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- 4. Plaintiffs bring this action to enjoin Defendants from enforcing Section 51527 of the California Code of Regulations until Defendants set Medi-Cal reimbursement rates for medical transportation services providers in compliance with federal law.
- 5. Because California's policy is that medical transportation services will be reimbursed "at the lesser of usual charges or the limits specified in the California code of Regulations," and because Section 51527 was not promulgated in compliance with federal law, or the State's certification that it would follow federal law when promulgating and enforcing rate regulations, Plaintiffs also seek a permanent injunction prohibiting Defendants from reimbursing Plaintiffs less than their "usual charges" for the services they provide to Defendants' Medi-Cal beneficiaries until Defendants comply with federal law and their own regulations.
- 6. Plaintiffs also seek declaratory and injunctive relief to enforce their property rights, procedural and substantive due process rights and their rights to equal protection guaranteed by the United States Constitution, and damages pursuant to 42 U.S.C. 1983 for these violations of Plaintiffs' Constitutional rights.

PARTIES

7. Plaintiff Sierra Medical Services Alliance ("SEMSA") is a 501c(3) non-profit organization. SEMSA is the exclusive provider of ambulance services for emergency (911) and non-emergency calls in Lassen County, California. SEMSA's

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27 28 franchise provider agreement was awarded through a competitive bid process in 2005 and its contract is effective through 2015, plus any additional earned extensions. SEMSA's service rates are set and regulated by the County of Lassen.

- Plaintiff Care Flight is a division of Regional Emergency Medical Services Authority, a 501c(3) non-profit organization affiliated with SEMSA. Care Flight provides emergency medical helicopter services in northern California and northern Nevada. Care Flight operates through provider agreements with regional emergency medical services agencies, including Sierra Sacramento Valley EMSA.
- 9. Plaintiff Riggs Ambulance Service, Inc., is the exclusive provider of ambulance services for emergency (911) and non-emergency calls in Merced County. Riggs Ambulance Service's franchise provider agreement was awarded through a competitive bid process in 2003 and its contract is effective through 2012. Riggs Ambulance Service rates are set and regulated through the County of Merced.
- 10. Plaintiff Schaefer Ambulance Service Inc. serves six of the most populous counties in southern California including Los Angeles, Orange, San Diego, San Bernardino, Riverside, and Imperial. Schaefer Ambulance has emergency (911) contracts in Los Angeles and Imperial Counties. Schaefer provides a significant amount of non-emergency medical transportation in Orange, San Diego, San Schaefer is engaged in a number of pilot Bernardino and Riverside counties. programs including critical care programs in Los Angeles County and neonatal infant transportation programs in Los Angeles, Riverside, and San Bernardino counties. Schaefer serves approximately 15 million people living in approximately 13,600 square miles of service area.
- Plaintiff C.H.L. EMS, Incorporated, dba American Ambulance of Visalia, provides emergency (911) and non-emergency medical transportation services in a shared exclusive operating area. C.H.L. operates pursuant to an agreement with the County of Tulare that runs from March 1, 2009 to June 30, 2014.

- 12. Plaintiff Desert Ambulance Service, Inc., is designated as an exclusive provider of emergency (911) and non-emergency medical transportation services pursuant to an agreement with San Bernardino County. Desert Ambulance's service area is designated as an exclusive non-competitive area pursuant to Health and Safety Code section 1797.224.
- 13. Plaintiff San Luis Ambulance Service, Inc., is the exclusive provider of ambulance services for emergency (911) and non-emergency calls in three of the four designated ambulance zones in San Luis Obispo County pursuant to a franchise provider agreement that is effective into 2013.
- 14. Plaintiff First Responder Emergency Medical Services-Sacramento, Inc. is a non-exclusive provider of ambulance services for emergency and non-emergency calls within the Sacramento, Placer and Yolo Counties.
- 15. Plaintiff First Responder Emergency Medical Services, Inc. operates as an exclusive provider of emergency (911) and non-emergency ambulance services in Butte County. Responder's service area is designated as an exclusive non-competitive area pursuant to Health and Safety Code section 1797.224.
- 16. Plaintiff Imperial Ambulance, Inc. provides emergency (911) and non-emergency ambulance services in Tulare County pursuant to a contract with Tulare County that is effective through June 30, 2014. Within Tulare County, Imperial Ambulance, Inc. responds primarily in the City of Porterville and the City of Lindsay. When called upon, Imperial provides service to all other city and rural areas within Tulare County.
- 17. Plaintiff Exeter District Ambulance operates as an exclusive provider of emergency (911) and non-emergency ambulance services in the north eastern region of Tulare County.
- 18. Plaintiff Sierra LifeStar, Inc., d.b.a. Lifestar Ambulance, operates as an exclusive provider of emergency (911) and non-emergency ambulance services in Tulare County.

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- 19. Plaintiff Del Norte Ambulance, Inc. operates as an exclusive provider of emergency (911) and non-emergency ambulance services in Del Norte County.
- 20. Plaintiff Napa Ambulance Service, Inc., dba Piner's Ambulance, operates as an exclusive provider of emergency (911) and non-emergency ambulance services in Tulare County. Napa's exclusive provider agreement was awarded through a competitive bid process in 2001 and it is effective through 2011.
- 21. Plaintiff American Legion Post 108 Ambulance Service ("ALA") is a 501c (19) non-profit corporation. ALA is the exclusive provider of ambulance services for emergency (911) and non-emergency calls in Amador County pursuant to a franchise provider agreement that is effective through 2013. ALA has been the sole ambulance provider in Amador County since 1929. ALA is also the exclusive provider of ambulance services for emergency (911) and non-emergency calls in Calaveras County pursuant to a franchise provider agreement that is effective through 2014.
- 22. Plaintiff Progressive Ambulance, Inc, dba Liberty Ambulance, is the exclusive provider for emergency (911) and non-emergency ambulance services in Kern County's Operational Area #7. Liberty's franchise provider agreement was awarded pursuant to Health and Safety Code section 1797.224 and is effective until 2019.
- 23. Plaintiff Hall Ambulance Service, Inc. is the exclusive provider for emergency (911) and non-emergency ambulance services in Kern County Ambulance Service Operational Areas 2, 4, 5, 8, 9 and 11. Operating Area(s) 2,4,5,8 & 9 were awarded pursuant to Health and Safety Code section 1797.224. Operational Area 11 was awarded to Hall in 1994 through a competitive bid process.
- 24. Plaintiff City Ambulance of Eureka, Inc provides emergency (911) and non-emergency ambulances in the County of Humboldt.
- 25. Plaintiff Patterson District Ambulance is the exclusive provider of ambulance services for emergency (911) and non-emergency calls within Zone #5 of

- Stanislaus County. The Patterson District Ambulance franchise provider agreement was established in 1992 by the County pursuant to California Health and Safety Code 1797.224 and remains in effect. A performance contract, required with the County, is effective through 2012.
- 26. Plaintiff K.W.P.H. Enterprises, d.b.a. American Ambulance, is the exclusive provider of ambulance services for emergency (911) and non-emergency calls in the Fresno County Exclusive Operating Area and the County of Kings. The provider agreements for these service areas were awarded through competitive bid processes.
- 27. Plaintiff Community Ambulance Services, Inc. dba CARE Ambulance is the exclusive provider of ambulance services for emergency (911) and non-emergency calls in Kern County Operating Area #6. CARE's franchise provider agreement was awarded pursuant to Health and Safety Code section 1797.224.
- 28. Plaintiff Sierra Ambulance Service, Inc., is a 501c(3) non-profit organization. Sierra Ambulance is the exclusive provider of ambulance services for emergency (911) and non-emergency calls in eastern Madera County. Sierra has been the exclusive 911 ambulance provider in eastern Madera County since 1965. It operates under a California Health and Safety Code 1797.224 exclusive agreement with the Central California EMS Agency.
- 29. Plaintiff Care Ambulance Service, Inc. is the exclusive 911 Emergency Ambulance provider for the Orange County, California cities of Anaheim, Buena Park, Costa Mesa, Cypress, Fountain Valley, Fullerton, Garden Grove, La Palma, Los Alamitos, Seal Beach, and Stanton, as well as Exclusive Operating Area number six (6) in Los Angeles County, California, which is comprised of the cities of Artesia, Bell, Bell Gardens, Bellflower, Cerritos, Commerce, Cudahy, Hawaiian Gardens, La Mirada, Lakewood, Huntington Park, Maywood, Montebello, Norwalk, Paramount, Pico Rivera, Santa Fe Springs, Signal Hill, Whittier, and the unincorporated areas of

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Florence-Graham and East Los Angeles. All franchise agreements were awarded thorough a competitive bid process.

- 30. Delano Ambulance Service, Inc. is the exclusive provider of ambulance services for all emergency (911) and non-emergency calls in Kern County for the Exclusive Operating Area #3. Delano has an ongoing franchise agreement with the County of Kern.
- 31. Plaintiff Kern Emergency Medical Transportation Corporation, dba Kern Ambulance, is the exclusive provider for emergency (911) and non-emergency ambulance services in Kern County's Operational Area #1. Kern Ambulance's provider agreement was awarded pursuant to California Health and Safety Code 1797,224 and the contract is effective until 2019.
- 32. Plaintiff Manteca District Volunteer Ambulance Service, dba Manteca District Ambulance Service, is a 501c(3) non-profit corporation and is the exclusive provider for emergency (911) and non-emergency ambulance services in the City of Manteca and surrounding areas including parts of Tuolumne County.
- 33. Defendant California Department of Health Care Services ("Department") is the designated single state agency charged with administering the Medicaid program in the State of California pursuant to Title XIX, 42 U.S.C. 1396 et seq., and California's State Plan Under Title XIX of the Social Security Act ("State Plan.")
- 34. Defendant David Maxwell-Jolly is the duly appointed Director of the Department of Health Care Services. Maxwell-Jolly and his predecessor Directors were acting under color of state authority at all times mentioned herein. Maxwell-Jolly is sued only in his official capacity as Director.

MEDICAID AND STATE COUNTERPARTS

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¹42 C.F.R. 447.201

- 35. Medicaid is a federal program that provides medical care to needy individuals by giving states funds to use to administer medical assistance programs. (42 U.S.C. 1396, et seq.)
- 36. Participation in the Medicaid program is voluntary. However, if a state chooses to participate, it is obligated to comply with all applicable federal statutes and regulations. Initially, a state must submit, and have approved, a state plan for Medicaid assistance that complies with the federal Medicaid statutes and the regulations adopted by the Secretary of the United States Department of Health and Human Services. One of the Department's divisions, The Centers for Medicare and Medicaid Services, is responsible for approving or rejecting a state's plan.
- A state plan specifies how a state will operate its medical assistance program in compliance with federal law and provides assurances that the state will administer its program "in conformity with the specific requirements of title XIX, the regulations in this Chapter IV, and other applicable official issuances of the Department [of Health and Human Services]." (42 C.F.R. 430.10.) To be approved, it must specify which groups of people are eligible, the types and ranges of services to be provided, the policy and methods to be used to establish payment rates for medical service providers such as Plaintiffs¹, and other components of the state's proposed program that are required by federal law.
- If a state plan is deemed to comply with federal law, and is approved, 38. The Centers for Medicare and Medicaid Services provide federal funds to the state for the operation of the state's program as described in its state plan.
- 39. California has chosen to participate in the Medicaid program. Medi-Cal is the State's Medicaid program that provides benefits to poor individuals who satisfy certain eligibility requirements. (California Welfare and Institutions Code, Section 14000, et seq.; California Code of Regulations, Title 22, Section 50000, et seq.)

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40. California's State Plan states that, "[a]s a condition for receipt of Federal funds under title XIX of the Social Security Act, the Department of Health Services (Single State Agency) submits the following State plan for the medical assistance program, and hereby agrees to administer the program in accordance with the provisions of this State plan, the requirements of titles XI and XIX of the Act, and all applicable Federal regulations and other official issuances of the Department." (California State Plan, Plan Submittal Statement, page 1.) California's State Plan was approved by The Centers for Medicare and Medicaid Services and California receives

CALIFORNIA'S GUARANTEE OF MEDICAL TRANSPORTATION SERVICES

- 42 U.S.C., Section 1396a, et seq., and 42 C.F.R., Part 430 et seq., set 41. forth the requirements a State Plan must satisfy in order to qualify for approval. Defendants certified that, "[t]he plan is in operation on a Statewide basis in accordance with all requirements of 42 CFR 431.50." (California State Plan, Section 1.3, page 8.)
- 42. Pursuant to federal requirements, a state plan must "[s]pecify that the Medicaid agency will ensure necessary transportation for recipients to and from providers" and "[d]escribe the methods that the agency will use to meet this requirement." (42 C.F.R. 431.53.)
- 43. In order to obtain approval of its State Plan and to obtain federal funds, California certified to the federal government that, "[u]nder California's Title XIX State Plan, transportation of eligible recipients to and from health care services is assured through a variety of methods . . . [including] the provision of medical transportation as a direct benefit of the Title XIX program . . . [consisting of] both emergency and nonemergency medical transportation." (California State Plan Under Title XIX, 3.1(c)(1) and Attachment 3.1-D.)

SETTING MEDI-CAL REIMBURSEMENT RATES FOR MEDICAL TRANSPORTATION SERVICES

44. For all services provided under Medi-Cal as a Title XIX program, pursuant to federal statute, Defendants must "provide such methods and procedures . . . to assure that payments [to providers of services under the program] are consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available under the plan at least to the extent that such care and services are available to the general population in the geographic area." (42 U.S.C. 1396a(a)(30)(A); 42 C.F.R. 447.204.) The Ninth Circuit has ruled that this "requires the Department to consider the costs of providing services [when setting reimbursement rates]." (Orthopedic Hosp. v. Belshe, 103 F.3d 1491, 1500 (9th Cir. 1997).)

45. A state plan must "describe the policy and the methods to be used in setting payment rates for each type of service included in the State's Medicaid program." (42 C.F.R. 447.201.) Medical transportation services are covered in Attachment 4.19-B, page 1, of the State Plan:

[t]he policy of the State Agency is that reimbursement for each of the other types of care or service listed in Section 1905(a)² of the Act that are included in the program under the plan will be at the lesser of usual charges or the limits specified in the California code of Regulations . . . [t]he methodology utilized by the State Agency in establishing payment rates will be as follows:

(a) The development of an evidentiary base or rate study resulting in the determination of a proposed rate.

² Section 1905(a) is the former designation of 42 U.S.C. 1396d

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- (b) To the extent required by State or Federal law or regulations, the presentation of the proposed rate at public hearing to gather public input to the rate determination process.
- (c) The determination of a payment rate based on an evidentiary base, including pertinent input from the public.
- (d) The establishment of the payment rate through the State Agency's adoption of regulations specifying such rate in the CCR...
- 46. Accordingly, medical transportation services must be reimbursed at "the lesser of usual charges," or at a statutory rate that is determined by the methodology described above and that is based upon the actual cost of providing the service.

PUBLIC INPUT AND REGULATION ADOPTION PROCEDURES IN <u>CALIFORNIA</u>

- 47. Pursuant to the Administrative Procedure Act, California Government Code, Sections 11346, et seq., the Legislature has established basic minimum procedural requirements for the adoption, amendment or repeal of administrative regulations.
- 48. Pursuant to Government Code, Section 11346.4, there must be a public comment period on all proposed regulations, with advance notice of at least 45 days of the close of that comment period. Section 11346.5 of the Code establishes the requirements for the notice of proposed regulations, which must include, inter alia, a statement of the time, place and nature of proceedings for the adoption, amendment or repeal of the regulation, reference to the authority under which the regulation is promulgated, and an informative digest containing a concise and clear summary of

existing laws and regulations related directly to the proposed action and the effect of the proposed action.

- 49. Pursuant to <u>Government Code</u>, Section 11349.3, the Office of Administrative Law ("OAL") must review all regulations after they have been subjected by the issuing agency to the notice and comment procedures, and make determinations using the following criteria: Necessity, authority, clarity, consistency, reference and non-duplication. The OAL may disapprove the regulations, in which case it shall return them to the adopting agency with a written statement of disapproval. If OAL approves the proposed regulations, then it shall forward them to the Secretary for filing.
- 50. California law requires that, "[i]n order to increase public participation and improve the quality of regulations, state agencies proposing to adopt regulations shall, prior to publication of the notice required by Section 11346.5, involve parties who would be subject to the proposed regulations in public discussions regarding those proposed regulations, when the proposed regulations involve complex proposals or a large number of proposals that cannot easily be reviewed during the comment period" (California Government Code, Section 279.)

IN VIOLATION OF FEDERAL LAW, DEFENDANTS HAVE SET PAYMENT RATES THAT ARE NOT CONSISTENT WITH THE QUALITY OF CARE REQUIRED BY CALIFORNIA LAW

- 51. Pursuant to federal statute, Defendants must "provide such methods and procedures . . . to assure that payments [to providers of services under the program] are consistent with . . . [the] quality of care [provided to beneficiaries]" (42 U.S.C. 1396a(a)(30)(A); 42 C.F.R. 447.204.)
- 52. In order to ensure an efficient and fully responsive emergency transportation system for all Californians, local jurisdictions, pursuant to California

law, allocate market rights to specific ambulance companies via competitive bid or assigned contract.³ (California <u>Health and Safety Code</u>, Section 1797.224.)

- 53. Every local jurisdiction in California requires that designated service providers respond to every emergency call that is received, regardless of whether the patient in need of care is covered by private insurance, Medi-Cal, any other benefit provider or no benefit provider.
- 54. Every county is required to follow California Emergency Medical Services Authority ("EMSA") guidelines in designating the required service levels for emergency medical transportation services. Local Emergency Medical Services Agencies (LEMSAs) submit plans evidencing their compliance with state EMSA guidelines to the State of California, which must approve the plan.
- 55. Each jurisdiction mandates specific service level requirements. These mandates include the requirement that the jurisdiction's service provider maintain an "advanced life support" state of readiness and level of care for all emergency transports. Consequently, every ambulance must have at least one paramedic, one emergency medical technician and must carry equipment designed to provide advanced life support to a patient.
- 56. Advanced life support is defined by California law as, ". . . special services designed to provide definitive prehospital emergency medical care, including, but not limited to, cardiopulmonary resuscitation, cardiac monitoring, cardiac defibrillation, advanced airway management, intravenous therapy, administration of specified drugs and other medicinal preparations, and other specified techniques and procedures administered by authorized personnel under the direct supervision of a base hospital as part of a local EMS system at the scene of an emergency, during transport to an acute care hospital, during interfacility transfer, and while in the emergency department of an acute care hospital until responsibility is assumed by the

³ Assignment is limited to statutorily proscribed circumstances when a provider has been providing uninterrupted service since at least January 1, 1981.

emergency or other medical staff of that hospital." (California <u>Health and Safety</u> <u>Code</u>, Section 1797.52.)

- 57. Advanced life support services are significantly more expensive to provide than basic life support services because they require more highly trained and certified personnel, a larger quantity of, and more sophisticated equipment, and a significantly higher level of supervision than basic life support service.
- 58. California Code of Regulations, Section 51527, which sets the Medi-Cal reimbursement rates for medical transportation services, provides payment for "BLS" or basic life support transports. Section 51527 does not allow reimbursement for advanced life support service, the result of which is an unfunded mandate by the Defendants that Plaintiffs provide advanced life support services at no cost to Defendants.
- 59. Because Plaintiffs must provide advanced life support care, despite that California law prohibits reimbursement for this level of care, Section 51527 is, on its face, in violation of 42 U.S.C. 1396, et seq. and 42 C.F.R. 447.204.

FIRST CLAIM FOR RELIEF

PERMANENT INJUNCTION

ARTICLE VI, CLAUSE 2, OF THE UNTIED STATES CONSTITUTION PRE-EMPTION BY THE MEDICAID ACT

- 60. Paragraphs 1 through 58 are incorporated by reference as if fully set forth herein.
- 61. Defendants' promulgation of Section 51527 of the California Code of Regulations violates the Supremacy Clause of the United States Constitution because it is inconsistent with federal law. Plaintiffs may sue for injunctive relief directly under the Supremacy Clause. Indep. Living Ctr. of S. Cal., Inc. v. Shewry, 543 F.3d 1050 (9th Cir. Cal. 2008).

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- Defendants have never developed an evidentiary base or rate study 62. concerning medical transportation services costs that resulted in the determination of a proposed rate, a violation of 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447.204.
- Defendants have never presented proposed rates regarding medical transportation services at a public hearing to gather public input about rate determination despite the complexity of the medical transportation services industry and the costs associated with operating such services in a wide range of geographic locations and under a wide range of conditions, in violation of 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447.204.
- Defendants have never made a determination of payment rates for medical transportation services based on an evidentiary base which included pertinent input from the public. Instead, Defendants unilaterally set payment rates for medical transportation services and codified those rates at Section 51527 of the California Code of Regulations, in violation of 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447,204,
- Defendants have never considered whether the payment rates for medical 65. transportation services at Section 51527 of the California Code of Regulations are consistent with efficiency, economy or quality of care, in violation of 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447.204.
- 66. Plaintiffs are currently suffering irreparable injury because they must, pursuant to California law, continue to transport Medi-Cal recipients at a significant financial loss. Plaintiffs are required to accept payment rates illegally established by Defendants and cannot pursue additional payments from Defendants' beneficiaries. Plaintiff's are being injured because Defendants have failed to, and refuse to comply with federal law, including 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447.204.
- 67. Plaintiffs' legal remedies are inadequate because until enforcement of Section 51527 of the California Code of Regulations is enjoined, and Defendants set reimbursement rates according to federal law, Plaintiffs will continue to suffer a

financial loss for every Medi-Cal patient they transport. Even if Plaintiffs could obtain a money judgment against Defendants, the current illegal reimbursement scheme would still be in effect thereafter, resulting in a continuing injury that would require a new lawsuit every time a Medi-Cal recipient is transported and one of the Plaintiffs is reimbursed at a rate that violates 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447.204.

SECOND CLAIM FOR RELIEF

TAKING PRIVATE PROPERTY FOR PUBLIC USE WITHOUT JUST COMPENSATION

FIFTH AMENDMENT TO THE UNITED STATES CONSTITUTION, 42 U.S.C. § 1983

- 68. Paragraphs 1 through 66 are incorporated by reference as if fully set forth herein.
 - 69. Plaintiffs do not base this claim for relief on 42 U.S.C. 1396a (a)(30)(A).
- 70. The Fifth Amendment to the United States Constitution prohibits the government from taking private property for public use without just compensation.
- 71. "Every person who, under color [of law] ... subjects, or causes to be subjected, any citizen of the United States . . . to the deprivation of any rights, privileges, or immunities secured by the Constitution and laws, shall be liable to the party injured in an action at law, suit in equity, or other proper proceeding for redress." 42 U.S.C. 1983. This statute furnishes a cause of action for the violation of federal rights created by the Constitution. <u>Chapman v. Houston Welfare Rights Org.</u>, 441 U.S. 600, 617, (1979).
- 72. California law requires Plaintiffs to respond to all emergency calls and provide emergency treatment and transportation to anyone who requests assistance. The requirement that Plaintiffs must serve any Medi-Cal participant who requests assistance, and Defendants' reimbursement at an amount that is on average, 80%

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27 28 below Plaintiff's actual cost of providing the service, amounts to an appropriation of Plaintiffs' business by Defendants. Defendants hold all bargaining power in regard to Plaintiffs' provision of services to Medi-Cal recipients and have used that power to consciously set ridiculously low reimbursement rates. Consequently, Plaintiffs are forced to provide services to Medi-Cal recipients and pay for those services in violation of their civil rights.

- Moreover, under federal and state law, Plaintiffs are limited to the Medi-73. Cal payment as payment-in-full and may not bill a patient for the amount of a shortfall when the patient being transported is a Medicaid patient. The Department's payment is the maximum amount Plaintiffs can recover for their services.
- 74. Plaintiffs do not receive just compensation from Defendants for transportation of Defendants' Medi-Cal beneficiaries. Because Medi-Cal rates for medical transportation are substantially below the actual cost of providing the transport service, and because Defendants know that Plaintiffs must provide service to their beneficiaries, Defendants are forcing Plaintiffs to provide their services to the State of California at a significant and ongoing loss. Consequently, Plaintiffs are being compelled to subsidize Medi-Cal with their private funds. This action on the part of the Defendants amounts to the taking of Plaintiffs' private property for public use without just compensation, in violation of Plaintiffs' civil rights.

THIRD CLAIM FOR RELIEF

VIOLATION OF PROCEDURAL DUE PROCESS FIFTH AMENDMENT TO THE UNITED STATES CONSTITUTION,

42 U.S.C. § 1983

- Paragraphs 1 through 73 are incorporated by reference as if fully set forth 75. herein.
 - 76. Plaintiffs do not base this claim for relief on 42 U.S.C. 1396a (a)(30)(A).

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- 77. The Fifth Amendment requires reasonable notice and opportunity to be heard before the government deprives a person of a property interest. Plaintiffs have a significant property interest in the money they spend and the resources they deplete transporting and treating Medi-Cal recipients. Defendants reimburse Plaintiffs only a small portion of the cost of providing these services to their beneficiaries and prohibit them from obtaining any additional reimbursement.
- The State Plan requires that notice and a hearing take place before 78. reimbursement rates are set forth under the California Code of Regulations. Attachment 4.19-B of the State Plan requires "presentation of proposed rates at public hearing to gather public input to the rate determination process" before rates are established through the enactment of regulations. (Attachment 4.19-B, pg. 1.)
- 79. California Government Code, Section 11346.4, requires that notice be given of proposed regulations "prior to the hearing and close of the public comment period on the adoption, amendment or repeal of a regulation" to various groups. One group which must be provided with this notice is "[a] representative number of small businesses . . . that are likely to be affected by the proposed action." (California Government Code, Section 11346.4(a)(3).)
- 80. The Code also provides that notice of proposed adoption, amendment or repeal of a regulation must be provided, and that it must include various items of information, including whether and to what extent the proposed regulation will have (California an adverse economic impact directly affecting statewide business. Government Code, Section 11346.5.)
- Defendants have failed to comply with either the State Plan or any of the 81. state or federal regulations requiring notice and a hearing for proposed regulations regarding Medi-Cal reimbursement rates for medical transportation services.
- Plaintiffs have not been provided with any form of notice or hearing 82. regarding the setting of reimbursement rates codified in California Code of Regulations, Section 51527.

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83. Without being provided with notice or a hearing, Plaintiffs have been denied their property interest in money and resources they are forced to expend transporting and treating Medi-Cal patients at a financial loss, a violation of Plaintiffs' civil rights.

FOURTH CLAIM FOR RELIEF

VIOLATION OF EQUAL PROTECTION

FOURTEENTH AMENDMENT TO THE U.S. CONSTITUTION,

42 U.S.C. § 1983

- 84. Paragraphs 1 through 82 are incorporated by reference as if fully set forth herein.
 - Plaintiffs do not base this claim for relief on 42 U.S.C. 1396a (a)(30)(A). 85.
- Under the State Plan, a wide range of medical services are provided to 86. Medi-Cal beneficiaries. Medical transportation is assured under the State Plan (State Plan, Section 3.1(c)(1) and Attachment 3.1-D) and the state plan must "[d]escribe the policy and the methods to be used in setting payment rates for each type of service included in the State's Medicaid program." (42 C.F.R. Section 447.201.)
- 87. The State Plan provides specific reimbursement methods to be used for medical transportation services (State Plan, Attachment 4.19-B), and for other types of services. For example, specific methodology for determining reimbursement rates is provided for durable medical equipment (Attachment 4.19-B, page 3a), Targeted Case Management Services (Attachment 4.19-B, page 5a), Federally Qualified Health Centers and Rural Health Clinics (Attachment 4.19-B, page 6), Drug Medical services (Attachment 4.19-B, page 38), and numerous other medical services (see Attachment 4.19-B).
- On information and belief, Plaintiffs allege that Defendants have 88. complied with federal laws when setting Medi-Cal reimbursement rates for providers other than medical transportation services providers.

- 89. There is no legitimate state end served by Defendants' compliance with the requirements of 42 C.F.R. 447.201 (requiring State plan to set forth policy and methods used in setting payment rates) for certain services and their refusal to comply with it for medical transportation services. Non-emergency service providers can negotiate payment rates with Defendants because they can choose not to participate in Defendants' program. Defendants are aware that because of the emergency nature of their work and the statutory provisions designed to assist all persons in need of emergency assistance, Plaintiffs cannot choose to decline participation.
- 90. Defendants' refusal to comply with federal or state law when setting reimbursement rates for medical transportation services providers does not rationally relate to any public purpose. The refusal is contrary to 42 U.S.C. 1396 et seq., which requires Defendants to provide medical transportation services to Medi-Cal recipients and to reimburse the providers of those services pursuant to a fair process that takes into consideration the actual cost of providing the services. Defendants' failure places all Californians at risk by weakening the medical transportation services industry as a whole by forcing Plaintiffs to subsidize Medi-Cal with their private funds which causes service providers to cut back on personnel, training, equipment and innovation to cut costs and avoid going out of business. Defendants' actions are reducing the overall quality of care that all Californians receive.
- 91. At a minimum, under the State Plan, reimbursement rates must be determined by following the four-step process set forth in Attachment 4.19-B to the State Plan. Defendants have failed to follow these steps in determining reimbursement rates for Plaintiffs. However, several types of medical services are afforded the required processes under the State Plan for determination of their reimbursement rates. The distinctions drawn in the Department's application of state and federal law bear no rational relationship to any legitimate state end.
- 92. Consequently, Plaintiffs are not afforded the same or similar protection under the law as other Medi-Cal service providers, in violation of their civil rights.

FIFTH CLAIM FOR RELIEF

VIOLATION OF SUBSTANTIVE DUE PROCESS

FOURTEENTH AMENDMENT TO THE U.S. CONSTITUTION,

42 U.S.C. § 1983

- 93. Paragraphs 1 through 91 are incorporated by reference as if fully set forth herein.
 - 94. Plaintiffs do not base this claim for relief on 42 U.S.C. 1396a (a)(30)(A).
- 95. Defendants' action of promulgating Section 51527 is arbitrary and capricious conduct that shocks the conscience because Defendants refuse to comply with promises they made in exchange for receiving federal money that was intended by the federal government to be paid to Plaintiffs for the services they rendered to Medi-Cal beneficiaries; because Defendants use unilateral bargaining power to force Plaintiffs to provide service to Medi-Cal; because Defendants, in violation of federal and state law, unilaterally set the rates at which Plaintiffs are reimbursed at a ridiculously low level; because despite the fact that Defendants themselves developed and submitted their rate setting procedures to the federal government to obtain approval of their State Plan, Defendants have never, and continue to refuse to follow their own procedures to establish fair reimbursement rates for the services provided by Plaintiffs.
- 96. Moreover, Defendants' conduct is arbitrary and capricious conduct that shocks the conscience because there is no relation whatever of Defendants' reimbursement rates to the costs incurred by Plaintiffs to provide the service, and in fact, Defendants reimburse Plaintiffs at a rate that is approximately 20% of the actual cost of providing the service to Defendants' beneficiaries. The issue is not one of lost profits, but rather it is cash out-of-pocket for each transport of Defendant's Medi-Cal beneficiaries that is being compelled by Defendants.

- 97. Additionally, Defendants' conduct is arbitrary and capricious conduct that shocks the conscience because Defendants are aware that Plaintiffs have no bargaining power, in that Plaintiffs cannot decline to participate in Plaintiff's Medi-Cal program because of the emergency nature of the work Plaintiffs perform. Defendants, as an organization of a government entity, use this unfair advantage to deprive Plaintiffs of their rights by forcing them to subsidize their public assistance program.
- 98. Plaintiffs' constitutionally protected property and due process rights have been, and continue to be adversely affected by Defendants' arbitrary, capricious and shocking conduct.
- 99. There is no legitimate public interest served by Defendants' refusal to follow the required procedures to determine reimbursement rates for medical transportation services, particularly in light of the fact that Defendants themselves initially developed the procedures as a way to provide a service to the public. Defendants' failure to comply with their own procedures and federal law harms all Californians because it weakens the entire medical transportation services industry by forcing providers to shift funds away from innovation and improvements to subsidize Defendants' program. Simply put, Defendants' failure reduces the overall quality of medical transportation services that all Californians receive.
- 100. Consequently, Plaintiffs have been denied their right to substantive due process.

PRAYER

Plaintiffs pray for:

- 1. An order:
 - A. Permanently enjoining Defendants and their employees, designees, agents, and all other persons or entities in active concert or privity or participation with them from enforcing Section 51527 of the

California <u>Code of Regulations</u> until Defendants set Medi-Cal reimbursement rates for medical transportation services providers in compliance with 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447.204 as specified in Attachment 4.19-B, page 1, of the State Plan; and

- B. Permanently enjoining Defendants and their employees, designees, agents, and all other persons or entities in active concert or privity or participation with them from reimbursing Plaintiffs less than their "usual charges" for the services they provide to Defendants' Medi-Cal beneficiaries until Defendants set Medi-Cal reimbursement rates for medical transportation services providers in compliance with 42 U.S.C. 1396a(a)(30)(A) and 42 C.F.R. 447.204 as specified in Attachment 4.19-B, page 1, of the State Plan;
- 2. Declaratory relief consistent with the injunction;
- 3. Damages pursuant to 42 U.S.C. § 1983 in an amount to be ascertained;
- 4. Attorney fees and costs pursuant to 42 U.S.C. § 1988;
- 5. Costs of suit and interest;
- 6. Any other relief the Court may deem proper and equitable.

Dated: June 3, 2010

HAWKINS PARNELL THACKSTON & YOUNG LLP

Edward R. Ulloa Kevin R. Warren

By:

Kevin R. Warren

Attorneys for Plaintiffs

DEMAND FOR JURY TRIAL Plaintiffs hereby demand a trial by jury. Dated: June 3, 2010 HAWKINS PARNELL THACKSTON & YOUNG LLP Edward R. Ulloa Kevin R. Warren By: Kevin R. Warren Attorneys for Plaintiffs COMPLAINT

10473422v.1

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA

NOTICE OF ASSIGNMENT TO UNITED STATES MAGISTRATE JUDGE FOR DISCOVERY

This case has been assigned to District Judge Ronald S. W. Lew and the assigned discovery Magistrate Judge is Charles Eick.

The case number on all documents filed with the Court should read as follows:

CV10- 4182 RSWL (Ex)

Pursuant to General Order 05-07 of the United States District Court for the Central District of California, the Magistrate Judge has been designated to hear discovery related motions.

All discovery related motions should be noticed on the calendar of	the Magistrate Judge
NOTICE TO COUNSEL	

Subsequent documents must be filed at the following location:

filed, a copy of this notice must be served on all plaintiffs).

[X]	Western Division 312 N. Spring St., Rm. G-8 Los Angeles, CA 90012	Southern Division 411 West Fourth St., Rm. 1-053 Santa Ana. CA 92701-4516	Eastern Division 3470 Twelfth St., Rm. 13 Riverside, CA 92501
	Los Angeles, CA 90012	Santa Ana, CA 92/01-4516	Riverside, CA 92501

A copy of this notice must be served with the summons and complaint on all defendants (if a removal action is

Failure to file at the proper location will result in your documents being returned to you.

Case 2:10-cv-04182-CAS -MAN Document 1	Filed 06/04/10 Page 27 of 33 Page ID #:27
Name & Address: Edward R. Ulloa (SBN 177909) Kevin R. Warren (SBN 242238)	
HAWKINS PARNELL THACKSTON & YOUNG LLP 444 S. Flower Street, Suite 1100 Los Angeles, CA 90071 (213) 486-8000 Fax (213) 486-8000	
UNITED STATES I CENTRAL DISTRIC	
Sierra Medical Services Alliances, et al.,	CASE NUMBER
	3n.
PLAINTIFF(S)	4SW)
. v.	CV10 4182
David Maxwell-Jolly, Director of the Department of	(LX)
Health Care Services, State of California, California Department of Health Care Services,	SUMMONS
•	
See Attachment DEFENDANT(S).	
TO: DEFENDANT(S): David Maxwell-Jolly, Director California, California Department of Health Care	or of the Department of Health Care Services, State of
A lawsuit has been filed against you.	
Within 21 days after service of this summon must serve on the plaintiff an answer to the attached ☑ counterclaim ☐ cross-claim or a motion under Rule 12 or motion must be served on the plaintiff's attorney, Edv 444 S. Flower Street, Suite 1100, Los Angeles, CA 9007 judgment by default will be entered against you for the results.	2 of the Federal Rules of Civil Procedure. The answer ward R. Ulloa, whose address is If you fail to do so,
your answer or motion with the court.	•
	Clerk, U.S. District Court
- 4 JUN 2000 j	By: Deputy Cfell
[Use 60 days if the defendant is the United States or a United States 60 days by Rule 12(a)(3)].	agency, or is an officer or employee of the United States. Allowed

SUMMONS

CV-01A (12/07)

10473422v.1

Cas	e 2:10-cv-04182-CAS -MAN Document 1 Filed 06/04/10 Page 29 of 33 Page ID #:29	
1 2 3 4 5 6 7 8	AMBULANCE SERVICE, Plaintiffs, vs. DAVID MAXWELL-JOLLY, Director of the Department of Health Care Services, State of California, CALIFORNIA DEPARMENT OF HEALTH CARE SERVICES, Defendants.	
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	COMPLAINT 10473422v.1	

UNITED STATES DISTRICT COURT, CENTRAL DISTRICT OF CALIFORNIA CIVIL COVER SHEET

I (a) PLAINTIFFS (Check box if you are representing yourself []) Sierra Medical Services Alliance, Care Flight, Riggs Ambulance Service, Inc. Schaefer Ambulance Service, Inc., American Ambulance of Visalia, Desert Ambulance Service, San Luis Ambulance Service, Inc.,				Service, Inc.,	DEFENDANTS David Maxwell-Jolly, Director of the Department of Health Care Services, State of California, California Department of Health Care Services						
Continued on Attachment A											
(b) Attorneys (Firm Name, Address and Telephone Number. If you are repyourself, provide same.)				representing	Attorneys	(If Known)					
Edward R. Ulloa (SBN 177909), Kevin R. Warren (SBN 242238) Hawkins Parnell Thackston & Young LLP 444 S. Flower Street, Suite 1100, Los Angeles, California 90071					•						
II. BASIS OF JURISDICTION (Place an X in one box only.)			III. CITIZENSHIP OF PRINCIPAL PARTIES - For Diversity Cases Only (Place an X in one box for plaintiff and one for defendant.)								
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IV. ORIGIN (Place an X in on	ie box oi	ıly.)									
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CV-71 (05/08)

UNITED STATES DISTRICT COURT, CENTRAL DISTRICT OF CALIFORNIA CIVIL COVER SHEET

VIII(a). IDENTICAL CASES: Ha: If yes, list case number(s):	s this action been p	reviously filed in this court ar	nd dismissed, remanded or closed? ☑No ☐ Yes			
VIII(b). RELATED CASES: Have If yes, list case number(s):	e any cases been pro	eviously filed in this court the	at are related to the present case? W No 🗆 Yes			
□ B. □ C.	Arise from the sam Call for determinat For other reasons w	e or closely related transaction ion of the same or substantial would entail substantial duplic	ons, happenings, or events; or all yellow and fact; or cation of labor if heard by different judges; or and one of the factors identified above in a, b or c also is present.			
IX. VENUE: (When completing the						
			if other than California; or Foreign Country, in which EACH named plaintiff resides. this box is checked, go to item (b).			
County in this District:*		· · ·	California County outside of this District; State, if other than California; or Foreign Country			
Los Angeles, Orange, San Berna	rdino, Riverside,	San Luis Obispo	See Attachment A			
			if other than California; or Foreign Country, in which EACH named defendant resides. If this box is checked, go to item (c).			
County in this District:*			California County outside of this District; State, if other than California; or Foreign Country			
Los Angeles			Sacramento			
(c) List the County in this District; Note: In land condemnation ca		•	f other than California; or Foreign Country, in which EACH claim arose.			
County in this District:*			California County outside of this District; State, if other than California, or Foreign Country			
Los Angeles, Orange, San Berna	rdino, Riverside,	San Luis Obispo	Lassen, Placer, Merced, Imperial, San Diego, Tulare, Yolo, Butte, Del Norte, Amador, Calaveras, Kern, Humboldt, Stanislaus, Fresno, Kings, Madera, San Joaquin, Tuolumne			
* Los Angeles, Orange, San Bernar Note: In land condemnation cases, us	dino, Riverside, V e the location of the	entura, Santa Barbara, or S e tract of land involved	San Luis Obispo Counties			
X. SIGNATURE OF ATTORNEY (OR PRO PER):			Date June 4, 2010			
Notice to Counsel/Parties: The or other papers as required by law	e CV-71 (JS-44) C v. This form, appro	ivil Cover Sheet and the infor ved by the Judicial Conferenc	mation contained herein neither replace nor supplement the filing and service of pleadings to of the United States in September 1974, is required pursuant to Local Rule 3-1 is not filed ting the civil docket sheet. (For more detailed instructions, see separate instructions sheet.)			
Key to Statistical codes relating to So	cial Security Cases	:	·			
Nature of Suit Code	Abbreviation	Substantive Statement of	f Cause of Action			
861	ніа	All claims for health insurance benefits (Medicare) under Title 18, Part A, of the Social Security Act, as amended. Also, include claims by hospitals, skilled nursing facilities, etc., for certification as providers of services under the program. (42 U.S.C. 1935FF(b))				
862	BL	All claims for "Black Lung" benefits under Title 4, Part B, of the Federal Coal Mine Health and Safety Act of 1969. (30 U.S.C. 923)				
863	DIWC	All claims filed by insured workers for disability insurance benefits under Title 2 of the Social Security Act, as amended; plus all claims filed for child's insurance benefits based on disability. (42 U.S.C. 405(g))				
863	DIWW	All claims filed for widows or widowers insurance benefits based on disability under Title 2 of the Social Security Act, as amended. (42 U.S.C. 405(g))				
864	SSID	All claims for supplementa Act, as amended	al security income payments based upon disability filed under Title 16 of the Social Security			
865	RSI	All claims for retirement (old age) and survivors benefits under Title 2 of the Social Security Act, as amended. (42 U.S.C. (g))				

CV-71 (05/08)

ATTACHMENT A

I(a) PLAINTIFFS, cont.

First Responder Emergency Medical Services-Sacramento, Inc.

First Responder Emergency Medical Services, Inc.

Imperial Ambulance Services, Inc.

Exeter District Ambulance

Sierra Lifestar, Inc., dba Lifestar Ambulance

Del Norte Ambulance, Inc.

Napa Ambulance Service, Inc., dba Piner's Ambulance, Inc.

American Legion Post 108 Ambulance Service

Progressive Ambulance, Inc., dba Liberty Ambulance

Hall Ambulance Service, Inc.

City Ambulance of Eureka, Inc.

Patterson District Ambulance

K.W.P.H. Enterprises, dba American Ambulance

Community Ambulance Services, Inc. dba Care Ambulance

Sierra Ambulance Service, Inc.

Care Ambulance Service, Inc.

Delano Ambulance Service, Inc.

Kern Emergency Medical Transportation Corporation,

dba Kern Ambulance

Manteca District Volunteer Ambulance Service.

dba Manteca District Ambulance Service

IX VENUE, cont.

PLAINTIFF

Sierra Medical Services Alliance

Care Flight

Riggs Ambulance Service, Inc.

Schaefer Ambulance Service, Inc.

American Ambulance of Visalia

Desert Ambulance Service

San Luis Ambulance Service, Inc.

First Responder Emergency Medical Services-Sacramento, Inc.

First Responder Emergency Medical Services, Inc.

Imperial Ambulance Services, Inc.

Exeter District Ambulance

Sierra Lifestar, Inc., dba Lifestar Ambulance

Del Norte Ambulance, Inc.

COUNTY

Lassen

Placer

Merced

Los Angeles, Orange,

San Bernardino, Riverside,

Imperial, San Diego

Tulare

San Bernardino

San Luis Obispo

Placer, Yolo

Butte

Tulare

Tulare

Tulare

Del Norte

Napa Ambulance Service, Inc., dba Piner's Ambulance, Inc.

American Legion Post 108 Ambulance Service

Progressive Ambulance, Inc., dba Liberty Ambulance

Hall Ambulance Service, Inc.

City Ambulance of Eureka, Inc.

Patterson District Ambulance

K.W.P.H. Enterprises, dba American Ambulance

Community Ambulance Services, Inc. dba Care Ambulance

Sierra Ambulance Service, Inc. Care Ambulance Service, Inc.

Delano Ambulance Service, Inc.

Kern Emergency Medical Transportation Corporation,

dba Kern Ambulance

Manteca District Volunteer Ambulance Service,

dba Manteca District Ambulance Service

Tulare

Amador, Calaveras

Kern

Kern

Humboldt

Stanislaus

Fresno, Kings

Kern

Madera

Orange, Los Angeles

Kern

Kern

San Joaquin, Tuolumne