

BEFORE THE  
PENNSYLVANIA PUBLIC UTILITY COMMISSION

Debbie Hughey

v.

Docket No. C – 2016 – 2567445

Philadelphia Gas Works

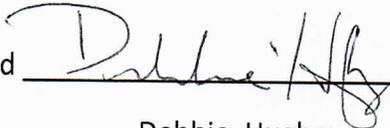
COMPLAINANT'S RESPONSES TO THE PHILADELPHIA GAS WORK'S REPLY TO COMPLAINANT'S  
PETITION FOR ADDITIONAL TIME TO FILE EXCEPTIONS

First, the Complainant did not receive a copy of the Respondent's (PGW) – "Philadelphia Gas Works' Reply to Complainant's Petition for Additional Time to file Exceptions" as Ms. Christlieb claimed that was mailed on January 19, 2018. The Complainant has went to the Post Office twice, and still received no mail from Ms. Christlieb nor PGW. If she truly mailed it, it would have went straight to the Complainant's Post Box 41842 in Philadelphia, PA 19101, and the Complainant is requesting E-Service again. Complainant discovered Ms. Christlieb's Reply, when she went online, and is responding to it today.

Secondly, in December, the PUC sent a copy of the alleged Judge Pell's Decision via Certified Mail. As the Complainant has stated that she did not have a full 20 Days; in which, to respond; even though she filed Partial Exceptions. The Claimant still needs more time to respond, not just because the lack of timely receipt of the alleged Judge's Decision, but also due to medical Issues that the Claimant did not wanted to disclose at that time, but Ms. Christlieb, the alleged Attorney, for PGW is now forcing the Complainant to disclose.

In addition, to what the Complainant has already disclosed, the Complainant has been dealing with Medical Issues that have also hindered her from timely Exceptions. Please review Appendences **A**, **C**, and **D** – Copies of the Denials for CT Scans of the Complainant's Chest to rule out a Blood Clots in her chest, heart, Lungs, and etc... as well as a copy of one of her Medical Office Visit with Dr. Koka. The Complainant is still fighting for the CT Scan Study, due to intentional acts of omission on the doctor's part as well as from the health insurance company. The Complainant continues to be lied to. Prior to that, with the Complainant's previous doctors, the Complainant's had requested over 11 times to have another medical script for the Ultrasound Doppler (to rule out a Blood Clot) in her left lower leg to be repeated, since Hahnemann Hospital **intentionally** did a study that they **did not** include the Complainant's left lower leg. Also, the Complainant has been dealing with the Worsening Conditions of Spinal Damages to her Spine. Please see Appendix **B** – copy of Office Visit with Dr. Beight.

**WHEREFORE**, the Complainant is asking that the Commission also take these medical issues/incidents into consideration, and approve her request to have additional time to file her FULL Exceptions. Thank you.

Signed  Date Feb. 19, 2018  
Debbie Hughey

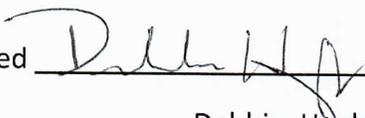
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VERIFICATION

I, Debbie Hughey, hereby declare that the facts set forth in the Foregoing Reply are true and correct to the best of my knowledge, information, and belief. This verification is made subject to the penalties of 18 Pa. C.S. 4904, concerning false statements to authorities.

Signed  Date 02/19/18  
Debbie Hughey

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CERTIFICATE OF SERVICE

I hereby certify that I have served a true copy of the foregoing document upon the PGW's alleged Attorney, Ms. Graciela Christlieb, via E-Service, in accordance with the requirements of the Commission.

Signed  Date 02/19/18  
Debbie Hughey



Appendix A

730 Cool Springs Boulevard, Suite 800, Franklin, TN 37067  
 Fax: 888-693-3210  
 Phone: 888-693-3211

**Case Request Results - Your Case has been Denied**

**Service Order:** ██████████ **Case Status:** Denied  
**Initiated Date:** 01/17/2018 **Decision Date:** 01/26/2018  
**Decision Type:**  
 Initial

**Patient Information**

**First Name:** DEBBIE **Last Name:** HUGHEY  
**Date of Birth:** ██████████ **Member ID:** ██████████  
**Address:** PO BOX 41842, PHILADELPHIA, PA, 19101  
**Insurer:** HEALTH PARTNERS PLANS **Program:** HPP-MEDICAID OVER 21

**Requested Facility**

**Name:** HAHNEMANN UNIVERSITY HOSPITAL **NPI:** 1023033792  
**Tax ID:** \*\*\*\*\*4869 **Taxonomy Code:** 282N00000X  
**Address:** 230 N BROAD ST, PHILADELPHIA, PA, 19102  
**Phone:** 215/762-7000 **Fax:** 215/762-6167  
**Equipment:** 3D Conformal, Brachytherapy, Cardiac Implantables, Comprehensive Joint, Comprehensive Musculoskeletal, Comprehensive Spine, CT Scan, CTA Scan, DX Left and Right Heart Catheterization, Facility Sleep Study, General Radiation Therapy, Home Sleep Study, IMRT, MRI Scan, Nuclear Medicine study, Neutron Beam Treatment Delivery, Pain Management, PET Study, PET/CT Scanner, Proton Beam Therapy

**Referring Physician**

**First Name:** ANISH **Last Name:** KOKA  
**NPI:** 1740236124 **Tax ID:** \*\*\*\*\*7893  
**Address:** 125 S 9TH ST STE 1005, PHILADELPHIA, PA, 191075123  
**Phone:** 215/543-7002 **Fax:** 215/987-5891  
**Specialty:** CARDIOVASCULAR DISEASE

**Requested Study**

Code	Units	Description	Status	Denial Rationale Description	Cpt Modifier
71270	1	CT CHEST; without and with contrast	Denied	There is insufficient clinical information available at this time to perform medical necessity review. Additional clinical information should be submitted by the requesting physician.	

ICD Code	Version	Description
R07.9	10	CHEST PAIN, UNSPECIFIED

If you have any questions, please contact MedSolutions Customer Service at 888-693-3211

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Appendix B

7500 CENTRAL AVENUE  
SUITE 108  
PHILADELPHIA, PA 19111  
(215) 745-4050

WILLIAM J. MARKMANN, M.D.  
WILLIAM C. HAMILTON, M.D.  
WALTER W. DEAROLF, III, M.D.  
JOHN L. BEIGHT, M.D.  
ELLEN C. MATTIN, M.D.  
EMILY ABRAMSON-CHEN, M.D.  
MICHAEL J. KIMBALL, MD  
LISA A. RODGERS, PA-C  
MARIA B. WULIN, PA-C

888 FOX CHASE ROAD  
1<sup>ST</sup> & 2<sup>ND</sup> FLOOR  
ROCKLEDGE, PA 19046  
(215) 379-OSRA (6772)

HUGHEY, Debbie #179689  
DOB: 09/17/1964

12/22/2017 - Office Note

A 48-year-old young female complains of severe neck and cervical radicular pain as well as back pain. I advised to have discectomy and fusion. Has pain in the cervical spine. Pain, numbness, and tingling in the extremities, both arms and legs. Had PT. Had Medrol Dosepak. Back uncomfortable. Pain radiating to the legs. Numbness and tingling as mentioned above. She has had therapy.

**PAST MEDICAL HISTORY:** Hypertension.

**PAST SURGICAL HISTORY:** Mole excision.

**CURRENT MEDICATIONS:** Bumex, Colace, Ultram, Prinivil, Flexeril, vitamins, Zantac, Motrin, and Prevacid.

**ALLERGIES:** None.

**SOCIAL HISTORY:** Single. Negative tobacco. Negative alcohol. Disabled.

**REVIEW OF SYSTEMS:** She has gained weight recently. Positive chest pain and pressure. Incontinence positive. Wears reading glasses. Shortness of breath positive. Sleep apnea positive. Trouble swallowing. Positive heartburn. No rashes or lumps. Headache, numbness and tingling as mentioned above.

Exam, slight pain with neck motion. Slight palpable pain. Symmetric upper extremity strength. Pain with muscle testing. Decreased DTRs. Mild back pain. No tension root signs. Weak lower extremities. Nonfocal.

**X-RAY:** None.

**MRI:** MRI of the cervical spine shows herniated disk approximately C4-C5. Some indentation of cord. Lumbar MRI, disc degeneration.

ORTHOPEDIC SURGERY & REHABILITATION ASSOCIATES, P.C.

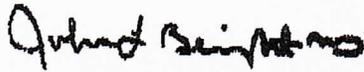
ORTHOPEDIC SURGERY JOINT REPLACEMENT ARTHROSCOPY FRACTURE CARE HAND SURGERY  
SPORTS MEDICINE ANKLE/FOOT SURGERY

HUGHEY, Debbie  
Page 2

**IMPRESSION:**

1. Cervical HNP radiculopathy.
2. DDD/DID/LSS.

I discussed the treatment options with the patient. Could refer her to Temple Neurosurgery. Also could try therapy again and repeat some of the nonoperative issues. The patient would proceed with PT. Mobic for decreasing inflammation. Possible epidural is symptoms are refractory to above.



John L. Beight, M.D.  
JLB:obs/ga/lm

**ELECTRONICALLY SIGNED, BUT NOT READ TO EXPEDITE MAILING**

Appendix C



**KOKA CARDIOLOGY**  
125 S. 9<sup>TH</sup> ST, SUITE 1005  
(THE SHERIDAN BUILDING)  
PHILADELPHIA, PA 19107  
P: 215-543-7002 F: 215-987-5891

**Patient:** Debbie Hughey  
**Provider:** Dr. Anish Koka

**DOB:** ~~09/17/1984~~  
**Visit:** 12/06/2017 2:10PM

**Sex:** F  
**Chart:** ~~HEDT-0000006~~

**History of Present Illness:**

Debbie Hughey is a 53 year old female presenting for cardiac evaluation. She complains of chest pain and back pain with dyspnea on exertion. She reports "something moving" in her chest. She ambulates with a cane or walker at all times.

**Review of Systems:**

**Constitutional:** no significant weight loss or weight gain, no fever, no chills.  
**Cardiac:** no chest pain, no palpitations.  
**Pulmonary:** no shortness of breath, no orthopnea, no exertional dyspnea, no paroxysmal nocturnal dyspnea.  
**GI:** no abdominal pain, no nausea, no vomiting.  
**GU:** no frequency, no urgency, no dysuria  
**Endocrine:** No tremors, no insomnia.  
**Skin:** no rashes, no sores  
All other systems are negative.

**Medical / Family/ Social History:**

**Medical History**

Hypertension, GERD

**Family History**

No premature CAD.

**Social History**

She ~~drinks alcohol socially~~. She denies prior drug use.

*DOES NOT DRINK ALCOHOL ANYMORE*

**Medications & Allergies:**

Current Medication & Dosage	SIG	PRN?	Indication
raNITidine 150 mg oral capsule	Daily	No	
bumetanide 1 mg oral tablet	BID	No	
lisinopril 40 mg oral tablet	Daily	No	

Allergy	Reaction
No Known Drug Allergies (NKDA)	N/A

**Objective:**

Pulse	Blood Pressure	Oxygen Saturation	Height
90 bpm	127/82 mmHg	98.00 %	67.00 inches

**KOKA CARDIOLOGY**

125 S. 9<sup>TH</sup> ST, SUITE 1005  
 (THE SHERIDAN BUILDING)  
 PHILADELPHIA, PA 19107  
 P: 215-543-7002 F: 215-987-5891

**Patient:** Debbie Hughey  
**Provider:** Dr. Anish Koka

**DOB:** ~~09/17/1964~~  
**Visit:** 12/06/2017 2:10PM

**Sex:** F  
**Chart:** ~~HUDE000006~~

Weight	BMI	Smoking Status
140 lbs	12.2 kg/m <sup>2</sup>	Never smoker

**Physical Exam:**

**General:** Well developed, well nourished, well groomed  
**Eyes:** Pink conjunctivae, no ptosis, anicteric sclerae  
**Ears, Nose, Mouth, and Throat:** Normal pinnae, no masses noted, moist mucosae  
**Neck:** No masses, no gross thyromegaly  
**Abdomen:** Soft, nontender, nondistended, no hepatosplenomegaly  
**Respiratory:** Normal respiratory effort, clear lung fields  
**Cardiovascular:** Non displaced apical impulse, normal S1, S2, no murmurs, rubs, or gallops  
**Carotids:** No carotid bruits, normal carotid pulsations, no JVD  
**Pulses:** 2+ radial pulses, 2+ dorsalis pedis pulses  
**Extremities:** No clubbing, cyanosis or edema  
**Skin:** Warm, dry, normal where visualized  
**Psychiatric:** Alert, oriented times three, normal affect

**Review of Data:**

**Electrocardiogram:** Normal sinus rhythm

**Assessment:**

Type	Code	Description
ICD-10-CM Condition	R07.2	Precordial pain
ICD-10-CM Condition	I10	Essential (primary) hypertension

**Plan:**

Type	Code	Modifiers	Quantity	Description
CPT	93000		1.00 UN	Electrocardiogram, complete
CPT	99254		1.00 UN	Inpatient consultation

**Plan:****Hypertension**

Her blood pressure is controlled on the current home medication regimen. I would continue current medication

**KOKA CARDIOLOGY**

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(THE SHERIDAN BUILDING)  
PHILADELPHIA, PA 19107  
P: 215-543-7002 F: 215-987-5891

**Patient:** Debbie Hughey  
**Provider:** Dr. Anish Koka

**DOB:** 09/17/1964  
**Visit:** 12/06/2017 2:10PM

**Sex:** F  
**Chart:** HUPE000000

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regimen perioperatively.

**Chest pain**

She is having sternal chest pain. Sometimes exertional, sometimes at rest. Associated chronic shortness of breath. She is overweight. No leg edema, report of prior left leg pain. TTE here with moderate concentric LVH. Will plan for CT chest to r/o PE. Stress test reasonable as well. She uses a walker, gait dysfunction due to weight, would need pharm stress..

**Follow Up:**

Thank you for allowing me to participate in the care of this patient. Please do not hesitate to contact me directly with any concerns.

Yours Sincerely,

Anish Koka MD

*Appendix D*



730 Cool Springs Boulevard, Suite 800, Franklin, TN 37067  
 Fax: 888-693-3210  
 Phone: 888-693-3211

**Case Request Results - Your Case has been Denied**

**Service Order:** ██████████ **Case Status:** Denied  
**Initiated Date:** 12/14/2017 **Decision Date:** 12/14/2017  
**Decision Type:**  
 Initial

**Patient Information**

**First Name:** DEBBIE **Last Name:** HUGHEY  
**Date of Birth:** ██████████ **Member ID:** ██████████  
**Address:** PO BOX 41842, PHILADELPHIA, PA, 19101  
**Insurer:** HEALTH PARTNERS PLANS **Program:** HPP-MEDICAID OVER 21

**Requested Facility**

**Name:** HOSPITAL OF THE UNIVERSITY OF PA (HUP) **NPI:** 1851370910  
**Tax ID:** \*\*\*\*\*2685 **Taxonomy Code:** 174400000X, 208000000X, 208200000X, 208600000X, 2086S0129X, 208C00000X, 208G00000X, 261QE0700X, 282N00000X  
**Address:** 3400 SPRUCE ST OFC, PHILADELPHIA, PA, 19104  
**Phone:** 215/662-4000 **Fax:** 215/349-8132  
**Equipment:** 3D Conformal, Brachytherapy, Cardiac Implantables, Comprehensive Joint, Comprehensive Musculoskeletal, Comprehensive Spine, CT Scan, DX Left and Right Heart Catheterization, Facility Sleep Study, General Radiation Therapy, IMRT, MRI Scan, Nuclear Medicine study, Neutron Beam Treatment Delivery, Pain Management, PET Study, Proton Beam Therapy, STRESS ECHO, SRS, Ultrasound

**Referring Physician**

**First Name:** ANISH **Last Name:** KOKA  
**NPI:** 1740236124 **Tax ID:** \*\*\*\*\*7893  
**Address:** 125 S 9TH ST STE 1005, PHILADELPHIA, PA, 191075123  
**Phone:** 215/543-7002 **Fax:** 215/987-5891  
**Specialty:** CARDIOVASCULAR DISEASE

**Requested Study**

Code	Units	Description	Status	Denial Rationale Description	Cpt Modifier
71260	1	CT CHEST; with contrast	Denied	Based on eviCore Chest Imaging Guidelines, we are unable to approve the requested procedure. Advanced imaging of the chest is supported for the evaluation of a suspected pulmonary embolism if there is an increased pre-test probability of a pulmonary embolism or if there is an abnormal D-dimer test. The clinical information provide does not meet these criteria and, therefore, the requested imaging is not indicated at this time.	

ICD Code	Version	Description
R07.9	10	CHEST PAIN, UNSPECIFIED

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