global levels would not evince payment or adjustment data at the treatment/CPT code levels as required by this Court in *Medernix*.**[17] [T., Vol. 16: 91:6-93:18; 96:13-97:7]. Accordingly, even according to Appellees' own witness, the data generated for a patient making claim and/or global payments would be impermissible under *Medernix* because it would not be limited to data at the treatment/CPT code levels– which is what Medernix requires.[18]

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[17] *Medernix, LLC v. Snowden et al*, 372 Ga. App. 48, 53-54(2024)(limiting potentially relevant financial data regarding other non-party patients to payment amounts "*for the same types of treatment*" received by Plaintiff Ochoa).

[18] *Id.*

Moreover, despite the fact that Ms. Greene acknowledged that hundreds of potential eCW reports exist [T., Vol. 16: 122:5-9], the only specific report that was discussed by either witness was the 37.08 eCW report, which was also the subject of the appeal in *Medernix*. [R. 998-1007].

C. Aftermath

On May 13, 2025, the trial court entered four orders drafted by Appellees, without revision, which included the "Order Compelling Ortho Sport & Spine Physicians, LLC and Medernix, LLC to Produce Database Report" and "Order to Show Cause as to Ortho Sport & Spine Physicians, LLC" (hereinafter collectively referred to as the "Orders")-- which vastly exceeded the scope of discovery permitted in *Medernix*.[19] [R. 2705; 2711-16; 2721-22]. Namely, the Orders required the production of detailed health, treatment, and financial information for (i) medical treatments/CPT codes ***not*** received by Plaintiff Ochoa (ii) from clinical locations at which Plaintiff Ochoa did ***not*** treat (iii) during a time period ***outside*** Plaintiff Ochoa's dates of treatment. [R. 2711-16].

The Orders also required the creation of supplemental database reports including eClinicalWorks Reports 371.05, 361.05, and 21.04 (collectively the "Supplemental Reports") [R. 2713-14]. **The Supplemental Reports were never**

[19] *See also Bowden v. The Medical Center, Inc.*, 297 Ga. 285, 292-93 (2015).

properly requested by Appellees at the trial court and never discussed at the April 3, 2025 hearing. Their first mention was in the Appellees' proposed orders, which were e-mailed to the trial court shortly before their adoption *in toto*. Moreover, the Orders improperly required the disclosure of individually identifiable health information, including patient ID numbers. [R. 2715]. By virtue of their nature – as explained in further detail below– the Supplemental Reports yield information regarding every patient that has obtained treatment at Ortho in violation of *Medernix*.

To compound the matter, as part of the "Order to Show Cause as to Ortho Sport & Spine Physicians, LLC" the trial court also required Appellant "to produce an itemized list" and "to undertake whatever means are necessary to compile these lists, **regardless of whether same can be produced from a database server query or will require the hand-review of emails or even the review of each of its files.**" [R. 2727-28; 2733] Pretermitting whether the Civil Practice Act could mandate a party (or in this situation, a non-party) to manually sift through files and create a list (pretermitting any burdensome analysis), this was never a request that was ever made from Ortho at any point prior to the entry of the order.

To add insult to injury, despite the fact that such information encompasses Ortho's most private trade secrets, the Orders drafted by defense counsel and adopted by the trial court allows defense counsel and the insurance companies they

represent to keep the information in perpetuity, and use it in other litigation. [R. 2715-16 & 2728 & 2734].

Ortho subsequently initiated this appeal. [R. 5-6].

V. STANDARD OF REVIEW.

Questions of law– and the trial court's application of such law– shall be reviewed *de novo*, with the Court applying the plain legal error standard of review.[20] The application of this Court's prior order in *Medernix* (i.e., of the law of the case doctrine) presents a question of law for this Court.[21] Likewise, whether due process has been afforded-- which is a question presented in this appeal-- is a question of law.[22]

[20] *Cardinale v. Keane*, 362 Ga. App. 644, 644-45 (2022); *Laurel Baye Healthcare of Macon, LLC v. Neubauer*, 315 Ga. App. 474, 475 (2012).
[21] *Atlanta Women's Health Grp., P.C. v. Clemons*, 299 Ga. App. 102, 105, 681 S.E.2d 754, 757 (2009)
[22] *Green Meadows Housing Partners, LP v. Macon-Bibb County*, 372 Ga.App. 724 (2024); *State v Huffman*, 351 Ga. App. 853 (2019); *Sedehi v. Chamberlin*, 344 Ga. App. 512, 516 (2018).

VI. ARGUMENT AND CITATION OF AUTHORITY

A. ERROR (1) The Orders Disregarded this Court's Instructions on Remand from *Medernix.*

Upon reversal by this Court, this Court's holdings in *Medernix* became the law of the case.[23] Indeed, even "[i]f the decision of an appellate court thereafter becomes 'incorrect' because the law changes -- either because of subsequent case law or because of later-enacted statutes -- it may not be binding precedent for other situations. However, between the parties to the original decision it remains the law of the case."[24] In the instant case, the boundaries and limitations to Appellees' discovery from Ortho were not merely suggestions by this Court that could be disregarded– they became binding. "A trial court, regardless of its good intentions, cannot decide to disregard the opinions of this Court."[25]

Despite this, the trial court Orders violate the law of the case from the first appeal in *Medernix, LLC v. Snowden et al*. 372 Ga. App. 48 (2024). In *Medernix,* this Court previously rejected Appellees' attempt to acquire medical and financial information regarding unrelated patients who received different medical treatments

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[23] *SunTrust Bank v. Bickerstaff*, 375 Ga. App. 37, 40-41 (2025); O.C.G.A. § 9-11-60 (h)("[A]ny ruling by the Supreme Court or the Court of Appeals in a case shall be binding in all subsequent proceedings in that case in the lower court and in the Supreme Court or the Court of Appeals as the case may be.")

[24] *Fulton-Dekalb Hosp. Auth. v. Walker*, 216 Ga. App. 786, 787, 456 S.E.2d 97, 99 (1995).

[25] *Atlanta Women's Health Grp., P.C. v. Clemons*, 299 Ga. App. 102, 105 (2009)(internal stylization omitted).

or treatments from different facilities. This Court specifically limited potentially relevant non-party patient information to "other patients [who received] *the same types of treatment at the same medical facility during the same general time period as Ochoa …"*[26]

Nevertheless, relying solely upon the Greene Affidavit,[27] Appellees submitted a series of proposed orders – which were subsequently adopted by the trial court without revision – compelling the production of eClinicalWorks Reports 371.05, 361.05, and 21.04 (collectively "Supplemental Reports"). Notably, the Greene Affidavit, which presumably formed the basis for Appellees' proposed orders, was filed into record **after** entry of the Orders. [R. 2736-65]. The Supplemental Reports far surpass the "potentially relevant" information this Court instructed was allowable on remand in *Medernix*.[28]

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[26] *Medernix, LLC v. Snowden*, 372 Ga. App. 48, 54 (2024)(emphasis in original).

[27] The Greene Affidavit was not attached to any motion of Appellees and emailed to the Court shortly before entry of the Order. Accordingly, the Greene Affidavit was improperly relied upon by the trial court in adopting the proposed orders. *See* O.C.G.A. § 9-11-6(d) ("When a motion is supported by an affidavit, the affidavit shall be served with the motion"); *see also Herringdine v. Nalley Equip. Leasing, Ltd.,* 238 Ga. App. 210, 212 (1999) affirming that the trial court properly excluded an affidavit when it was not filed with the underlying motion); *Bailey v. Dunn,* 158 Ga. App. 347, 347 (1981) (holding that the trial court properly excluded supporting affidavits when they were not filed with underlying motion but rather one day before hearing). In fact, Appellees previously filed a "supplemental brief" that was untimely, wherein Ortho lodged the same objections. [R 2608-22; 2696-2703]. The Greene affidavit, however, was filed by Appellees ***after*** the entry of the Orders, and the trial court never gave an indication that it would consider matters outside the record. [R. 2736-65].

[28] *Medernix*, 372 Ga. App. at 53-54 (holding "the amount that Ortho Sport charges, wrote off, adjusted, or accepted as payment in full from other patients *for the same*

1. eClinicalWorks Report 371.05.

Attached to the Greene Affidavit, are **twenty-four (24) pages – and hundreds of instructions** – on how to generate and download the Supplemental Reports. [R. 2742-65]. The first report, eClinicalWorks Reports 371.05, is titled "Financial Analysis at CPT Level – Detail." [R. 2744-52]. According to the trial court's Order and the Greene Affidavit, the 371.05 Report would include:

1. ***All*** medical treatments/CPT codes rendered to ***any*** unrelated patient, ***regardless*** of whether Plaintiff Ochoa received such treatment/CPT code, as long as the unrelated patient received at least ***one (1)*** of the treatments/CPT codes rendered to Plaintiff [R. 2713];
2. ***All*** medical treatments/CPT codes rendered to ***any*** unrelated patient who received ***one (1)*** similar diagnosis code, ***regardless*** of whether the unrelated patients and Plaintiff Ochoa underwent any of the same medical treatments/CPT codes [R. 2713];
3. A period of time from February 1, 2021 – August 31, 2022, ***despite*** Plaintiff's Ochoa's treatment being limited to February 19, 2021 – April 16, 2021 [R. 1895-96; 2713];
4. ***All*** clinical location from which ***any*** of the Plaintiff's treating physicians provided medical treatment to ***any*** other, unrelated patient, ***regardless*** of

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types of treatment at the same medical facility during the same general time period as Ochoa may have some relevance...")

whether Plaintiff Ochoa received treatment at that clinical location or not [R. 2713-14]; and

5. The patient account numbers for ***every*** unrelated patient identified and the name of the payor on for ***every*** unrelated account if other than the patient. [R. 2715, 2748-51].

Report 371.05 unquestionably defies this Court's limitations enumerated during the first appeal.[29] As an initial matter, Report 371.05 requires the disclosure of detailed medical and financial information for treatments/CPT codes ***not*** received by Plaintiff Ochoa. The trial court's Order mandates the disclosure of ***all*** treatment/CPT codes rendered to ***any*** patient, who underwent ***any one (1)*** treatment/CPT code provided to Plaintiff Ochoa. [R. 2713-14]. Hence, under the trial court's Order, because Plaintiff Ochoa underwent a "New Patient Office Visit [CPT Code 99204]", Ortho must not only produce all medical and financial data for CPT Code 99204, but must also produce **all medical and financial data for every other treatment/CPT code** received by **every other patient at the practice because they have all received "New Patient Office Visit"**, ***regardless*** of whether Plaintiff Ochoa underwent such other treatment/CPT code or not. This

[29] *See also West v. Nodvin*, 196 Ga. App. 825, 826 (1990) (overruled in part on other grounds) (""[e]ven if *some* of the [requested documents] may have been relevant ... no court should impose upon the opposite party the onerous task of producing great quantities of records which have no relevancy. The notice should be specific enough in its demands to relate the documents sought to the questions at issue.") (quoting *Horton v. Huiet*, 113 Ga. App. 116, 169 (1966)).

Court explicitly held that, even in the broad discovery sense, medical and financial data for treatment/CPT codes not provided to Plaintiff Ochoa has no relevancy to the instant matter and was disallowed.

Similarly, eClinicalWorks Report 371.05, would contain detailed medical and financial information for ***all*** treatment/CPT codes rendered to ***any*** patient, who was assigned ***any*** of the diagnosis codes assigned to Plaintiff. Plaintiff received two (2) diagnosis codes: (i) M54.4 [Lumbago or Low Back Pain] and (ii) M47.816 [Lumbar Facet Joint Syndrome]. Not surprisingly, a significant number of Ortho's patients are diagnosed with "Low Back Pain" – after all, Ortho is an orthopedic medical practice. Of course, different severity levels of "Low Back Pain" exist, which necessitate different types and levels of treatment.

The specific treatment/CPT Codes provided to Plaintiff Ochoa for her "Low Back Pain" – and more particularly, the reasonableness of the cost thereof – is the issue in question. The cost of a patient who underwent complex surgeries for his/her "Low Back Pain" is irrelevant to the reasonableness of Plaintiff Ochoa's medical expenses, who did not. This Court previously acknowledged this limitation during the first appeal in *Medernix*, and the trial court's Order – demanding the production of irrelevant medical and financial data for treatments/CPT codes not received by Plaintiff Ochoa – surpasses this constraint.

The trial court's Order further defies the *Medernix* limitations regarding (i) scope of time; (ii) clinical locations; (iii) the disclosure of patient account numbers; and (iv) payor names. This Court limited the potentially relevant medical and financial data to "the same general time period as Ochoa['s treatment]."[30] Ochoa received treatment at Ortho from February 19, 2021 – April 16, 2021. [R. 1895-96]. Nonetheless, the trial court Order compelled the disclosure of data aggregations from February 1, 2021 – August 31, 2022. [R. 2713].

Additionally, the trial court Order failed to limit the production of information to "the same medical facilit[ies]" where Plaintiff Ochoa received treatment. Rather, once again, the Order encompasses **all** medical facilities that any of Plaintiff's treating physicians previously practiced **within the past eighteen (18) months, regardless of whether Plaintiff Ochoa treated at those locations or not**. [R. 2713-14].

Last, the trial court Order ordered the production of thousands of patient account numbers – which, as discussed below, violates state and federal law and exceeds the Appellees' discovery requests – and the identification of payor names.[31]

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[30] *Medernix, LLC v. Snowden et al*, 372 Ga. App. 48, 54 (2024).
[31] *Medernix* at 55 (holding that the Database Report seeking "the name of a payor on an account if other than the patient" was overly broad and fell outside the scope of discovery).

The eClinicalWorks Report 371.05 is not properly limited to the constraints set forth by this Court in *Medernix*.

2. eClinicalWorks Report 361.05.

The second report, eClinicalWorks Report 361.05, is titled "Financial Analysis at Claim Level – Detail." [R. 2753-59]. The 361.05 Report is similar to the 371.05 Report with one important distinction. Although not properly limited to the *Medernix* criteria, the 371.05 Report purportedly evinces non-party patient data at the ***treatment/CPT code level***. In contrast, the 361.05 Report provides non-party patient data at the ***claim level***.

As acknowledged by Appellees' ***own*** witness, Lori Green, claim level data will ***not*** evince financial data at the treatment/CPT Code level. [T., Vol. 16: 91:6-93:18; 96:13-97:7]. Ms. Greene specifically testified that:

> But when [Ortho is] receiving other payments, probably their workmen's comp, their other (unintelligible) of payments, those are typically the ones I would say would be posted at the claim level. And so -- and those, instead of going to those individual CPT codes on that claim and posting the individual payments for those, they're posting to the general claim balance. So if the claim balance is $500 and they get a 400-dollar payment, they simply post $400 to that claim. And so there's no trickle down or waterfall down to the individual CPT codes.

[T., Vol. 16: 91:20-92:6].

Ms. Greene further testified that claim level data is "a higher level [of data] than the CPT" encompassing "all of the ICD codes, all the CPT codes, [and] all the billed charges for [any particular] date of service." [T. Vol 16: 90:17-91:4]. Hence,

any one claim will contain various, and everchanging, treatments/CPT codes and the claim payment amounts cannot be attributed to the particular treatments/CPT codes contained therein. As such, taking Ms. Greene at her word, the claim level data compelled to be produced through the 361.05 Report runs afoul of the discovery limitations set forth in *Medernix*, because such information would inevitably include detailed medical and financial information beyond the "same types of treatment/CPT codes" received by Plaintiff Ochoa.

Last, the trial court's Order further dictates that Ortho shall "run the eClinicalWorks Report 361.05 with the same search criteria as the 371.05 Report described above." [R. 2714]. As previously discussed, the 371.05 Report "search criteria" violates *Medernix*, and disingenuously requires the production of records for all of Appellant's patients.

3. eClinicalWorks Report 21.04

The third report, eClinicalWorks Report 21.04, is titled "Unposted Payments Report." [R. 2760-65]. The trial court's Order is silent as to the data this Report would purportedly detail, if generated. [R. 2711-16]. Moreover, although the Greene Affidavit details a twenty-six step process – not including subparts – to generate and download the 21.04 Report, the Greene Affidavit is likewise silent on the non-party patient data that purportedly would be contained therein. [R. 2760-64].

It remains unclear whether the 21.04 Report would exhibit both "unposted" and "posted" payment data for any particular patient account, which would be required to determine the total payments made by – or on the behalf of – any one patient. However, what is clear, is that any "unposted" and "posted" payment data would be reflected at the **global level**. [*See* T., Vol. 16: 91:6-93:18; 96:13-97:7]. This fact alone establishes the 21.04 Report to be overly broad and outside the scope of *Medernix*.

Payments "posted" or "unposted" to any patient account at the global level would ***not*** evince payment data for the specific treatment/CPT codes provided to any particular patient. Rather, it would appear to evince the same global/account level data previously disallowed in *Medernix*.

Ultimately, the trial Court issued an expansive discovery Order – drafted by Appellees and adopted without revision – which runs afoul of the limits set forth by this Court on the first appeal.

B. ERROR (2): The Order Improperly Required the Production of Information and Documents That Were Never Requested.

The right to have notice and be heard on a matter is axiomatic and a requirement of procedural due process. As recognized by the Supreme Court almost 100 years ago, the constitutionally-guaranteed right to due process of law is, at its core, the right of notice and the opportunity to be heard.[32] Awarding relief that was neither requested nor addressed deprives a litigant of a meaningful opportunity to be heard and constitutes a violation of due process.[33] In the instant matter, the trial court erred in compelling the production of information/documents not previously sought by Appellees' discovery requests or motion to compel.

This identical issue was recently addressed by this Court in *Blount v. Blount* less than one (1) year ago.[34] In *Blount*, the trial court ordered the defendant to produce documents that were not requested in plaintiff's original discovery requests or his subsequent motion to compel. This Court reversed the trial court on this issue, holding:

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[32] *Citizens' & Contractors' Bank v. Maddox*, 175 Ga. 779, 784-85 (1932).
[33] *Spruell v. Spruell*, 356 Ga. App. 722, 726 (2020)("Consequently, the trial court's alimony award violated [appellant's] due-process rights because [appellee] never asked for such relief, either prior to or during trial, and, thus, [appellant] had no meaningful opportunity to be heard or prepare a defense to that claim. Accordingly, we reverse the trial court's award of alimony.")
[34] *Blount v. Blount*, 373 Ga. App. 105 (2024); *see also, Green Meadows Housing Partners, LP v. Macon-Bibb County*, 372 Ga.App. 724 (2024); *Spruell v. Spruell*, 356 Ga. App. 722, 726 (2020).

> **While the trial court has broad discretion to control discovery, this discretion does not extend to ordering the production of documents that have not been properly requested**. In this regard, the trial court's order required Wife to produce documents not sought in Husband's original discovery requests.... Further, the trial court's order granting the motion to compel obligates Wife to produce discovery that Husband did not identify in his motion to compel.... **Accordingly, we reverse the trial court's order granting the motion to compel to the extent that it compels Wife to produce documents that were not previously sought by Husband's motion to compel and to the extent it compels Wife to produce documents that were not requested by Husband's discovery requests**.

Blount, 373 Ga. App. 105, 109-10 (2024)(citing *City of Griffin v. Jackson*, 239 Ga. App. 374, 378 (1999)).

1. Supplemental eClinicalWorks Reports.

Here, the trial court's Orders require the production of Supplemental eClinicalWorks Reports (i.e., eClinicalWorks Reports 371.05, 361.05, and 21.04), none of which were previously identified or sought by Appellees' extensive Requests or Motion to Compel. Appellees did not amend their underlying Requests or specify that any of the potentially ***hundreds*** of other eClinicalWorks Reports[35] were being sought, aside from the single eClinicalWorks 37.08 Report that was the subject of the prior appeal. Accordingly, the Orders requiring the production of the Supplemental Reports was improper.

[35] Appellees' witness, Lori Greene, acknowledges that "[t]here's hundreds of reports" in the eClinicalWorks platform. [R. 122:5-9].

2. Individually Identifiable Health Information [i.e., Patient ID Numbers]

Additionally, the trial court's Orders require the disclosure of "individually identifiable health information" for thousands of prior, unrelated Ortho patients, including "Patient ID numbers." [R. 2715].

Appellees' underlying Requests and Motion to Compel did not seek the production of individually identifiable health information. In contrast, Appellees expressly disclaim any attempt to discover individually identifiable health information for Ortho's prior patients. [R. 443]. Appellees Request No. 2 provides, in relevant part:

> "**This request does NOT seek any HIPAA-protected personal identifying information** and it is stipulated that you may redact any patient names, addresses, email addresses, phone numbers, or **patient identifying numbers**, etc. that may be included within the report, excepting on the above-referenced Plaintiff/patient. This request seeks anonymized data only." [R. 443].

Additionally, Appellees' ***own*** witness, Lori Greene, in her prior affidavits, instructs Ortho to redact all "patient identifying information", including but not limited to "Patient Account Nos." [R.1042-53; 2739; 2765]. Indeed, even this Court, in the prior appeal, acknowledged that Appellees specified "HIPAA-protected personal identifying information ... could be redacted."[36]

Nonetheless, despite these representations, the Order states that Ortho "may not redact any other information, including the Patient ID numbers...." [R. 2715].

[36] *Medernix, LLC v. Snowden*, 372 Ga. App. 48, 50 (2024).

The patient ID numbers, as well as other information that the Order states may not be redacted, are HIPAA-protected personal identifying information.[37]

Accordingly, the Order improperly required Ortho to produce HIPAA-protected personal identifying information, such as the explicitly mentioned "Patient ID numbers", which were not previously requested and, in fact, expressly disclaimed by Appellees. "While the trial court has broad discretion to control discovery, this discretion does not extend to ordering the production of documents that have not been properly requested."[38]

3. Individually "Hand Reviewing" to Create a List

As a final "catch-all", the Orders mandate that Ortho "produce an itemized list" and "to undertake whatever means are necessary to compile these lists, regardless of whether same can be produced from a database server query or will require the hand-review of emails or even the review of each of its files." [R. 2727-28 & 2733]. The requirement that Ortho conduct a "hand-review of [its] emails [and] … each of its files" to create and subsequently produce "itemized lists" is a request that had never been previously made.

On a substantive note, such a requirement exceeds Ortho's obligations under O.C.G.A. § 9-11-34(a) to produce downloadable/translatable "data

[37] 45 CFR § 164.514(b)(2)(i).
[38] *Blount*, 373 Ga. App. at 109-10 (citing *City of Griffin*, 239 Ga. App. at 378).

complications."[39] In *Medernix*, this Court acknowledged that "where the requested document is data drawn from the producing party's electronic computer storage system, that 'party [can be] tasked with translating the document through detection devices into reasonably usable form.'"[40] By contrast, the Orders' obligation to have Ortho "hand review" files to create a new document, which is currently not in existence, is in abrogation of the plain text of O.C.G.A. § 9-11-34(a).[41]

As an absolute threshold matter, however, this was never a request made by Appellees. Accordingly, its impropriety was never addressed. Much like the above-issues involving unrequested information, the trial court's "discretion does not extend to ordering the production of documents that have not been properly requested."

[39] Medernix, LLC v. Snowden et al, 372 Ga. App. 48, 56-57(2025)(citing O.C.G.A. 9-11-34(a)(1)).
[40] *Id.* (quoting *Norfolk Southern R. Co. v. Hartry*, 316 Ga. App. 532, 533 (2012).
[41] S*ee, e.g., West v. Temple*, No. 5:14-CV-86-MTT-MSH, 2016 WL 4087108, at *2 (M.D. Ga. July 29, 2016), report and recommendation adopted, No. 5:14-CV-86(MTT), 2016 WL 5339580 (M.D. Ga. Sept. 21, 2016)("The Court cannot order the Defendant to produce something that it asserts does not exist."); *Harris v. Advance Am. Cash Advance Ctrs.*, 288 F.R.D. 170, 172 (S.D. Ohio 2012) ("Defendant is not required to create documents in response to plaintiff's requests for discovery.").

C. ERROR (3): The Orders Violate Patients' Procedural and Substantive Due Process Rights.

In *Medernix*, Ortho appealed on the basis that Ortho's privacy rights were being violated. This Court agreed and set forth reasonable limitations that the trial court was required to follow. As noted in *Medernix*, Appellees claimed it was not seeking any protected health information.[42] [R. 443]. Accordingly, Ortho had no reason to claim any violation of privacy– or violations of procedural or substantive due process– on behalf of its patients.

Ortho contends that the prior errors are dispositive in this matter. Nevertheless, in light of the fact that the Orders mandate the creation of the Supplemental Reports and claim that patient identification numbers must now be unredacted– which could ostensibly be used to ascertain the identity of an individual patient–[43] Ortho feels compelled to assert a privacy claim on behalf of its patients.

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[42] *Medernix, LLC v. Snowden*, 372 Ga. App. 48, 50 (2024).

[43] This matter was not briefed in the trial court because as discussed in Error (2), prior to the Orders, Appellees expressly stated they did not seek patient identification numbers. [R. 443]. *See also*, 45 CFR §§ 164.514(b)(2)(i); 45 CFR 160.103 (collectively defining "individually identifiable health information").

A medical provider is a "representative of the privacy interests of its patients."[44] As such, Ortho is the first line of defense for inappropriate attempts to circumvent its patient's privacy interests.[45]

Both the Federal and Georgia Constitutions guarantee a substantive right to medical privacy.[46] Moreover, "the right to privacy guaranteed by the Georgia Constitution is far more extensive than that protected by the Constitution of the United States"[47], and "a patient's medical information... is certainly a matter which

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[44] *Northwestern Memorial Hosp. v. Ashcroft*, 362 F.3d 923, 928 (7th Cir. 2004); *see also* O.C.G.A. § 9-11-34(c)(2) (allowing a non-party medical provider to file objections to discovery request for "the records of a person who is not a party" to the lawsuit); *King v. State*, 272 Ga. 788, 790 (2000) ("the medical provider is the technical "owner" of the actual records, [however] the patient nevertheless has a reasonable expectation of privacy in the information contained....").

[45] O.C.G.A. § 24-12-1 ("[n]o physician... or health care facility... shall be required to release any medical information concerning a patient except... on ***appropriate*** court order or subpoena.") (emphasis added); *See also King v. State*, 272 Ga. 788, 793 (2000) (holding that "the issuance of a subpoena for [plaintiff's] medical records could not be 'appropriate' as otherwise required by O.C.G.A. § 24–9–40(a), because such a subpoena would result in a violation of her constitutional right to privacy arising from the due process clause of this state's constitution."); *Gates v. State*, 317 Ga. 889, 889-94 (2023) (holding that the State's use of an *ex parte* order to obtain a defendant's medical records was not an "appropriate" order under O.C.G.A. § 24-12-1(a), because the *ex parte* order violated the defendant's constitutional right to privacy); *Orr v. Sievert*, 162 Ga. App. 677, 678 (1982)("a doctor is not required to release information concerning a patient unless required to do so by subpoena or other appropriate court order or authorized to do so by this patient or otherwise waived by the patient"); *Baker v. WellStar Health System, Inc.*, 288 Ga. 336, 338-40 (2010).

[46] *United States v. Westinghouse Elec. Corp.*, 638 F.2d 570, 577 (3rd Cir. 1980); *Baker v. Wellstar Health System, Inc.*, 288 Ga. 336, 338 (2010) (quoting *King v. State*, 272 Ga. 788, 789-91 (2000)).

[47] *King v. State*, 272 Ga. 788, 789 (2000).

a reasonable person would consider to be private."[48] In fact, the Georgia Supreme Court has previously determined "that medical records are entitled to more privacy than bank records and phone records."[49]

The Orders run afoul of both Ortho's patients' procedural due process rights as well as their substantive Constitutional right to privacy.

1. The Order Violates the Patient's Procedural Due Process Rights.

In *Pavesich* the Supreme Court "expressly recognized that Georgia citizens have a 'liberty of privacy' guaranteed by the Georgia constitutional provision which declares that no person shall be deprived of liberty except by due process of law."[50] "Due process is denied when an arm of the state acts directly against an individual's property and deprives him of it without notice or opportunity to be heard."[51] In most basic terms, "[p]rocedural due process means notice and an opportunity... to be heard."[52]

In *King v. State*, the plaintiff was involved in a single-car collision, resulting in her immediate transportation to a nearby hospital for medical care.[53] Due to the

[48] *King v. State*, 272 Ga. 788, 790 (2000).
[49] *Id.*(quoting *Thurman v. State*, 861 S.W.2d 96, 98 (Tex. App. 1993).
[50] *Powell v. State*, 270 Ga. 327, 329 (1998) (citing to *Pavesich v. New England Life Ins. Co.*, 122 Ga. 190, 197 (1905)); *King v. State*, 272 Ga. 788, 789 (2000).
[51] *King* at 792 (quoting *Reinertsen v. Porter*, 242 Ga. 624, 627 (1978)).
[52] *Id.* (quoting *Jackson v. Spalding County,* 265 Ga. 792, 794 (1995)).
[53] *Id.* at 788.

seriousness of her injuries, the plaintiff was treated in accordance with the hospital's trauma protocol, which included subjecting her to blood-alcohol testing.[54]

The plaintiff was subsequently charged by the State with several counts of driving under the influence.[55] In an effort to convict the plaintiff, the prosecution obtained the issuance of a subpoena to the hospital, seeking the production of Plaintiff's medical records.[56] The hospital turned the records over to the State, **without the knowledge or consent of the plaintiff or her counsel**.[57] Upon learning of this development, the plaintiff filed a motion to quash the subpoena and a motion in *limine* to prevent the use of her own personal medical records at trial.[58] The trial court denied the plaintiff's motions, and the blood-alcohol results were admitted at trial over the plaintiff's objections.[59] The jury convicted the plaintiff, resulting in a subsequent appeal.

On appeal, the Georgia Supreme Court found the plaintiff was denied her procedural due process rights as the plaintiff "did not have notice and an opportunity to object to the State's subpoena of her medical records in which she

[54] *King v. State*, 272 Ga. 788, 788 (2000).
[55] *Id.*
[56] *Id.* at 789.
[57] *Id.*
[58] *Id.*
[59] *Id.*

had not waived her right to privacy."[60] The Court noted that while "the medical provider is the technical 'owner' of the actual records... the patient nevertheless has a reasonable expectation of privacy in the information contained."[61] The Court further elucidated (which is significant to the instant appeal) that:

> [T]he constitutional right of privacy protects the initial unauthorized *disclosure* of [the patient]'s medical records to anyone, including the prosecutor, and any subsequent opportunity to contest the *admissibility* of the private information does not constitute a sufficient procedural safeguard against any initial unauthorized dissemination thereof… Clearly, an opportunity to object to the admissibility of medical records already in the possession of the prosecution does not protect against unauthorized disclosure, and the State makes no contention that a predisclosure opportunity to contest the validity of a subpoena of an accused's medical records is impractical. Thus, as envisioned by the State, its so-called "subpoena exception" violates the due process rights of an accused. Due process of the law must obtain as a matter of right and not merely by happenstance, or by the grace of judicial or other authorities.[62]

Here, the trial court's Order compelled the disclosure of thousands of prior, unrelated patients' protected health information, without such patients' knowledge or consent. Accordingly, as in *King*, the Order violates the patients' procedural due process rights of being provided both notice and an opportunity to object to the disclosure of their medical information.

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[60] *King v. State*, 272 Ga. 788, 793 (2000).
[61] *Id.* at 790.
[62] *Id.* at 792-93(internal citations omitted).

2. The Order Violates the Patients' Substantive Constitutional Right to Privacy

Beyond a patient's procedural due process rights, a patient's "substantive right to medical privacy... may ***only*** be waived to 'the extent such information is relevant to the medical condition ***the patient*** has placed in issue in the legal proceeding.'"[63] In *Baker v. Wellstar Health System*, plaintiff Baker filed a medical malpractice action against Defendant Wellstar.[64] In an attempt to challenge causation, Wellstar pursued and ultimately obtained a qualified protective order under HIPAA, permitting Wellstar to conduct *ex parte* interviews with Baker's health care providers.[65] Baker subsequently appealed.

On appeal, the Supreme Court of Georgia noted that while the qualified protective order satisfied the procedural requirements of HIPAA, it nevertheless violated Baker's substantive right to medical privacy under Georgia law.[66] Specifically, the Court held:

> "[A] litigant may waive [his/her] right to medical privacy under Georgia law **only to the extent such information is relevant to the medical condition the litigant has placed in issue in the legal proceeding**. O.C.G.A. § 24-9-40(a); *Orr v. Sievert*, 162 Ga. App. 677

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[63] *Frazier v. Southeast Georgia Health System, Inc.*, 2023 WL 4110078 at *3 (quoting *Baker*, 288 Ga. at 338); *see also* O.C.G.A. § 24-12-1(a) ("[T]he [medical information privilege] shall be waived to 'the extent the patient places his or her care and treatment or the nature and extent of his or her injuries at issue in any judicial proceeding.").

[64] *Baker v. WellStar Health System, Inc.*, 288 Ga. 336 (2010).

[65] *Id.*

[66] *Id.* at 338-39.

> (1982). In light of this substantive law, the qualified protective order entered by the trial court is too broad regarding the scope of information that may be disclosed. Rather than allowing Baker's health care providers to "discuss [his] medical conditions and any past, present, or future care and treatment with [Wellstar's] counsel," **the order should have limited Wellstar's inquiry to matters relevant to the medical condition Baker has placed at issue in this proceeding**. Without this limitation, the qualified protective order must be considered deficient."[67]

Notably, the *Baker* Court (1) observed a patient's constitutional right to medical privacy and (2) limited discovery to matters relevant to the **subject plaintiff's** medical condition placed at issue **by the subject plaintiff** in the **subject proceeding**.[68]

Here, Ortho does not dispute Plaintiff Ochoa placed her injuries and medical treatment at issue in this lawsuit and thus waived her medical privacy rights. Ortho has previously produced all information regarding its treatment of Plaintiff Ochoa, and Appellees do not contend otherwise.

However, Ortho's prior patients – all of whom have no relation to the instant lawsuit – have not waived their constitutional rights to medical privacy.[69] Accordingly, the Orders' requirement that their protected health information be disclosed, violates their constitutional rights of privacy.[70]

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[67] *Baker v. WellStar Health System, Inc.,* 288 Ga. 336, 338 (2010)(emphasis added).
[68] *Id.* at 338-39.
[69] O.C.G.A. § 24-12-1(a)
[70] *King v. State*, 272 Ga. 788, 790 (2000). (holding that medical records, protected by the constitutional right of privacy, cannot be disclosed without a patient's consent) (citing Ga. Const., Art. I, §1, ¶1).

To make matters worse, according to the Orders, the information obtained by Appellees is allowed to remain with Appellees' counsel and their insurance carriers in perpetuity and used in future litigation. [R. 2715-16; 2728; 2734]. Not only does this violate a patient's expectation of privacy, but it also violates the applicable provisions of HIPAA, which provide that a qualitative protective order requires that a patient's protected health information be returned or destroyed at the conclusion of litigation.[71]

Accordingly, the Orders' requirement that Ortho's other patients' protected health information be disclosed, violates their Constitutional right of privacy.[72]

VII. CONCLUSION

WHEREFORE, for the reasons set forth above, Appellant respectfully requests that this Court **REVERSE** the trial court.

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[71] 45 CFR § 164.512 (e)(v) (A qualified protective order means an order that "(A) Prohibits the parties from using or disclosing the protected health information for any purpose other than the litigation or proceeding for which such information was requested; and (B) Requires the return to the covered entity or destruction of the protected health information (including all copies made) at the end of the litigation or proceeding.")

[72] *King v. State*, 272 Ga. 788, 790 (2000). (holding that medical records, protected by the constitutional right of privacy, cannot be disclosed without a patient's consent) (citing Ga. Const., Art. I, §1, ¶1).

This 8th day of October, 2025.

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IN THE COURT OF APPEALS

STATE OF GEORGIA

ORTHO SPORT & SPINE PHYSICIANS, LLC	)	
	)	
Appellant,	)	Appeal
	)	Case No. A26A0295
v.	)	
	)	
JOHN ERNEST SNOWDEN, et al	)	
	)	
Appellees.	)	

CERTIFICATE OF SERVICE

This is to certify that I have today served the foregoing APPELLANT'S BRIEF via United States first class mail to the following counsel of record:

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This 8th day of October, 2025.

[signature on following page]

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