

1 RON BENDER (SBN 143364); rb@lnbyb.com
2 MONICA Y. KIM (SBN 180139); myk@lnbyb.com
3 LEVENE, NEALE, BENDER, YOO & BRILL L.L.P.
4 10250 Constellation Blvd., Suite 1700
5 Los Angeles, CA 90067
6 Tel: (310) 229-1234; Fax: (310) 229-1244
7 www.lnbyb.com

8 Attorneys for Jacob Nathan Rubin, MD, FACC, Patient Care Ombudsman

9 **UNITED STATES BANKRUPTCY COURT**
10 **CENTRAL DISTRICT OF CALIFORNIA**
11 **LOS ANGELES DIVISION**

12 In re:) Lead Case No.: 2:18-bk-20151-ER

13 **VERITY HEALTH SYSTEM OF**
14 **CALIFORNIA, INC. et al.,**

15 Debtor(s).

- 16 Affects All Debtors) Case No.: 2:18-bk-20162-ER;
- 17 Affects Verity Health System of) Case No.: 2:18-bk-20163-ER;
- 18 California, Inc.) Case No.: 2:18-bk-20164-ER;
- 19 Affects O'Connor Hospital) Case No.: 2:18-bk-20165-ER;
- 20 Affects Saint Louise Regional Hospital) Case No.: 2:18-bk-20167-ER;
- 21 Affects St. Francis Medical Center) Case No.: 2:18-bk-20168-ER;
- 22 Affects St. Vincent Medical Center) Case No.: 2:18-bk-20169-ER;
- 23 Affects Seton Medical Center) Case No.: 2:18-bk-20171-ER;
- 24 Affects O'Connor Hospital Foundation) Case No.: 2:18-bk-20172-ER;
- 25 Affects Saint Louise Regional Hospital) Case No.: 2:18-bk-20173-ER;
- 26 Foundation) Case No.: 2:18-bk-20175-ER;
- 27 Affects St. Francis Medical Center of) Case No.: 2:18-bk-20176-ER;
- 28 Lynwood Foundation) Case No.: 2:18-bk-20178-ER;
- Affects St. Vincent Foundation) Case No.: 2:18-bk-20179-ER;
- Affects St. Vincent Dialysis Center, Inc.) Case No.: 2:18-bk-20180-ER;
- Affects Seton Medical Center) Case No.: 2:18-bk-20181-ER
- Foundation)

Chapter 11 Cases

**SUBMISSION OF FOURTH REPORT BY
PATIENT CARE OMBUDSMAN, JACOB
NATHAN RUBIN, MD, FACC,
PURSUANT TO 11 U.S.C. § 333(b)(2)**

[NO HEARING REQUIRED]

Debtors and Debtors In Possession



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1 Jacob Nathan Rubin, MD, FAAC, the Patient Care Ombudsman (“PCO”) appointed under
2 11 U.S.C. § 333 in the above-referenced chapter 11 bankruptcy cases of the affected debtors and
3 debtors in possession (collectively, “Debtors”), hereby submits his fourth report (“Report”) to the
4 Court pursuant to 11 U.S.C. § 333(b) regarding the quality of patient care provided to patients of
5 the affected Debtors which continue to operate their respective facilities. The Report is hereby
6 attached as Exhibit A.

7 Submitted by:

8 LEVENE, NEALE, BENDER, YOO & BRILL L.L.P.

9
10 By: /s/ Ron Bender

11 RON BENDER

12 MONICA Y. KIM

13 Attorneys for Patient Care Ombudsman
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EXHIBIT A

1 operations to other entities. The medical records of all the patients have gone to the separate entities
2 or with the individual physicians except for Sport Orthopedic and Rehabilitation (SOAR).

3 In the case of SOAR, the Debtor is the custodian of medical records. As indicated to the
4 PCO, the affected Debtor will remain as custodian of the medical records until the patients'
5 physicians take control of the medical records.

6 Debtors continue to operate four acute care hospital centers and one hemodialysis center.
7 Debtors' maintain facilities in Northern and Southern California. These include the following:

8
9 A. HOSPITALS (4)

10 St. Vincent's Medical Center

11 St. Francis Medical Center

12 Seton Coastside

13 Seton Medical Center

14 B. DIALYSIS CENTER (1)

15 St. Vincent's Dialysis Center

16
17 **III. METHODOLOGY AND MEDICAL STANDARD APPLIED BY THE PCO**

18 The PCO continues to monitor patient care provided by the debtor by applying the
19 principles and structure of evidence-based review outlined in the PCO First Report.

20 **A. Fourth Report Review Strategy**

21 Specific review and follow-up on previously identified areas of concern were performed.

22 Frequent discussions with Dr. Del Junco were helpful in determining the progress of
23 corrective action plans. Regular communication with local CMO, CEO, CNO, Quality Directors
24 and Medical staff leaders promoted constructive dialogue regarding matters of concern. Through
25 dialogue with organizational leaders, the PCO was well-informed on the status of all events
26

1 (positive or negative), corrective action plan progress, results of CDPH investigations, State Board
2 of Pharmacy and Joint Commission surveys.

3 The diligence of the organization to manage the E-Data room punctually assisted the PCO
4 in performing his duties. In addition to transparent document communication through the data
5 room, administrative and medical staff professional relationships have developed with the PCO that
6 encourage contemporaneous exchange of information allowing the PCO to address problems and
7 collaboratively develop solutions with organizational leaders in real time.
8

9 **B. Documents Reviewed in Data Room (One Drive) and at Debtors' Locations.**

10 The data room documents were requested from Debtors and could only be reviewed in read
11 only format. Should any party of the court wish to review the documents listed, this request must be
12 made of the Debtors other than as discussed. The following items will continue to be included in
13 our evaluation process:

14 CALL PANEL

15 CDPH-California Department of Public Health reports

16 CMS-deemed status report

17 JOINT COMMISSION SURVEY

18 MEDICAL EXECUTIVE COMMITTEE (MEC)

19 PHARMACY SHORTAGE

20 PROFESSIONAL LIABILITY (settled and pending)

21 QUALITY ASSURANCE PERFORMANCE IMPROVEMENT COMMITTEE

22 MINUTES

23 RISK MANAGEMENT DATA

24 VENDORS

25 LEAPFROG DATA
26
27
28

CALIFORNIA STATE BOARD OF PHARMACY SURVEY

IV. REVIEW OF DEBTORS BY INDIVIDUAL LOCATION

A. HOSPITALS

1. St. Vincent's Medical Center (SVMC)

a. Site Visit

i. Infection Clusters

The PCO performed a site visit to discuss a reported increase in surgical site infections, specifically for craniotomy surgeries performed in the Doheny surgical theater. The PCO personally did an on-site inspection of the five Doheny and thirteen main hospital operating rooms during the onsite visit. SVMC is operating all five Doheny surgical suits and nine of thirteen main operating room suits on the main campus.

The PCO requested the presence of the CMO, Infection Control Director, OR Director and Manager during the PCO's onsite visit. The PCO and the group discussed in detail the findings and corrections performed by SVMC investigative team. In addition, the CDPH investigation report, findings and accepted corrections were reviewed and discussed with the SVMC team.

In summary, an increase in craniotomy surgical site infections from 1.3% to 13.5% was discovered. An exhaustive *Tracer Root Cause Analysis* investigation was performed for both the Doheny and main operating rooms. The PCO and administration discussed the details of the investigation, findings, education, corrections and continued monitoring of the action plans to assure patient safety.

The following were identified and corrected by the administrative investigative team:

- Breakdown in storage of sterile trays and instruments.
- Education on proper handwashing technique before surgery. The PCO noted that handwashing was not a factor in increased infection rate.

- 1 • Education was performed on specialized tray assembly.
- 2 • The surgical processing team removed and replaced pitted or damaged instruments
- 3 from circulation.
- 4 • Education and policy changes were performed with respect to terminal cleaning of
- 5 surgical instrument trays.

6 SVMC appropriately reported their findings to CDPH. CDPH sent several teams to
7 investigate the reported events. According to administration and the CDPH report, CDPH was
8 satisfied with the corrections and policy changes that were implemented by SVMC.
9

10 **ii. Leapfrog and HCAHPS**

11 During the onsite visit, we discussed Leapfrog data and HCAHPS quality measures.
12 HCAHPS scores have improved slightly over the last quarter.

13 The PCO discussed Leapfrog Data with administration in detail. The overall acquired
14 infection rates remain low. In fiscal year 2018, SVMC had zero urinary catheter associated
15 infections. During Fiscal year 2019, SVMC reported two events. The infection rates remain low and
16 well under national reported rates.
17

18 **iii. Liver Transplant Unit**

19 The PCO met with the Liver Transplant Surgeon and team members at SVMC. The team
20 have completed five successful liver transplants and continue to deliver hepatobiliary services to the
21 community.
22

23 **b. Review: California Department of Public Health Reports**

24 The PCO reviewed four new CDPH incidents that occurred since the last report. The
25 reports and corrective action plans were discussed in detail with administration and are acceptable.
26 The PCO did not find that the financial burden of the bankruptcy caused or were related to the
27 incidents.
28

1 **c. Critical Vendor Evaluation**

2 All vendors are currently providing services and equipment under their contractual
3 agreements. Critical vendors continue to operate and supply critical equipment to the hospital
4 without delay.

5 **d. Pharmacy Shortages**

6 All pharmacy shortages were reviewed and found to be unrelated to the bankruptcy or
7 vendor contract termination. The shortages listed are consistent with national or local shortages.
8

9 **e. Joint Commission Accreditation Report findings:**

10 The last certification from Joint Commission was performed and completed on January 8th,
11 2019. There have not been any new events that triggered a follow-up visit from Joint Commission.

12 **2. St. Francis Medical Center (SFMC)**

13 **a. Video Conference and One-Drive Review**

14 The PCO arranged a video conference with the administration team to discuss any new
15 events since the PCO's last visit. Administration detailed all CDPH reporting and investigations
16 that were performed since the last PCO report. Each event was discussed in detail followed by
17 explanation of corrective action plans, as required. After review and discussions with
18 administration, the PCO concluded the issues that were reported and identified since last report
19 were not caused by the Debtors' bankruptcy or financial status.
20

21 Administration has seen a few key directors resign since last report. The Director of Mental
22 Health resigned and was replaced with an interim director. The resignation has not caused an
23 untoward impact to the mental health unit in terms of patient care and safety.
24

25 Since the last PCO report, the PCO learned that echocardiograms and electrocardiograms
26 were not reviewed and certified timely. The PCO confirmed that deficiencies in cardiology
27 services were corrected and cardiology services are again being performed timely. Administration
28

1 continues to closely track and monitor for deficiencies.

2 **b. California Department of Public Health**

3 There were three CDPH reported incidents that were discussed in detail with administration.
4 The PCO did not find any untoward patient care trends. Specifically, the events that occurred were
5 not associated with any financial burden from the bankruptcy.

6 The PCO will continue to monitor the progress in subsequent visits along with all new
7 CDPH reports as filed.

8 **c. Trauma Certification**

9 Administration has made significant changes to their trauma service in accordance with the
10 recommendations of the American College of Surgeons (ACS). Administration is confident that
11 the next ACS trauma verification scheduled for November 7th, 2019, will be successful.

12 SFMC continues to provide trauma services and is certified by Los Angeles City Emergency
13 Medical Services to serve as a designated trauma facility.

14 **d. Leapfrog Data and Ratings**

15 SFMC Leapfrog status has increased from an F grade to a C grade. SFMC administration
16 believes that after the institution of an electronic medical records system Leapfrog statistics will
17 continue to rise. The PCO concurs.

18 **3. Seton Coastside**

19 **a. Administration Discussions**

20 A Video conference with Seton CEO and CMO was conducted.

21 Seton Coastside functions as a large Skilled Nursing Facility.

22 Falls are a regular occurrence and mandate reporting to CDPH. CDPH reports were filed
23 relating to patient falls. Review of the CDPH reports did not illicit concern for patient safety.

1 Seaton Coastside had an Occupational Safety and Health Administration (OSHA)
2 investigation performed due to a complaint relating to missing Material Safety and Data Sheets
3 (MSDS). OSHA performed the investigation and did not find any deficiencies and did not make
4 any recommendations. The complaint was considered unfounded.

5 **b. CDPH**

6 The PCO reviewed all CDPH reports with the corrective actions in detail. It does not appear
7 that the incidents were related to the bankruptcy. There were no global patient safety concerns
8 identified.
9

10 **c. Lawsuits**

11 The PCO did not find any new lawsuits or professional liability reports filed.

12 **4. Seton Medical Center (SMC)**

13 **a. Administration Discussions**

14 The PCO was updated on several ongoing items by Dr. Mark Fratzke DNP, CEO, via video
15 conference.
16

17 The State Board of Pharmacy cleared SMC by accepting all the corrective action items.
18 SMC is currently in good standing with the State Board of Pharmacy.

19 SMC has requested and been granted authorization to purchase new equipment for critical
20 areas of the hospital.
21

22 The PCO was notified by Dr. Perez that the Hospitalist and Intensivist contracts were set to
23 expire on June 30th, 2019. This would effectively limit the hospitals ability to provide safe
24 continuity of care to patients currently hospitalized and those community patients requiring
25 admission to the hospital from the emergency department.

26 The PCO immediate contacted Dr. Del Junco who informed the PCO that the Hospitalist
27 and Intensivist contacts were extended through September 30th, 2019. The PCO confirmed with Dr.
28

1 Connie Wong, Hospitalist Director, that the Hospitalist have not received termination letters and
2 that contract extensions have been granted through September 30th, 2019.

3 **b. CMS Findings**

4 SMC was released from immediate jeopardy since the last report. No new or continued
5 CMS issues were reported.

6 **c. California Department of Public Health**

7 All California Department of Public Health findings were initially reviewed in the E-data
8 room discussed with administration. Corrective actions were implemented by SMC and are being
9 monitored by the PCO for compliance.

10 **d. Leapfrog Data**

11 SMC leapfrog grade increased to a B rating. SMC has the highest leapfrog rating in the
12 healthcare system. Administration continues to accent and reinforce positive performance that led
13 to the B rating.

14 **5. St. Vincent's Dialysis Center**

15 The unit is incorporated in St. Vincent's Hospital and continues to function normally. No
16 reported or identified adverse events were discovered during this reporting cycle.

17 **V. CONCLUSIONS**

18 The remaining hospitals continue to have dedicated administrators and staff that are devoted
19 to patient care and safety.

20 SVMC had a significant increase in craniotomy surgical site infections. SVMC team
21 recognized and acted quickly to report and correct issues that led to the increase infection rate. A
22 robust and exhaustive investigation was performed. An immediate corrective action plan was
23 instituted eliminating any further observed infections. The PCO will continue to closely monitor
24 SVMC infection rates and report any untoward events.

25 St. Francis Medical Center did not receive its Trauma Verification from ACS but remains an
26 active member of Los Angeles EMS Trauma System. Administration implemented
27
28


1 recommendations from ACS and are confident that they will reverify with ACS on November 7th,
2 2019. Participation in ACS verification is voluntary and reflect commitment to quality of care.

3 The PCO was notified by SMC Chief of staff that the Hospitalist and Intensivist programs
4 were scheduled for contract termination on June 30th, 2019. The PCO immediately contacted Dr.
5 Del Junco who informed the PCO that Hospitalist and Intensivist contract extensions were
6 completed through September 30th, 2019. The PCO spoke with Dr. Connie Wong, Hospitalist
7 director, and verified that the Hospitalist group has not been issued termination letters and contract
8 extensions have been granted with formal written notice to follow. The contract extensions will
9 ensure continuity of patient care and allow the Hospitalist group time to negotiate new contracts
10 with new hospital ownership.

11 The PCO continues to monitor and follow-up on the status of Seton Medical Centers new
12 computerized tomography (CT) scanner. Administration confirmed that construction plans are
13 awaiting approval from California's Office of Statewide Health Planning and Development
14 (OSHDP).

15 Verity Healthcare is operating well despite the burden of bankruptcy. The PCO will
16 continue to monitor patient care and safety of the remaining entities in the healthcare system and
17 report findings to the court.

18 Dated this 7th day of June, 2019

19 
20 _____
21 Jacob Nathan Rubin, MD, FACC, Patient Care
22 Ombudsman
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PROOF OF SERVICE OF DOCUMENT

I am over the age of 18 and not a party to this bankruptcy case or adversary proceeding. My business address is:

10250 Constellation Blvd., Suite 1700, Los Angeles, CA 90067

A true and correct copy of the foregoing document entitled (*specify*): **SUBMISSION OF FOURTH REPORT BY PATIENT CARE OMBUDSMAN, JACOB NATHAN RUBIN, MD, FACC, PURSUANT TO 11 U.S.C. § 333(b)(2)** will be served or was served (**a**) on the judge in chambers in the form and manner required by LBR 5005-2(d); and (**b**) in the manner stated below:

1. TO BE SERVED BY THE COURT VIA NOTICE OF ELECTRONIC FILING (NEF): Pursuant to controlling General Orders and LBR, the foregoing document will be served by the court via NEF and hyperlink to the document. On (*date*) June 7, 2019, I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following persons are on the Electronic Mail Notice List to receive NEF transmission at the email addresses stated below:

Service information continued on attached page

2. SERVED BY UNITED STATES MAIL:

On June 7, 2019, I served the following persons and/or entities at the last known addresses in this bankruptcy case or adversary proceeding by placing a true and correct copy thereof in a sealed envelope in the United States mail, first class, postage prepaid, and addressed as follows. Listing the judge here constitutes a declaration that mailing to the judge will be completed no later than 24 hours after the document is filed.

Service information continued on attached page

3. SERVED BY PERSONAL DELIVERY, OVERNIGHT MAIL, FACSIMILE TRANSMISSION OR EMAIL (*state method for each person or entity served*): Pursuant to F.R.Civ.P. 5 and/or controlling LBR, on June 7, 2019 I served the following persons and/or entities by personal delivery, overnight mail service, or (for those who consented in writing to such service method), by facsimile transmission and/or email as follows. Listing the judge here constitutes a declaration that personal delivery on, or overnight mail to, the judge will be completed no later than 24 hours after the document is filed.

Via Attorney Service
The Honorable Ernest M. Robles
United States Bankruptcy Court, #1560
255 E. Temple Street
Los Angeles, CA 90012

Service information continued on attached page

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

June 7, 2019
Date

Jason Klassi
Printed Name

/s/ Jason Klassi
Signature

2:18-bk-20151-ER Notice will be electronically mailed to:

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15
16
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19
20
21
22
23
24
25
26
27
28

Robert N Amkraut on behalf of Creditor Swinerton Builders
ramkraut@foxrothschild.com

Kyra E Andrassy on behalf of Creditor MGH Painting, Inc.
kandrassy@swelawfirm.com, csheets@swelawfirm.com;gcruz@swelawfirm.com;jchung@swelawfirm.com

Kyra E Andrassy on behalf of Interested Party Courtesy NEF
kandrassy@swelawfirm.com, csheets@swelawfirm.com;gcruz@swelawfirm.com;jchung@swelawfirm.com

Simon Aron on behalf of Interested Party RCB Equities #1, LLC
saron@wrslawyers.com

Lauren T Attard on behalf of Creditor SpecialtyCare Cardiovascular Resources, LLC
lattard@bakerlaw.com, abalian@bakerlaw.com

Keith Patrick Banner on behalf of Creditor Abbott Laboratories Inc.
kbanner@greenbergglusker.com, sharper@greenbergglusker.com;calendar@greenbergglusker.com

Keith Patrick Banner on behalf of Interested Party CO Architects
kbanner@greenbergglusker.com, sharper@greenbergglusker.com;calendar@greenbergglusker.com

Cristina E Bautista on behalf of Creditor Health Net of California, Inc.
cristina.bautista@kattenlaw.com, ecf.lax.docket@kattenlaw.com

James Cornell Behrens on behalf of Creditor Committee Official Committee of Unsecured Creditors of Verity Health System of California, Inc., et al.
jbehrens@milbank.com, gbray@milbank.com;mshinderman@milbank.com;hmaghakian@milbank.com;dodonnell@milbank.com;jbrwster@milbank.com;JWeber@milbank.com

Ron Bender on behalf of Health Care Ombudsman J. Nathan Ruben
rb@lnbyb.com

Ron Bender on behalf of Health Care Ombudsman Jacob Nathan Rubin
rb@lnbyb.com

Bruce Bennett on behalf of Creditor Nantworks, LLC
bbennett@jonesday.com

Bruce Bennett on behalf of Creditor Verity MOB Financing II LLC
bbennett@jonesday.com

Bruce Bennett on behalf of Creditor Verity MOB Financing LLC
bbennett@jonesday.com

Peter J Benvenuti on behalf of Creditor County of San Mateo
pbenvenuti@kellerbenvenuti.com, pjbenven74@yahoo.com

Elizabeth Berke-Dreyfuss on behalf of Creditor Center for Dermatology, Cosmetic and Laser Surgery
edreyfuss@wendel.com

Steven M Berman on behalf of Creditor KForce, Inc.
sberman@slk-law.com

Alicia K Berry on behalf of Attorney Alicia Berry
Alicia.Berry@doj.ca.gov

- 1 Alicia K Berry on behalf of Interested Party Attorney General For The State Of Ca
Alicia.Berry@doj.ca.gov
- 2
3 Stephen F Biegenzahn on behalf of Creditor Josefina Robles
efile@sfblaw.com
- 4 Stephen F Biegenzahn on behalf of Interested Party Courtesy NEF
efile@sfblaw.com
- 5
6 Karl E Block on behalf of Interested Party Courtesy NEF
kblock@loeb.com, jvazquez@loeb.com;ladoCKET@loeb.com
- 7 Dustin P Branch on behalf of Interested Party Wells Fargo Bank, National Association, as indenture trustee
branchd@ballardspahr.com,
8 carolod@ballardspahr.com;hubenb@ballardspahr.com;Pollack@ballardspahr.com
- 9 Michael D Breslauer on behalf of Creditor Hunt Spine Institute, Inc.
mbreslauer@swsslaw.com,
10 wyones@swsslaw.com;mbreslauer@ecf.courtdrive.com;wyones@ecf.courtdrive.com
- 11 Chane Buck on behalf of Interested Party Courtesy NEF
cbuck@jonesday.com
- 12 Damarr M Butler on behalf of Creditor Pension Benefit Guaranty Corporation
butler.damarr@pbgc.gov, efile@pbgc.gov
- 13
14 Lori A Butler on behalf of Creditor Pension Benefit Guaranty Corporation
butler.lori@pbgc.gov, efile@pbgc.gov
- 15 Howard Camhi on behalf of Creditor The Huntington National Bank
hcamhi@ecjlaw.com, tcastelli@ecjlaw.com;amatsuoka@ecjlaw.com
- 16
17 Shirley Cho on behalf of Attorney Pachulski Stang Ziehl & Jones LLP
scho@pszjlaw.com
- 18 Shirley Cho on behalf of Debtor Verity Health System of California, Inc.
scho@pszjlaw.com
- 19
20 Jacquelyn H Choi on behalf of Interested Party Courtesy NEF
jchoi@swesq.com
- 21 Shawn M Christianson on behalf of Creditor Oracle America, Inc.
cmcintire@buchalter.com, schristianson@buchalter.com
- 22
23 Shawn M Christianson on behalf of Interested Party Courtesy NEF
cmcintire@buchalter.com, schristianson@buchalter.com
- 24 Kevin Collins on behalf of Creditor Roche Diagnostics Corporation
kevin.collins@btlaw.com, Kathleen.lytle@btlaw.com
- 25 David N Crapo on behalf of Creditor Sharp Electronics Corporation
dcrapo@gibbonslaw.com, elrosen@gibbonslaw.com
- 26
27 Mariam Danielyan on behalf of Creditor Aida Iniguez
md@danielyanlawoffice.com, danielyan.mar@gmail.com
- 28 Mariam Danielyan on behalf of Creditor Francisco Iniguez

- 1 md@danielyanlawoffice.com, danielyan.mar@gmail.com
- 2 Brian L Davidoff on behalf of Creditor Abbott Laboratories Inc.
bdavidoff@greenbergglusker.com, calendar@greenbergglusker.com;jking@greenbergglusker.com
- 3 Brian L Davidoff on behalf of Interested Party CO Architects
bdavidoff@greenbergglusker.com, calendar@greenbergglusker.com;jking@greenbergglusker.com
- 4
- 5 Aaron Davis on behalf of Creditor US Foods, Inc.
aaron.davis@bryancave.com, kat.flaherty@bryancave.com
- 6 Kevin M Eckhardt on behalf of Creditor C. R. Bard, Inc.
keckhardt@huntonak.com, keckhardt@hunton.com
- 7 Kevin M Eckhardt on behalf of Creditor Smith & Nephew, Inc.
8 keckhardt@huntonak.com, keckhardt@hunton.com
- 9 Andy J Epstein on behalf of Interested Party Courtesy NEF
taxcpaesq@gmail.com
- 10 Christine R Etheridge on behalf of Creditor Fka GE Capital Wells Fargo Vendor Financial Services, LLC
11 christine.etheridge@ikonfin.com
- 12 M Douglas Flahaut on behalf of Creditor Medline Industries, Inc.
flahaut.douglas@arentfox.com
- 13 Michael G Fletcher on behalf of Interested Party Courtesy NEF
14 mfletcher@frandzel.com, sking@frandzel.com
- 15 Joseph D Frank on behalf of Creditor Experian Health fka Passport Health Communications Inc
jfrank@fgllp.com, mmatlock@fgllp.com;csmith@fgllp.com;jkleinman@fgllp.com;csucic@fgllp.com
- 16 Joseph D Frank on behalf of Creditor Experian Health, Inc
jfrank@fgllp.com, mmatlock@fgllp.com;csmith@fgllp.com;jkleinman@fgllp.com;csucic@fgllp.com
- 17 William B Freeman on behalf of Creditor Health Net of California, Inc.
18 william.freeman@kattenlaw.com, nicole.jones@kattenlaw.com,eclax.docket@kattenlaw.com
- 19 Eric J Fromme on behalf of Creditor CHHP Holdings II, LLC
efromme@tocounsel.com, lchapman@tocounsel.com;sschuster@tocounsel.com
- 20 Eric J Fromme on behalf of Creditor CPH Hospital Management, LLC
21 efromme@tocounsel.com, lchapman@tocounsel.com;sschuster@tocounsel.com
- 22 Eric J Fromme on behalf of Creditor Eladh, L.P.
efromme@tocounsel.com, lchapman@tocounsel.com;sschuster@tocounsel.com
- 23 Eric J Fromme on behalf of Creditor Gardena Hospital L.P.
24 efromme@tocounsel.com, lchapman@tocounsel.com;sschuster@tocounsel.com
- 25 Jeffrey K Garfinkle on behalf of Creditor McKesson Corporation
jgarfinkle@buchalter.com, docket@buchalter.com;dcyrankowski@buchalter.com
- 26 Jeffrey K Garfinkle on behalf of Interested Party Courtesy NEF
jgarfinkle@buchalter.com, docket@buchalter.com;dcyrankowski@buchalter.com
- 27
- 28 Lawrence B Gill on behalf of Interested Party Courtesy NEF
lgill@nelsonhardiman.com, rrange@nelsonhardiman.com

- 1 Paul R. Glassman on behalf of Creditor Long Beach Memorial Medical Center
pglassman@sycr.com
- 2 Eric D Goldberg on behalf of Creditor Otsuka Pharmaceutical Development & Commercialization, Inc.
3 eric.goldberg@dlapiper.com, eric-goldberg-1103@ecf.pacerpro.com
- 4 Mary H Haas on behalf of Creditor American National Red Cross
maryhaas@dwt.com, melissastobel@dwt.com;laxdocket@dwt.com;yunialubega@dwt.com
- 5 James A Hayes, Jr on behalf of Creditor Royal West Development, Inc.
6 jhayes@jamesahayesapl.com
- 7 Michael S Held on behalf of Creditor Medecision, Inc.
mheld@jw.com
- 8 Lawrence J Hilton on behalf of Creditor Cerner Corporation
lhilton@onellp.com,
9 lthomas@onellp.com;info@onellp.com;evescance@onellp.com;nlichtenberger@onellp.com;rgolder@onellp.com
- 10 Robert M Hirsh on behalf of Creditor Medline Industries, Inc.
11 Robert.Hirsh@arentfox.com
- 12 Florice Hoffman on behalf of Creditor National Union of Healthcare Workers
fhoffman@socal.rr.com, floricehoffman@gmail.com
- 13 Michael Hogue on behalf of Creditor Workday, Inc.
14 hoguem@gtlaw.com, fernandezc@gtlaw.com;SFOLitDock@gtlaw.com
- 15 Marsha A Houston on behalf of Creditor Healthcare Transformation Inc.
mhouston@reedsmith.com
- 16 Brian D Huben on behalf of Creditor Southeast Medical Center, LLC and Slauson Associates of Huntington
17 Park, LLC
hubenb@ballardspahr.com, carolod@ballardspahr.com
- 18 John Mark Jennings on behalf of Creditor GE HFS, LLC
19 johnmark.jennings@kutakrock.com
- 20 Monique D Jewett-Brewster on behalf of Creditor Paragon Mechanical, Inc.
mjb@hopkinscarley.com, eamaro@hopkinscarley.com
- 21 Gregory R Jones on behalf of Interested Party County of Santa Clara
22 gjones@mwe.com, rnhunter@mwe.com
- 23 Lance N Jurich on behalf of Creditor ALLY BANK
ljurich@loeb.com, karnote@loeb.com;ladoCKET@loeb.com
- 24 Steven J Kahn on behalf of Plaintiff ST. FRANCIS MEDICAL CENTER, a California nonprofit public benefit
corporation
25 skahn@pszyjw.com
- 26 Steven J Kahn on behalf of Plaintiff ST. VINCENT MEDICAL CENTER, a California nonprofit public benefit
corporation
27 skahn@pszyjw.com
- 28 Steven J Kahn on behalf of Plaintiff VERITY HEALTH SYSTEM OF CALIFORNIA, INC., a California

- 1 nonprofit public benefit corporation
skahn@pszyjw.com
- 2 Ivan L Kallick on behalf of Interested Party Ivan Kallick
ikallick@manatt.com, ihernandez@manatt.com
- 3
4 Jane Kim on behalf of Creditor County of San Mateo
jkim@kellerbenvenuti.com
- 5 Monica Y Kim on behalf of Health Care Ombudsman Jacob Nathan Rubin
myk@lnrb.com, myk@ecf.inforuptcy.com
- 6
7 Gary E Klausner on behalf of Interested Party Courtesy NEF
gek@lnbyb.com
- 8 Gary E Klausner on behalf of Interested Party Strategic Global Management, Inc.
gek@lnbyb.com
- 9
10 Joseph A Kohanski on behalf of Creditor United Nurses Associations of CA/Union of Health Care
Professionals
jkohanski@bushgottlieb.com, kprestegard@bushgottlieb.com
- 11 Jeffrey C Krause on behalf of Creditor Aetna Life Insurance Company
jkrause@gibsondunn.com, dtrujillo@gibsondunn.com; jstern@gibsondunn.com
- 12
13 Chris D. Kuhner on behalf of Creditor OCH Forest 1, General Partner of O'Connor Health Center 1, a limited
partnership
c.kuhner@kornfielddlaw.com
- 14
15 Darryl S Laddin on behalf of Creditor c/o Darryl S. Laddin Sysco Los Angeles, Inc.
bkrfilings@agg.com
- 16 Robert S Lampl on behalf of Creditor Surgical Information Systems, LLC
advocate45@aol.com, rlisarobinsonr@aol.com
- 17
18 Robert S Lampl on behalf of Creditor c/o Darryl S. Laddin Sysco Los Angeles, Inc.
advocate45@aol.com, rlisarobinsonr@aol.com
- 19 Richard A Lapping on behalf of Creditor Retirement Plan for Hospital Employees
richard@lappinglegal.com
- 20
21 Paul J Laurin on behalf of Creditor Roche Diagnostics Corporation
plaurin@btlaw.com, slmoore@btlaw.com; jboustani@btlaw.com
- 22 David E Lemke on behalf of Creditor ALLY BANK
david.lemke@wallerlaw.com,
23 chris.cronk@wallerlaw.com; Melissa.jones@wallerlaw.com; cathy.thomas@wallerlaw.com
- 24 Elan S Levey on behalf of Creditor Centers for Medicare and Medicaid Services
elan.levey@usdoj.gov, louisa.lin@usdoj.gov
- 25 Elan S Levey on behalf of Creditor Federal Communications Commission
elan.levey@usdoj.gov, louisa.lin@usdoj.gov
- 26
27 Elan S Levey on behalf of Creditor Pension Benefit Guaranty Corporation
elan.levey@usdoj.gov, louisa.lin@usdoj.gov
- 28 Elan S Levey on behalf of Creditor United States Department of Health and Human Services

- 1 elan.levey@usdoj.gov, louisa.lin@usdoj.gov
- 2 Elan S Levey on behalf of Creditor United States of America, on behalf of the Federal Communications
3 Commission
4 elan.levey@usdoj.gov, louisa.lin@usdoj.gov
- 5 Tracy L Mainguy on behalf of Creditor Stationary Engineers Local 39
6 bankruptcycourtnotices@unioncounsel.net, tmainguy@unioncounsel.net
- 7 Tracy L Mainguy on behalf of Creditor Stationary Engineers Local 39 Health and Welfare Trust Fund
8 bankruptcycourtnotices@unioncounsel.net, tmainguy@unioncounsel.net
- 9 Tracy L Mainguy on behalf of Creditor Stationary Engineers Local 39 Pension Trust Fund
10 bankruptcycourtnotices@unioncounsel.net, tmainguy@unioncounsel.net
- 11 Samuel R Maizel on behalf of Debtor De Paul Ventures - San Jose Dialysis, LLC
12 samuel.maizel@dentons.com,
13 alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
14 ard@dentons.com;joan.mack@dentons.com
- 15 Samuel R Maizel on behalf of Debtor De Paul Ventures, LLC
16 samuel.maizel@dentons.com,
17 alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
18 ard@dentons.com;joan.mack@dentons.com
- 19 Samuel R Maizel on behalf of Debtor O'Connor Hospital Foundation
20 samuel.maizel@dentons.com,
21 alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
22 ard@dentons.com;joan.mack@dentons.com
- 23 Samuel R Maizel on behalf of Debtor St. Francis Medical Center of Lynwood Foundation
24 samuel.maizel@dentons.com,
25 alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
26 ard@dentons.com;joan.mack@dentons.com
- 27 Samuel R Maizel on behalf of Debtor St. Vincent Foundation
28 samuel.maizel@dentons.com,
alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
ard@dentons.com;joan.mack@dentons.com
- Samuel R Maizel on behalf of Debtor Verity Business Services
samuel.maizel@dentons.com,
alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
ard@dentons.com;joan.mack@dentons.com
- Samuel R Maizel on behalf of Debtor Verity Health System of California, Inc.
samuel.maizel@dentons.com,
alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
ard@dentons.com;joan.mack@dentons.com
- Samuel R Maizel on behalf of Debtor Verity Holdings, LLC
samuel.maizel@dentons.com,
alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how
ard@dentons.com;joan.mack@dentons.com
- Samuel R Maizel on behalf of Debtor Verity Medical Foundation
samuel.maizel@dentons.com,
alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.how

1 ard@dentons.com;joan.mack@dentons.com

2 Samuel R Maizel on behalf of Plaintiff Verity Health System of California, Inc.
3 samuel.maizel@dentons.com,
alicia.aguilar@dentons.com;docket.general.lit.LOS@dentons.com;tania.moyron@dentons.com;kathryn.howard@dentons.com;joan.mack@dentons.com

4 Alvin Mar on behalf of U.S. Trustee United States Trustee (LA)
alvin.mar@usdoj.gov

5 Craig G Margulies on behalf of Creditor Hooper Healthcare Consulting LLC
6 Craig@MarguliesFaithlaw.com,
Victoria@MarguliesFaithlaw.com;David@MarguliesFaithLaw.com;Helen@MarguliesFaithlaw.com

7 Craig G Margulies on behalf of Interested Party Courtesy NEF
8 Craig@MarguliesFaithlaw.com,
Victoria@MarguliesFaithlaw.com;David@MarguliesFaithLaw.com;Helen@MarguliesFaithlaw.com

9 Hutchison B Meltzer on behalf of Interested Party Attorney General For The State Of Ca
10 hutchison.meltzer@doj.ca.gov, Alicia.Berry@doj.ca.gov

11 Christopher Minier on behalf of Creditor Belfor USA Group, Inc.
becky@ringstadlaw.com, arlene@ringstadlaw.com

12 John A Moe, II on behalf of Debtor O'Connor Hospital
13 john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

14 John A Moe, II on behalf of Debtor O'Connor Hospital Foundation
john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

15 John A Moe, II on behalf of Debtor Seton Medical Center
john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

16 John A Moe, II on behalf of Debtor St. Francis Medical Center
17 john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

18 John A Moe, II on behalf of Debtor St. Francis Medical Center of Lynwood Foundation
john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

19 John A Moe, II on behalf of Debtor St. Louise Regional Hospital
20 john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

21 John A Moe, II on behalf of Debtor St. Vincent Dialysis Center, Inc.
john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

22 John A Moe, II on behalf of Debtor St. Vincent Foundation
23 john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

24 John A Moe, II on behalf of Debtor Verity Health System of California, Inc.
john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

25 John A Moe, II on behalf of Debtor Verity Medical Foundation
26 john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

27 John A Moe, II on behalf of Defendant St. Francis Medical Center
john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com

28 John A Moe, II on behalf of Defendant Verity Health System of California Inc

1 john.moe@dentons.com, glenda.spratt@dentons.com,derry.kalve@dentons.com,andy.jinnah@dentons.com
2 Monserrat Morales on behalf of Interested Party Courtesy NEF
3 mmorales@marguliesfaithlaw.com,
4 Victoria@marguliesfaithlaw.com;David@MarguliesFaithLaw.com;Helen@marguliesfaithlaw.com
5 Kevin H Morse on behalf of Creditor Shared Imaging, LLC
6 kevin.morse@saul.com, rmarcus@AttorneyMM.com;sean.williams@saul.com
7 Kevin H Morse on behalf of Interested Party Courtesy NEF
8 kevin.morse@saul.com, rmarcus@AttorneyMM.com;sean.williams@saul.com
9 Marianne S Mortimer on behalf of Creditor Premier, Inc.
10 mmortimer@sycr.com, jrothstein@sycr.com
11 Tania M Moyron on behalf of Debtor De Paul Ventures - San Jose Dialysis, LLC
12 tania.moyron@dentons.com, chris.omeara@dentons.com
13 Tania M Moyron on behalf of Debtor De Paul Ventures, LLC
14 tania.moyron@dentons.com, chris.omeara@dentons.com
15 Tania M Moyron on behalf of Debtor O'Connor Hospital
16 tania.moyron@dentons.com, chris.omeara@dentons.com
17 Tania M Moyron on behalf of Debtor O'Connor Hospital Foundation
18 tania.moyron@dentons.com, chris.omeara@dentons.com
19 Tania M Moyron on behalf of Debtor Saint Louise Regional Hospital Foundation
20 tania.moyron@dentons.com, chris.omeara@dentons.com
21 Tania M Moyron on behalf of Debtor Seton Medical Center
22 tania.moyron@dentons.com, chris.omeara@dentons.com
23 Tania M Moyron on behalf of Debtor Seton Medical Center Foundation
24 tania.moyron@dentons.com, chris.omeara@dentons.com
25 Tania M Moyron on behalf of Debtor St. Francis Medical Center
26 tania.moyron@dentons.com, chris.omeara@dentons.com
27 Tania M Moyron on behalf of Debtor St. Francis Medical Center of Lynwood Foundation
28 tania.moyron@dentons.com, chris.omeara@dentons.com
Tania M Moyron on behalf of Debtor St. Louise Regional Hospital
tania.moyron@dentons.com, chris.omeara@dentons.com
Tania M Moyron on behalf of Debtor St. Vincent Dialysis Center, Inc.
tania.moyron@dentons.com, chris.omeara@dentons.com
Tania M Moyron on behalf of Debtor St. Vincent Foundation
tania.moyron@dentons.com, chris.omeara@dentons.com
Tania M Moyron on behalf of Debtor St. Vincent Medical Center
tania.moyron@dentons.com, chris.omeara@dentons.com
Tania M Moyron on behalf of Debtor Verity Business Services
tania.moyron@dentons.com, chris.omeara@dentons.com
Tania M Moyron on behalf of Debtor Verity Health System of California, Inc.

- 1 tania.moyron@dentons.com, chris.omeara@dentons.com
- 2 Tania M Moyron on behalf of Debtor Verity Holdings, LLC
tania.moyron@dentons.com, chris.omeara@dentons.com
- 3 Tania M Moyron on behalf of Debtor Verity Medical Foundation
tania.moyron@dentons.com, chris.omeara@dentons.com
- 4 Tania M Moyron on behalf of Defendant St. Francis Medical Center
5 tania.moyron@dentons.com, chris.omeara@dentons.com
- 6 Tania M Moyron on behalf of Defendant Verity Health System of California Inc
tania.moyron@dentons.com, chris.omeara@dentons.com
- 7 Tania M Moyron on behalf of Plaintiff Verity Health System of California, Inc.
8 tania.moyron@dentons.com, chris.omeara@dentons.com
- 9 Alan I Nahmias on behalf of Creditor Experian Health, Inc
anahmias@mbnlawyers.com, jdale@mbnlawyers.com
- 10 Alan I Nahmias on behalf of Interested Party Courtesy NEF
11 anahmias@mbnlawyers.com, jdale@mbnlawyers.com
- 12 Alan I Nahmias on behalf of Interested Party Alan I Nahmias
anahmias@mbnlawyers.com, jdale@mbnlawyers.com
- 13 Jennifer L Nassiri on behalf of Creditor Old Republic Insurance Company, et al
14 jennifernassiri@quinnemanuel.com
- 15 Charles E Nelson on behalf of Interested Party Wells Fargo Bank, National Association, as indenture trustee
nelsonc@ballardspahr.com, wassweilerw@ballardspahr.com
- 16 Sheila Gropper Nelson on behalf of Creditor Golden GatePerfusion Inc
shedoesbklaw@aol.com
- 17 Mark A Neubauer on behalf of Creditor Angeles IPA A Medical Corporation
18 mneubauer@carltonfields.com,
mlrodriguez@carltonfields.com;smcloughlin@carltonfields.com;schau@carltonfields.com;NDunn@carltonfiel
19 ds.com;ecfla@carltonfields.com
- 20 Mark A Neubauer on behalf of Creditor St. Vincent IPA Medical Corporation
mneubauer@carltonfields.com,
21 mlrodriguez@carltonfields.com;smcloughlin@carltonfields.com;schau@carltonfields.com;NDunn@carltonfiel
ds.com;ecfla@carltonfields.com
- 22 Mark A Neubauer on behalf of Interested Party Courtesy NEF
mneubauer@carltonfields.com,
23 mlrodriguez@carltonfields.com;smcloughlin@carltonfields.com;schau@carltonfields.com;NDunn@carltonfiel
ds.com;ecfla@carltonfields.com
- 24
- 25 Nancy Newman on behalf of Creditor SmithGroup, Inc.
nnewman@hansonbridgett.com, ajackson@hansonbridgett.com;calendarclerk@hansonbridgett.com
- 26 Bryan L Ngo on behalf of Interested Party All Care Medical Group, Inc
bngo@fortislaw.com,
27 BNgo@bluecapitallaw.com;SPicariello@fortislaw.com;JNguyen@fortislaw.com;JNguyen@bluecapitallaw.co
m
- 28

1 Bryan L Ngo on behalf of Interested Party All Care Medical Group, Inc.
bngo@fortislaw.com,
2 BNgo@bluecapitallaw.com;SPicariello@fortislaw.com;JNguyen@fortislaw.com;JNguyen@bluecapitallaw.co
m

3 Melissa T Ngo on behalf of Creditor Pension Benefit Guaranty Corporation
ngo.melissa@pbgc.gov, efile@pbgc.gov

4 Abigail V O'Brient on behalf of Creditor UMB Bank, N.A., as master indenture trustee and Wells Fargo Bank,
5 National Association, as indenture trustee
avobrient@mintz.com,
6 docketing@mintz.com;DEHashimoto@mintz.com;nleali@mintz.com;ABLevin@mintz.com

7 Abigail V O'Brient on behalf of Interested Party Courtesy NEF
avobrient@mintz.com,
8 docketing@mintz.com;DEHashimoto@mintz.com;nleali@mintz.com;ABLevin@mintz.com

9 John R OKeefe, Jr on behalf of Creditor The Huntington National Bank
jokeefe@metzlewis.com, slohr@metzlewis.com

10 Paul J Pascuzzi on behalf of Creditor Toyon Associates, Inc.
ppascuzzi@ffwplaw.com, lnlasley@ffwplaw.com

11 Lisa M Peters on behalf of Creditor GE HFS, LLC
12 lisa.peters@kutakrock.com, marybeth.brukner@kutakrock.com

13 Christopher J Petersen on behalf of Creditor Infor (US), Inc.
14 cjpetersen@blankrome.com, gsolis@blankrome.com

15 Mark D Plevin on behalf of Interested Party Courtesy NEF
mplevin@crowell.com, cromoc@crowell.com

16 David M Poitras on behalf of Interested Party Courtesy NEF
17 dpoitras@wedgewood-inc.com, dpoitras@jmbm.com;dmarcus@wedgewood-
inc.com;aguisinger@wedgewood-inc.com

18 Steven G. Polard on behalf of Creditor Schwalb Consulting, Inc.
spolard@ch-law.com, cborrayo@ch-law.com

19 David M Powlen on behalf of Creditor Roche Diagnostics Corporation
20 david.powlen@btlaw.com, pgroff@btlaw.com

21 Christopher E Prince on behalf of Creditor Kaiser Foundation Hospitals
cprince@lesnickprince.com,
22 jmack@lesnickprince.com;mlampton@lesnickprince.com;cprince@ecf.courtdrive.com

23 Lori L Purkey on behalf of Creditor Stryker Corporation
bareham@purkeyandassociates.com

24 William M Rathbone on behalf of Interested Party Cigna Healthcare of California, Inc., and Llife Insurance
Company of North America
25 wrathbone@grsm.com, jmydlandevans@grsm.com

26 Jason M Reed on behalf of Interested Party Courtesy NEF
Jason.Reed@Maslon.com

27 Michael B Reynolds on behalf of Creditor California Physicians' Service dba Blue Shield of California
28 mreynolds@swlaw.com, kcollins@swlaw.com

- 1 Michael B Reynolds on behalf of Creditor Care 1st Health Plan
mreynolds@swlaw.com, kcollins@swlaw.com
- 2
- 3 Michael B Reynolds on behalf of Interested Party Courtesy NEF
mreynolds@swlaw.com, kcollins@swlaw.com
- 4 J. Alexandra Rhim on behalf of Creditor University of Southern California
arhim@hrhlaw.com
- 5
- 6 Emily P Rich on behalf of Creditor SEIU United Healthcare Workers - West
erich@unioncounsel.net, bankruptcycourtnotices@unioncounsel.net
- 7 Emily P Rich on behalf of Creditor Stationary Engineers Local 39
erich@unioncounsel.net, bankruptcycourtnotices@unioncounsel.net
- 8
- 9 Emily P Rich on behalf of Creditor Stationary Engineers Local 39 Health and Welfare Trust Fund
erich@unioncounsel.net, bankruptcycourtnotices@unioncounsel.net
- 10 Emily P Rich on behalf of Creditor Stationary Engineers Local 39 Pension Trust Fund
erich@unioncounsel.net, bankruptcycourtnotices@unioncounsel.net
- 11 Lesley A Riis on behalf of Creditor Lesley c/o Riis
lriis@dpmclaw.com
- 12
- 13 Debra Riley on behalf of Creditor California Statewide Communities Development Authority
driley@allenmatkins.com
- 14 Christopher O Rivas on behalf of Creditor Healthcare Transformation Inc.
crivas@reedsmith.com, chris-rivas-8658@ecf.pacerpro.com
- 15
- 16 Julie H Rome-Banks on behalf of Creditor Bay Area Surgical Management, LLC
julie@bindermalter.com
- 17 Mary H Rose on behalf of Interested Party Courtesy NEF
mrose@buchalter.com, salarcon@buchalter.com
- 18
- 19 Megan A Rowe on behalf of Interested Party Courtesy NEF
mrowe@dsrhealthlaw.com, lwestoby@dsrhealthlaw.com
- 20 Nathan A Schultz on behalf of Creditor Swinerton Builders
nschultz@foxrothschild.com
- 21 William Schumacher on behalf of Creditor Verity MOB Financing II LLC
wschumacher@jonesday.com
- 22
- 23 William Schumacher on behalf of Creditor Verity MOB Financing LLC
wschumacher@jonesday.com
- 24 Mark A Serlin on behalf of Creditor RightSourcing, Inc.
ms@swllplaw.com, mor@swllplaw.com
- 25
- 26 Seth B Shapiro on behalf of Creditor United States Department of Health and Human Services
seth.shapiro@usdoj.gov
- 27 Joseph Shickich on behalf of Interested Party Microsoft Corporation
jshickich@riddellwilliams.com
- 28

1 Rosa A Shirley on behalf of Interested Party Courtesy NEF
rshirley@nelsonhardiman.com,
2 ksherry@nelsonhardiman.com;lgill@nelsonhardiman.com;jwilson@nelsonhardiman.com;rrange@nelsonhar
diman.com

3 Rosa A Shirley on behalf of Special Counsel Nelson Hardiman LLP
rshirley@nelsonhardiman.com,
4 ksherry@nelsonhardiman.com;lgill@nelsonhardiman.com;jwilson@nelsonhardiman.com;rrange@nelsonhar
diman.com

5 Kyrsten Skogstad on behalf of Creditor California Nurses Association
6 kskogstad@calnurses.org, rcraven@calnurses.org

7 Michael St James on behalf of Interested Party Medical Staff of Seton Medical Center
ecf@stjames-law.com

8 Andrew Still on behalf of Creditor California Physicians' Service dba Blue Shield of California
9 astill@swlaw.com, kcollins@swlaw.com

10 Andrew Still on behalf of Interested Party Courtesy NEF
astill@swlaw.com, kcollins@swlaw.com

11 Jason D Strabo on behalf of Creditor U.S. Bank National Association, not individually, but as Indenture
Trustee
12 jstrabo@mwe.com, ahoneycutt@mwe.com

13 Sabrina L Streusand on behalf of Creditor NTT DATA Services Holding Corporation
Streusand@slolp.com

14 Ralph J Swanson on behalf of Creditor O'Connor Building LLC
15 ralph.swanson@berliner.com, sabina.hall@berliner.com

16 Ralph J Swanson on behalf of Interested Party City of Gilroy
ralph.swanson@berliner.com, sabina.hall@berliner.com

17 Gary F Torrell on behalf of Interested Party Courtesy NEF
18 gft@vrmlaw.com

19 United States Trustee (LA)
ustpregion16.la.ecf@usdoj.gov

20 Matthew S Walker on behalf of Creditor Packard Children's Health Alliance
21 matthew.walker@pillsburylaw.com, candy.kleiner@pillsburylaw.com

22 Matthew S Walker on behalf of Creditor Stanford Blood Center, LLC
matthew.walker@pillsburylaw.com, candy.kleiner@pillsburylaw.com

23 Matthew S Walker on behalf of Creditor Stanford Health Care
24 matthew.walker@pillsburylaw.com, candy.kleiner@pillsburylaw.com

25 Matthew S Walker on behalf of Creditor Stanford Health Care Advantage
matthew.walker@pillsburylaw.com, candy.kleiner@pillsburylaw.com

26 Matthew S Walker on behalf of Creditor The Board of Trustees of the Leland Stanford Junior University
matthew.walker@pillsburylaw.com, candy.kleiner@pillsburylaw.com

27 Matthew S Walker on behalf of Creditor University Healthcare Alliance
28 matthew.walker@pillsburylaw.com, candy.kleiner@pillsburylaw.com

- 1 Matthew S Walker on behalf of Interested Party Matthew S Walker
matthew.walker@pillsburylaw.com, candy.kleiner@pillsburylaw.com
- 2
3 Jason Wallach on behalf of Interested Party Courtesy NEF
jwallach@ghplaw.com, g33404@notify.cincompass.com
- 4 Kenneth K Wang on behalf of Creditor California Department of Health Care Services
kenneth.wang@doj.ca.gov, Jennifer.Kim@doj.ca.gov; Stacy.McKellar@doj.ca.gov; yesenia.caro@doj.ca.gov
- 5
6 Phillip K Wang on behalf of Creditor Delta Dental of California
phillip.wang@rimonlaw.com, david.kline@rimonlaw.com
- 7 Gerrick Warrington on behalf of Interested Party Courtesy NEF
gwarrington@frandzel.com, sking@frandzel.com
- 8
9 Adam G Wentland on behalf of Creditor CHHP Holdings II, LLC
awentland@tocounsel.com, lkwon@tocounsel.com
- 10 Adam G Wentland on behalf of Creditor CPH Hospital Management, LLC
awentland@tocounsel.com, lkwon@tocounsel.com
- 11 Adam G Wentland on behalf of Creditor Eladh, L.P.
awentland@tocounsel.com, lkwon@tocounsel.com
- 12
13 Adam G Wentland on behalf of Creditor Gardena Hospital L.P.
awentland@tocounsel.com, lkwon@tocounsel.com
- 14 Latonia Williams on behalf of Creditor AppleCare Medical Group
lwilliams@goodwin.com, bankruptcy@goodwin.com
- 15
16 Latonia Williams on behalf of Creditor AppleCare Medical Group, Inc.
lwilliams@goodwin.com, bankruptcy@goodwin.com
- 17 Latonia Williams on behalf of Creditor AppleCare Medical Management, LLC
lwilliams@goodwin.com, bankruptcy@goodwin.com
- 18
19 Latonia Williams on behalf of Creditor St. Francis Inc.
lwilliams@goodwin.com, bankruptcy@goodwin.com
- 20 Michael S Winsten on behalf of Interested Party Courtesy NEF
mike@winsten.com
- 21 Jeffrey C Wisler on behalf of Interested Party Cigna Healthcare of California, Inc., and Life Insurance
Company of North America
22 jwisler@connollygallagher.com, dperkins@connollygallagher.com
- 23 Neal L Wolf on behalf of Creditor San Jose Medical Group, Inc.
nwolf@hansonbridgett.com, calendarclerk@hansonbridgett.com, lchappell@hansonbridgett.com
- 24
25 Neal L Wolf on behalf of Creditor Sports, Orthopedic and Rehabilitation Associates
nwolf@hansonbridgett.com, calendarclerk@hansonbridgett.com, lchappell@hansonbridgett.com
- 26 Neal L Wolf on behalf of Defendant LOCAL INITIATIVE HEALTH AUTHORITY FOR LOS ANGELES
COUNTY DBA L.A. CARE HEALTH PLAN, an independent local public agency
27 nwolf@hansonbridgett.com, calendarclerk@hansonbridgett.com, lchappell@hansonbridgett.com
- 28 Hatty K Yip on behalf of U.S. Trustee United States Trustee (LA)

1 hatty.yip@usdoj.gov

2 Andrew J Ziaja on behalf of Interested Party Engineers and Scientists of California Local 20, IFPTE
3 aziaja@leonardcarder.com,
4 sgroff@leonardcarder.com;msimons@leonardcarder.com;lbadar@leonardcarder.com

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Rose Zimmerman on behalf of Interested Party City of Daly City
rzimmerman@dalycity.org