EXTO

EXHIBIT A

CV-2016-09-3928

1	IN THE COURT OF COMMON PLEAS
2	OF SUMMIT COUNTY, OHIO
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4	
5	MEMBER WILLIAMS et al.,
6	
7	Plaintiffs,
8	
9	vs. Case No. CV 2016 09 3928
10	
11	KISLING, NESTICO & REDICK, LLC, et al.,
12	
13	Defendants.
14	
15	~~~~~~~~~~~~~~~
16	DEPOSITION OF
17	KELLY PHILLIPS III
18	February 22, 2019
19	10:07 a.m.
20	Taken at:
21	Pattakos Law Firm 101 Ghent Road
22	Akron, OH
	Kurt M. Spencer, Notary Public
23	Ruit M. Spencer, Motary Fubire
24	
25	



- Insurance companies have a lot more 1
- leeway with how they deal with claimants in 2
- Ohio than some of those judicial hell-holes, 3
- fair? 4

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CV-2016-09-3928

- 5 A. Yeah. Certainly, than some of the really bad counties in southern states, or in 6
- Eastern Pennsylvania, certainly, that's fair. 7
 - Like Ohio County in West Virginia,
- and places like that? 9
- Yeah. We didn't do business in 10
- West Virginia, but, yes, I'm aware that that's 11 a bad spot.
- 12
- And, you didn't do business in West 13 Q.
- Virginia for a reason, probably. 14
- Correct, yes. 15 A.
 - And, so, it's important to be able Q.
- to protect clients' interests from some of the 17
- insurance companies, wouldn't you agree? 18
- A. As an attorney, certainly. 19
- Q. That's not a bad thing, is it? 20
- That is not a bad thing, no, sir. 21 A.
- Who were the primary plaintiffs' 22
- firms you dealt with in Ohio, when you worked 23
- in insurance? 24
- 25 A. There was a ton of them. Just the

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- 1 big ones that come to mind, of course,
- 2 obviously, since we were very big in Columbus,
- 3 Schiff, Kurgis, Acciani & Levy, or whatever
- 4 that is, O'Conner. O'Conner & Levy, sorry.
- Elk & Elk, Malek & Malek. There's a lot more,
- but those are the ones that specifically jump
- out at me, that I saw the most. 7
- And all those firms use 8
- chiropractors on soft tissue injury cases, 9
- 10 didn't they?

11

19

- A. I would say yes.
- You saw injections and TENS units 12
- on multiple patients with multiple different 13
- law firms, true? 14
- 15 A.
- You have clients now who get 16 Q.
- injections for pain, don't you? 17
- 18 A. I do.
 - And, who use TENS units, correct? Q.
- I haven't really run into a lot of 20
- TENS units. Well, they use them at the 21
- chiropractor. 22
- 23 Q.
- Yeah, the chiropractor utilizes 24 A.
- 25 TENS units.

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EXTO

- And they're helpful for the
- Q. clients, aren't they?
- 3 They tell me they are. I used them A.
- myself. I find them helpful.
- And, same with injections, your 5
- clients tell you those help, as well, right?
 - Some. Most of the time, they say A.
- 8 it helps.

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- Okay. Well, not every treatment is 9 Q.
- for everybody, right? 10
 - Uh-huh. That's fair. A.
- The decision is made between the 12
- 13 physician and the patient, correct?
 - In most circumstances, yes. A.
- 15 Q. You don't tell clients what
- treatment to get, do you? 16
 - I do not. A.
- 18 You've never done that, have you? Q.
 - A. I have not, no.
- Do you know what an average cost of 20 Q.
- a TENS unit is? 21
 - To purchase one? A.
- 23 Q. Yeah.
- 24 A. Well, it depends on the level of
 - TENS unit. I mean, if you want the

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- medicine-quality TENS unit, like they use in
- doctor's offices, you're, probably, looking at
- \$800 to thousands of dollars --
 - Q.
 - -- depending. Or, you can go on A.
- Amazon, like I do, and get the little ones for 6
- 7 \$50.

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- But, they are not the same, and 8 Q.
- they're not as effective, true? 9
- I honestly think they are, but 10
- that's neither here nor there. But, I would
- 12 say, obviously, the ones at the doctor's office are more powerful. 13
- 14 Q. Do you know how much Dr. Ghoubrial
- charged for his? 15
 - I have no idea. I can't recall. A.
- If I told you \$500, would that 17 Q.
- 18 shock you?
 - For a TENS unit? A.
- 20 Q. Yes.
- Did he actually sell the TENS 21 A.
- 22 units? I don't recall.
- If he sold one for \$500, do you 23 Q.
- find that is --24
- 25 I've seen them more expensive,

- disbursement, certainly. 1
- 2 Now, were you exercising your own
- independent professional judgment, when you 3
- handled cases for these clients? 4
- 5 Yes, up until, like, the things I needed permission on, certainly. 6
- Okay. Certain things you had to 7
- ask permission on? 8
- Yeah, any reductions. 9 A.
- A reduction in a bill? Q. 10
- 11 A. Yes.
- But, as far as how you handled that 12 Q.
- individual case, each individual case was a 13
- little different, fair? 14
- Yeah, other than, you know, where I 15 16 was required to send people for treatment.
- 17 That was directed to me.
- I thought you said you didn't 18 Q.
- 19 follow those directions?
- Yeah, I didn't follow -- not 20 A.
- towards the end, no, I didn't follow those 21
- directions. I would send people, based on my 22
- discussion with them, what treatment I felt fit 23
- 24 them best.
- 25 Q. So, if I was a client of yours in

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- Columbus, when you worked at KNR, and you were 1
- my attorney --2
- 3 A. Uh-huh.
- Q. -- you realized you had 4
- professional duties toward me, as a client, 5
- true? 6

11

- 7 A. Yes.
- 8 Q. And, you followed those duties,
- didn't vou? 9
- Yeah, I would say. 10 A.
 - You had a duty to do what was in Q.
- the client's best interest, correct? 12
- A. 13 Yes.
- And, you did that, didn't you? Q. 14
- If they said they needed treatment, 15
- 16 I would tell them what doctors we had
- available, that we knew and dealt with, and if 17
- they were comfortable with that, I would send 18
- them there. 19
- 20 Q. You didn't tell them to get
- treatment, if they weren't hurt, did you? 21
 - A. Oh, never.
- Okay. Nobody asked you to do that 23
- either, did they? 24
- 25 A. No.

- And, you didn't force them to go to
- a certain chiropractor. You might have
- mentioned some chiropractors, but if they said
- they wouldn't go there, you would find another
- 5 one, fair?

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10

- 6 A. Well, no. I told them, or was
- asked to tell them, which is logical, I don't
- disagree with it, you know, do you think that
- chiropractic treatment would be beneficial for
- 10 your injury, if so, I can get you to one.
 - That's what you do today, isn't it? Q.
- 12 Yeah, absolutely. A.
 - Q. And, you refer them to certain
- chiropractors, don't you? 14
- I do. 15 A.
- And you do that, because you like 16 Q.
- 17 working with those chiropractors, and they do a
- good job for your clients. 18
- Yeah. I always tell people that 19
- they can treat anywhere they want, but if they 20
- don't have anywhere specific where they want to 21
- go, I have chiropractors that I can refer to
- them, or to a physical therapy. 23
- 24 And, you never once at KNR forced
- somebody to go to a chiropractor, did you? 25
 - 164
 - No. A.
 - You wouldn't do that, would you? Q.
- 3 No. A.
- And, you never forced anybody at 4 Q.
- KNR to go to Dr. Ghoubrial, did you?
- 6 A. No. I actually had no control over
- 7 that, at all.
- You never referred a client to Q. 8
- 9 Dr. Ghoubrial, did you?
 - Never, no. A.
- They were referred by other 11 Q.
- 12 providers, fair?
- 13 Yeah, Naz Khan. That's the only
- one I'm aware of in Columbus that, well, not
- Naz, but Town & Country Chiropractic. I 15
- apologize. 16
- 17 Q. Okay. And, was that Roz, or who
- 18 was that?
- 19 Well, Naz is the, I guess, the A.
- 20 person.
- 21 Q. Naz Khan?
- Yeah. I never met Naz, so I don't 22 A.
- know. But, I know that she is, essentially,
- the contact point. 24
 - But, Town & Country referred the

22

		1	107
	165	8	167
1	client to Dr. Ghoubrial, correct?	1	Q. And you never saw it with Josh
2	A. I assumed so, yes. I certainly	2	Angelotta, did you?
3	didn't.	3	A. No, sir.
4	Q. You never saw anybody at KNR refer	4	Q. Not with Rob Horton?
5	a case to Dr. Ghoubrial, did you?	5	A. Yeah. I barely, I never handled
6	 No, not to my knowledge. 	6	any files with Rob.
7	Q. And, you're not saying that KNR	7	Q. Didn't see it with Paul Steele?
8	should tell chiropractors who to refer to, are	8	 No, I never saw it with Paul
9	you?	9	Steele.
10	 I have no knowledge of who referred 	10	Q. You didn't see it with Amanda, did
11	anybody to Ghoubrial, Dr. Ghoubrial, excuse me	. 11	you?
12	Q. Okay. But, that's not my question.	12	A. No. I didn't, no.
13	You're not saying KNR should have told	13	Q. You didn't see it with anybody?
14	chiropractors what medical doctors they refer	14	A. I don't think so, no.
15	to, are you saying that?	15	Q. Okay. And one of the things you
16	 I don't have any knowledge if that 	16	said was that you would try to maximize
17	was a requirement, no, I never did that.	17	recovery for your clients.
18	Q. What I'm asking is, you're not	18	A. Certainly.
19	saying that KNR should have interjected, and	19	Q. Is that a good thing?
20	told chiropractors where they should refer	20	A. Yes, I feel that that's my ethical
21	clients to, are you? Are you saying that?	21	responsibility.
22	A. Oh, no. No. No. That's up to the	22	Q. And that is what your clients
23	doctor.	23	wanted, as well?
24	Q. Exactly, and the patient.	24	A. Well, their interests are supposed
25	A. Certainly.	25	to be paramount, yes.
	100		
	166		168
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680	Q. A patient treating with Town &	1 200	Q. And, you always kept, even KNR's
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181

- 1 different. KNR handled things certain ways,
- 2 and, then, Brad Keating handled things certain
- ways. And I took from that the good stuff, and 3
- the stuff I didn't like, I don't do. 4
- 5 For example, you don't like the
- 6 lower level claims?
- 7 Oh, no. I handled all of them. I
- mean, those are what keep the lights on. 8
- 9 You made a comment that you wanted
- to talk to Rob about he could have 20% less 10
- 11 clients, and make 30% more money?
- Yeah. I think if you looked at the 12 A.
- 13 case load, yeah, I don't think there was ever
- an examination, and he conceded there was never 14
- really an examination of what cases were coming 15
- in, and what weren't. The only cases I will 16
- 17 turn down, currently, as an attorney, is if
- 18 somebody alludes to me that they're not
- injured, because I don't represent uninjured 19
- 20 people.

25

- 21 Q.
- When they intimate to me they're 22 Α.
- 23 just trying to get money, I say find another
- 24 lawyer. I'm not that guy.
 - But that was true when you were at

182

- KNR, too, right? 1
- 2 Yeah, I wouldn't know 'cause my
- conversations were over the phone. I never had 3
- anybody tell me they were not injured over the 4
- 5 phone, because they were usually sitting at a
- chiropractor, or came in through our 1-800 6
- 7 number that already, you know, they were
- reaching out to us for a reason. 8
- 9 I don't want to forgot to get back
- 10 to some of the issues, but I want to talk about
- 11 the referrals again. So, after you left
- Keating's office, you developed some 12
- 13 relationships with additional chiropractors,
- who referred? 14
- 15 A. Yes, sir.
 - There's nothing wrong with that Q.
- business relationship, is there? 17
 - A. No, not at all.
 - As long as there's not a quid pro Q.
- 20 quo, right?

16

18

19

- Exactly, and I don't have that with 21
- 22 any of my people that I do business with. In
- 23 fact, that's one of the reasons why I wasn't a
- big fan of Columbus Spine and Rehab. I think 24
- they were wanting me to promise so many cases, 25

- 183
- 1 and I said, "I can't do that." Especially,
- 2 when I was first starting out, you know,
- because, I mean, heck, I was doing a little bit
- of everything, when I first started out.
 - Q. Right.
- A. I was doing wills, and things of
- that nature just to try to keep money coming in
- until I established myself.
- 9 And, you never saw any agreement
- that KNR had with somebody that said for every
- 11 two you send me, I'll send you one, or anything
- 12 like that?
 - A. No, sir. I never saw that.
 - Q. Okay. You weren't aware of any
- 15 quid pro quos at KNR, fair?
 - A. That is fair, yes.
 - Q. And that's true whether it was --
- 18 well, I'll just -- that was true with all the
- providers that you saw at KNR. You didn't see
- 20 any quid pro quo agreements, true?
- No. Nothing between that, any 22 individual provider, and KNR, no, I did not.
- 23 Or, any chiropractic firm, when you
- 24 said individual provider.
 - Yes, correct. That is correct.

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- Q. Now, you made a comment that
- 2 Brandy, the manager, would come down once in a
- while, was a non-lawyer managing a lawyer.
 - A. Yes, sir.
 - Q. You didn't let her manage you,
- 6 though, did you?
- 7 No, I didn't. But, she certainly A.
- tried. 8
- 9 Q.
- 10 That's when I was cautioned don't A.
- end up on her bad side. But, I liked Brandy.
- 12 I thought she was cool.
- 13 You knew how to handle her? Q.
- 14 I would say, I think that she -- I
- 15 would think it was reciprocated. I think we
- both generally liked each other as human
- beings, and I think she knew that my pushback
- 18 on certain things wasn't personal against her.
- 19 It's not like she held it over my head, and
- 20 said, "You will do what I tell you to do." It
- 21 was just more of, no, I'm sorry. I didn't say
- 22 it. But, I was acting like I'm the lawyer.
- 23 I'm not going to --
 - Q. Right.
 - A. -- let her tell me how to do that.

24

And you didn't let her tell you how

to do it, did you? 2

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3 A. No, sir. I did not.

4 You exercised your own judgment? Q.

Where she was concerned, certainly.

Now, you don't know the reason that 6 Q.

she would send these e-mails out about 7

8 directing to certain chiropractors, do you?

> A. I have no idea why, no.

Q. Did you know that it was to spread

11 the work out so they weren't working just one

12 or two people?

> A. I have no idea. Like I said, I was only told -- my specific instructions, when I started there were, all cases are to go to Town & Country, unless otherwise advised.

17 Q. But that's not how you operated?

Not once I entrenched myself a 18 A. little bit, no.

19

20 Q. Well, you never sent somebody to Town & Country that you thought did not need 21

chiropractic treatment, did you? 22

No. If they did not need 23 A.

24 chiropractic treatment, no.

And, you certainly didn't force

186

someone to go there, if they didn't want to go 1

2 there?

No. I would try to talk them 3 A.

4 into -- like, usually, my biggest issue that I

5 had is that it didn't make sense for me to have

someone ride in a minivan, driven by one of 6

Town & Country's employees forty-five minutes,

when we had another chiropractor that was

friendly, and did good work, five minutes down 9

10 the street from where they lived. It just

11 wasn't logical.

And, then, also, there were many clients after clients started complaining to me about the environment at Town & Country. And guys, I would welcome -- if you question 16 anything I have to say, pop in there some time. That's all I have to say about that. It is chaotic, and people that were discerning, would question that treatment, and asked to be -- I

19

20 had many of them ask me to move them somewhere

21 else.

> Q. And you did.

23 You had to come up with a very good reason, because you had to explain yourself. I 24

25 got talked to several times about that. 187

Well, one of the problems with

changing, sometimes, a carrier can look at it,

and see if you're doctor hopping. That's

something the carrier takes into consideration

5 sometimes?

A. 6 I think, usually, my client was

commended for going somewhere else, to be quite

8 honest.

9 I'm not talking about your clients Q.

10 at KNR. I'm saying when you were working in

11 insurance, you would look to see if somebody

was doctor hopping, or doctor shopping,

13 wouldn't you?

14 A. No. I mean, treatment was 15 treatment. It was gaps in treatment that I

16 really concerned myself with.

17 Q. For example, if the accident is on

January 1st, and you don't see treatment until 18

19 February 2nd, you start to wonder?

> A. Certainly.

21 Q. It's important to start treating

22 earlier?

20

23 A. That's fair. I think it adds

credence to the injury claim, certainly. Yeah,

I wouldn't disagree with that.

188

1 Q. Who were some of the chiropractors

2 you developed, you were saying who they were,

you developed relationships with, after you

left Keating?

I would say Viers is the most 5 A.

prominent one. Now, Viers, he is not what you

would call auto accident chiropractor, if you

will, or Workers' Comp chiropractor. He is

actually a chiropractor that doesn't like to

10 work under letters of protection. In fact, he

11 refuses to do so. Now, he will with me,

12 because he knows I get the job done, and that's

13 really what it comes down to. But, I'm the

only attorney that he does that with, in fact,

15 I'm the only attorney he does business with.

And, that ended up happening,

17 because we run around in the same areas. And

everybody kept telling me about how I need to

reach out to Dr. Viers, and everybody kept

telling Dr. Viers that he needs to reach out to

me. And, then, we finally got together, and it 21

22 was a love connection. I don't know what else

23 to say.

24 But, before you started sending

clients there, you wanted to see how he ran

- 1 A. Yes.
- 2 Q. So the client was taking
- responsibility for those? 3
- Now, I understand what you're 4
- 5 asking, if there is no lien present from a
- medical provider, you can give your client the 6
- discretion to be paid that money, and handle it 7
- themselves, or you can say, "Do you want me to 8
- pay and attempt to negotiate it down for you?" 9 And, those are the types of things 10
- 11 you talk about with the client? Yeah. And, I would tell you nine 12
- times out of ten, a client on their own is 13
- going to get a bigger reduction than a lawyer 14
- would trying to call one of these hospitals, or 15
- medical providers, to try to reduce it. 16
- And you're not talking about one of 17
- the letters of protection, you mean, someone 18
- without a Letter of Protection? 19
- 20 A. Correct, and that you did not have
- a lien on. You know, like, now, most hospitals 21 are affiliated, and have collection groups. 22
- But, even when they know there are health
- 23 benefits will try to lien a file, as opposed to 24
- 25 turning into health benefits, because they

250

- think they can get more money that way. And, 1
- if you have notice of a lien, then, you have to 2
- pay it, or negotiate it down and pay it. 3
- Q. In -- have you read the Complaint 4
- 5 in this case, or any of the Complaint?
- 6 A. No, I have not.
- In your practice, if you filed a 7
- complaint, and you found out that one of the
- allegations in it were not true, what would you 9
- 10 do?
 - A. As far as?
- Would you amend the Complaint? 12 Q.
- 13 Would you drop the claim?
- Yes. If it was foundationally 14
- incorrect, then, yes, I would amend the 15
- Complaint. 16

11

- In this particular case, one of the 17 Q.
- 18 claims has to do with injections that
- Dr. Ghoubrial gave. Now, by the way, you 19
- 20 mentioned earlier that some client told you
- that Dr. Ghoubrial, what, had a -- or she 21
- described what type of person? Middle Eastern? 22
- Yeah. She said he was a smaller 23
- Middle Eastern looking man, yes. 24
- 25 Q. Who put a cigarette in his mouth,

- 251
- and had someone light it?
- No, somebody else lit it, and put 2
- the cigarette in his mouth. I just thought it
- was hysterical.
 - You don't know if there's any --Q.
- She said there was gloves. 6 A.
 - You don't know if that's true, do Q.
- 8 you?

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- That's just what my client told me. A.
 - What if I told you that Dr. Q.
- 11 Ghoubrial doesn't smoke?
 - That's entirely possible. A.
 - Q. And, this is the client that had
- someone in prison, her husband? 14
- That is correct. 15 A.
 - Now, if you had a client who, well, Q.
- strike that. One of the claims is that
- Dr. Ghoubrial would inject patients, without
- 19 telling them what it was, unidentified
- medication. You never had your clients tell 20
- 21 you that, did you?
- No. They would just say that they 22 A.
- didn't understand why they needed them. And I 23
- had some people going, like, "I don't know why
- I am getting these shots."

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- That was something they would have
- discussed with Dr. Ghoubrial, true?
- Yeah. I would say, "Did you not 3
- have that discussion with the doctor?" And
- they would say, "No, I didn't." They would
- claim it was improperly explained to them,
- sure. Not every one of them, but some of them. 7
 - And, improperly explained how? Q.
- They didn't understand why they 9 A.
- were necessary. 10

- 11 Q. But, they agreed to them.
- 12 A. Obviously.
- 13 I mean, you're not saying there was Q.
- 14 no informed consent on those, are you?
- 15 I have no knowledge what the
- conversation was. They just said they didn't 16
- understand why they needed them. And didn't 17
- feel like they understood why they were getting
- them. "Well, why did you get them?" That was 19 20 my response.
- 21 Right. You didn't tell them to Q.
- 22 take injections they didn't need, did you? 23
 - I did not, no. A.
- 24 And, if they weren't helping, tell
- 25 them, "Well, don't do them?"

- That is correct. A.
- And, you weren't told by KNR, or 2
- anybody, "No, even if it doesn't help, keep 3
- getting injections." Nobody told you that. 4
 - Nobody told tell me that, no.
- You wouldn't have done that anyway, 6 Q.
- would you? 7

1

5

8

- I would not have done that. A.
- So, if there is an allegation that 9 Q.
- Dr. Ghoubrial gave an injection, or an 10
- unspecified medication, but the person making 11
- that claim knew exactly what that medication 12
- was, Cortisone --13
- A. Uh-huh. 14
- How do you reconcile those two? Q. 15
- How so? 16 A.
- Q. Well, I want you to assume that a 17
- plaintiff, in this case, had injections from 18
- 19 Dr. Ghoubrial over two different cases --
- A. Uh-huh. 20
- 21 Q. And, that he wrote an e-mail to KNR
- saying that he was going to give them Cortisone 22
- injections, right, in one of the cases he was 23
- actually deposed under oath, described getting 24
- 25 Cortisone injections --

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- 1 A. Uh-huh.
- -- and that they provided relief. 2
- 3 Is that something you would claim in a
- Complaint is an unspecified medication? 4
 - Well, it sounds like he's being
- pretty specific saying he needed Cortisone, and 6
- 7 understood it, so, yeah, I would say, no. That
- seems pretty obvious to me. 8
- And, if you had put that in a 9
- Complaint, and, then, heard your client's 10
- testimony, would you amend that Complaint? 11
- 12 A. Most likely, yes.
 - That wouldn't be a proper claim to Q.
- make -- if you were told what it was, wouldn't 14
- be proper to claim you didn't, would it? 15
 - I would say that would be up to the
- court to decide. But, personally, no, I 17
- wouldn't amend the Complaint. 18
 - Q. You wouldn't operate that way?
- 20 A. I do not operate that way, no, I do
- 21 not.

5

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19

- And, another individual, who's 22 Q.
- claiming that Dr. Ghoubrial gave her a TENS 23
- unit, actually was treated by another doctor, 24
- whose handwritten notes from that visit are his

- 255
- 1 own handwriting, who sat right in that chair
- 2 right there, and said, "I treated her." And
- 3 Dr. Ghoubrial was in Columbus when she was
- 4 treating with the gentleman here, now, if you
- 5 found that out, would you still put in the
- Complaint that the patient treated with
- Dr. Ghoubrial?
 - A. Not if he -- he never saw her?
- 9 Q. Never saw him.
 - A. Well, then, no, of course not.
- That wouldn't be proper to do, 11 Q.
- 12 would it?

8

10

13

- A. Not in my opinion, no.
- 14 I didn't think so. So, one of the Q.
- 15 plaintiffs in this case, Member Williams, and,
- by the way, I assume you don't know Member
- 17 Williams?
- I know very little about this 18
- 19 Complaint, at all, other than what was in the
- initial article that Paul Steele pointed out to 20
- 21 me.

2

14

- 22 Q. Not Naomi Wright?
- 23 A. No.
- 24 Q. You don't know any of the
- plaintiffs? 25

- I'm clueless. 1 A.
 - Q. Okay.
- I kept myself that way. 3 A.
- So, Mr. Popson here, took Member
- Williams' deposition --
- 6 Α. Okay.
- -- and, asked her, "Did you ask any 7 Q.
- questions on the Settlement Memorandum about
- 9 the investigator fee," and she said, "Yeah, I
- 10 asked him what it was, and they told me it was
- 11 to obtain the police report, and other things
- 12 from the accident." So, that's different than
- 13 what you told your clients, correct?
 - A. Yes.
- And, I can't remember who it was, 15 Q.
- 16 what attorney actually handled that, if anyone
- 17 remembers who handled that Settlement
- 18 Memorandum, I can't recall. But, if that's
- 19 what she was told, and if the investigator had
- 20 obtained the police report, and had obtained
- 21 things from the accident, and had done work on
- 22 her case, and that is what she was told, that
- 23 is completely and entirely different than your
- involvement with your clients in those
- investigation reports, true?

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of the client, true?

Yes. Anything that can benefit 2

your client's case, you would need to get, yes, 3

sure. 4

5 Q. Now, you said that you relied on

the doctors in determining, whether the

treatment was reasonable and necessary. It is 7

reasonable for you as a lawyer to rely on a 8

medical doctor to determine whether care is 9

reasonable and necessary, true? 10

I would certainly like to think so, 11 A.

12 yeah.

13 Q. And, you were also asked questions

about trial. Now, do you know how many trials 14

Mr. Pattakos has had? 15

> I have no knowledge, no. A.

Q. Do you know whether he has any 17

other class action experience, other than this 18

19 case?

16

20 A. I have no -- I do not know

anything, as to his experience, no. 21

22 Now, are you being critical for the

23 number of trials that they tried in Columbus?

While I was there? 24 A.

25 Q. Yes.

382

1 No. That's just my best guess.

No, I'm not being critical. They were 2

3 constantly gone attending, you know,

mediations, and pre-trial conferences, and 4

things like that. But, I'm not aware of that 5

many trials going forward, while I was there. 6

I knew a few that come to mind. But they could 7

have had a whole bunch that I don't know about.

9 Q. A lot of clients don't want to go

to trial, fair? 10

11

16

A. Sure, most don't.

12 Q. Some do.

Some do. 13 A.

Different clients have different 14 Q.

tolerances for trial, true? 15

> A. That's a fair statement.

17 Some of them decide to take less

than perhaps the case is worth, because they 18

don't want to go to trial? 19

20 A. Sure.

21 Q. And some of them want to go to

trial, even though you recommend that you 22

don't? 23

24 A. Sure.

25 Q. You would have to look at each 383

individual case to figure that out.

A. That's a fair statement.

3 Now, Town & Country, how did the

insurance company that you are referring to

determine that somehow Town & Country did not

provide as good of treatment as other

chiropractors? Was that the reason they didn't

like them?

9 A. There's a multitude. They thought

10 their bills were high. They would question the

treatment, whether multiple modalities would 11

work in the same time, whether they are

13 following medical protocol, or just rushing

14 them through the process. They do that with

15 every chiropractor, though, it's not limited to

16 Town & Country.

17 Q. So, you don't think that the

insurance company should be able to dictate who

your clients meet with, do you?

Certainly not. They could just A.

21 dictate what they want to pay for.

22 But, they shouldn't be able to

dictate who your clients treat with, should 23

24 they?

4

5

20

25 A. No.

384

Q. Now, you said the Columbus office 1

was to keep Dr. Khan happy. Nobody told you

that, did they?

No. That's the way I received it. A.

Q. But, you don't know that, do you?

6 A. I know what happens when Naz isn't

upset, or when she is upset, certainly. 7

Do you see this, I'm showing you, I 8 Q.

don't know if you could see it from there, it's

a gift certificate that one of the KNR lawyers

11 found at a pawn shop. Do you see that?

12 A.

Q. So, apparently, some client must 13

14 have sold this \$25 gift certificate, or

15 whatever to a pawn shop. And she sent it

16 around to the office saying you got to love our

clients. I don't know if you were around when 17

that e-mail --18

19 A. I -- no. I don't recall ever seeing that. 20

21 Q.

Now, just by looking at that gift

22 card, what race, ethnicity, was that client, do 23 you know?

24 A.

How would I know? Macaroni 25 Grill -- I have zero idea.