

EXHIBIT B

RICHARD BLUMENTHAL,
ATTORNEY GENERAL



55 Elm Street
P.O. Box 120
Hartford, CT 06144-0120

Office of The Attorney General
State of Connecticut

Phone: (860) 808-5169
Fax: (860) 808-5033

July 31, 2007

Via Certified Mail

Aetna, Inc.
151 Farmington Avenue
Hartford, CT 06156

RE: CID to Aetna, Inc. (Lyme Disease Guidelines)

Gentlemen:

Enclosed please find a civil investigative demand regarding the State's antitrust review of the process used to promulgate clinical practice guidelines for Lyme disease.

Should you have any questions or comments, please feel free to contact me at the above number.

Very truly yours,

A handwritten signature in black ink, appearing to read "Steven M. Rutstein".

Steven M. Rutstein
Assistant Attorney General

Enclosure

STATE OF CONNECTICUT
OFFICE OF THE ATTORNEY GENERAL

INTERROGATORIES AND SUBPOENA DUCES TECUM

TO: **Aetna, Inc.**
 151 Farmington Avenue
 Hartford, CT 06156

BY AUTHORITY OF THE STATE OF CONNECTICUT, and more particularly, pursuant to the Connecticut Antitrust Act, Chapter 624, Section 35-42 of the Connecticut General Statutes, you are hereby commanded and required to submit to the Attorney General of the State of Connecticut, or his designee, at his office, 55 Elm Street, Hartford, Connecticut 06106, on or before **August 20, 2007** the following documentary materials and written answers to interrogatories, UNDER OATH, because the Attorney General has reason to believe that a person has engaged in a contract, combination or conspiracy which is in restraint of trade or commerce and, more particularly, which is for the purpose, or has the effect of lessening competition in the provision of healthcare services for Lyme disease by refusing to deal or inducing third parties to refuse to deal with others in the sale of such services in violation of Sections 35-26 and 35-28(d) of the General Statutes of Connecticut, or has engaged in conduct which constitutes an abuse of monopoly power in violation of Section 35-27 of the General Statutes of Connecticut, and that you have information relevant thereto.

DEFINITIONS

AS USED HEREIN:

(A) "You," "your" or "company" means the addressee of this set of Interrogatories and Subpoena Duces Tecum, its domestic and foreign parents, predecessors, divisions, subsidiaries, affiliates, partnerships and joint ventures, and all directors, officers, employees, agents and all other persons or entities, acting on behalf of said addressee. The terms "subsidiary," "affiliate" and "joint venture" refer to any entity in which there is partial (25% or more) or total control between the company and any other person.

(B) "Agreement" means any written or oral understanding, promise or condition, or any document containing any such understanding, promise or condition, including any amendment or modification thereto.

(C) The terms "And" and "or" are terms of inclusion and not of exclusion and shall be construed either disjunctively or conjunctively as necessary to bring within the scope of this subpoena any document or information that might otherwise be construed to be outside its scope.

(D) The term "Any" means each and every and one or more.

(E) "Communicate" or "communication" means every manner or means of disclosure, transfer or exchange, and every disclosure, transfer or exchange of ideas or information, whether orally, by document, or electronically, or whether face-to-face, by telephone, mail, personal delivery, electronic transmission or otherwise.

(F) "Compensation" or "payment(s)" means any form of compensation, consideration, or remuneration of any kind, including, but not limited to, fees, payments,

expenses, bonuses, research or other grants, expert witness fees, consulting payments for medical guideline preparation or individual medical necessity and disability review, in kind contributions, or any other transfers of value. The terms compensations or payments excludes compensation paid for reimbursement for patient care.

(G) The term “Concerning”, “relate to” or “relating to” means in whole or in part constituting, evidencing, containing, discussing, commenting upon, describing, analyzing, identifying, stating, pertaining to, referring to, or forming the basis of.

(H) The term “Documentary material” or “document” shall mean all written or graphic matter, whether in final or draft form, however produced, or reproduced, of every kind and description in your actual or constructive possession, custody, care or control, including without limitation, all writings, account letters, account recommendations, appointment books, books, books of accounts, calendars, CD-ROMs, charts, computer or electronic files stored on file servers, e-mail servers, hard drives or other electronic media within your control, computer printouts, contracts, cost sheets, data compilations from which information can be obtained or can be translated through detection devices into reasonably usable form, diaries, drafts, drawings, e-mail, faxes, graphs, hotel charges, invoices, ledgers, magnetic discs, magnetic strips, magnetic tape, memoranda, microfiche, microfilm, minutes, notes, optical characters, papers, photographs, punched cards, punched paper tapes, receipts, recognition characters, reports, sound tapes or recordings, statements, statistical records, stenographer notebooks, studies, telegraphs, time sheets or logs, video tapes or recordings, vouchers, weigh tickets, working papers, or any other tangible thing.

(I) "Guideline" means an expression of authoritative guidance relative to setting standards or determining a course of action for Healthcare Service.

(J) "Healthcare service" means the provision of a service to diagnose, treat, cure, prevent, manage or mitigate illness or disease through the services offered by medical, nursing and allied health professionals.

(K) "Identify," "identity," or "identification," when used in reference to a natural person, means to state his or her full name and present or last-known address, present or last-known position and business affiliation and each position with you, social security numbers, and telephone numbers for residence and business; when used in reference to any other person means to state its full name, present or last-known address, and telephone number; when used in reference to a document means to state the type of document (i.e., letter, memoranda, chart, handwritten notes, calendar (electronic or paper), spreadsheet, sound reproduction, report, computer inputs or outputs, etc.), the location where maintained, your identifying marks and code, the subsidiary, division, or department where prepared and sent, the document date, the author and persons to whom copies were sent or persons initialing or reading or approving the document, and the name and address of each of the present custodians of the document; when used in reference to an event or instance means to identify each natural person involved in the event, to state when and where the event occurred, to state a description of the nature and substance of the event, and to identify any document related to the event; when used in reference to a communication means to state each communication, the persons involved in the communication, where the communication took place, and a brief description of

the substance of the communication, and to identify any document related to the communication.

(L) "IDSA" means the Infectious Diseases Society of America.

(M) The term "Person" includes any natural person, corporate entity, partnership, association, joint venture, government entity or trust, and any other business or legal entity.

(N) The Present tense shall be construed to include the past tense and the past tense shall be construed to include the present tense.

(O) All references to the singular include the plural and vice versa.

INSTRUCTIONS

The response to this Demand shall be submitted in the following manner:

1. Documents provided shall be complete and, unless privileged, unredacted, submitted as found in your files (*e.g.*, documents that in their original condition were stapled, clipped or otherwise fastened together or maintained in separate file folders shall be produced in such form). You may submit photocopies (with color photocopies where necessary to interpret the document), in lieu of original documents, provided that such copies are true, correct and complete copies of the original documents.

2. Number each box and mark each box with your identification and the name(s) of any other person(s) whose files are contained in that box. Documents shall be submitted in sturdy cartons not larger than 1.5 cubic feet. Cartons shall be filled completely.

3. Documents submitted shall be produced in the order in which they appear in your files and shall not be shuffled or otherwise rearranged. Mark each page with your identification and consecutive document control numbers. Place all documents produced in file folders. Mark each file folder with your identification, the name of any other person whose documents are in the folder and how the original file was labeled.

4. Documents should be produced as they are maintained in the normal course of business, and thus if documents are maintained in the original or "native" file format in which they were originally created, they should be produced in such electronic form (including any embedded data or metadata). Data must be produced in the data format in which it is typically used and maintained. Moreover, to the extent a responsive document has been electronically scanned (for any purpose), that document must be produced in a readable and accessible electronic format, with the opportunity provided to review the original document. Documents that have been electronically scanned should be produced in a .tif (TIFF image format) files, with an Opticon load file and a Concordance database with beginning and ending page, and numbers of pages noted. If a Concordance database is not attainable, a .csv (Comma Delimited Text) file with the same information is acceptable, with a caret (^) used to separate multi-value fields. If the OCR data is provided in individual text (.txt) files and there is no text for a text file, the following should be inserted in that text file; "Page intentionally left blank." If your documents are maintained electronically in an OCR (Optical Character Recognition) format, we ask that the OCR text be produced as well. Moreover, this subpoena requires all objective coding for the production, to the extent it exists.

5. For electronic mail, please provide all responsive emails and if applicable, email attachments and any related documents, in a Concordance database format with .tif images, an Opticon load file, and an OCR (Optical Character Recognition) file. If a Concordance database is unattainable, please provide the data in a .pst (Outlook personal folder) file.

6. Produce deposition, proceeding, and trial transcripts in minuscrit form, with a word index, and electronically on CD or DVD. The electronic version of the transcripts should be in Live notes PTF (Portable Transcript Format), PCF (Portable Case Format), or Plain Text format.

7. Your document retention policy should be suspended to prevent the destruction of any documents that may be relevant to the Attorney General's investigation as described in this subpoena.

8. Documents to be produced include all documents in your possession, custody or control, wherever located, including documents in the possession, custody or control of your employees, representatives or agents. Without limitation on the term "control," a document is deemed to be in your control if you have the right to secure that document or a copy thereof from another person.

9. No agreement by the Attorney General of the State of Connecticut purporting to modify, limit or otherwise vary this subpoena shall be valid or binding on the Attorney General of the State of Connecticut unless confirmed or acknowledged in writing by a duly authorized representative thereof.

CLAIMS OF PRIVILEGE

If you contend that any answer to any Interrogatory or any document demanded by this subpoena is privileged in whole or in part, file with your response to these Interrogatories and Subpoena Duces Tecum a statement in writing and under oath and in such statement: (1) identify each such interrogatory answer or document; (2) state its general subject matter; and (3) state in detail the basis for each claim of privilege made with respect to it. If a claim of privilege is made to only a part of a document, then in addition to the statement required herein, produce a copy of such document from which the alleged privileged portion has been redacted, noting where in the document such redactions have been made.

SCOPE

Except where otherwise indicated, this set of Interrogatories and Subpoena Duces Tecum covers the period from **August 1, 1998**, up to and including the date of service.

If subsequent to your initial compliance with this Subpoena duces tecum you discover additional or new material or information responsive to any interrogatory or request for production in the Subpoena duces tecum, or you discover that any response you provide herein was totally or partially incorrect or, though correction was made, is no longer true, you must promptly (a) produce any additional responsive documents that come into your possession, custody or control or (b) notify the Attorney General of the State of Connecticut, or his designee and serve supplemented, corrected, and sworn responses upon the Attorney General of the State of Connecticut, or his designee.

COMPLIANCE

Attached to this request is a Certificate of Compliance which you are to complete and return, notarized, with your response.

INTERROGATORIES

1. For each fiscal year within the relevant time period, please identify (a) any compensation the company has paid directly or indirectly to each person identified in Schedule A, attached hereto, (b) the date(s) of each such payment, (c) the total amount of such payment, (d) the reasons for each such payment (including a complete description of any service or benefit provided to you), and (e) all documents related thereto.

DOCUMENTARY MATERIAL TO BE PRODUCED

Please produce the following:

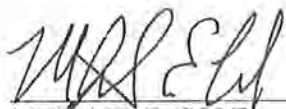
1. All documents identified in response to the above Interrogatory, including contracts for expert witness or consulting service.

HEREOF FAIL NOT UNDER PENALTY OF LAW.

Dated at Hartford, Connecticut this thirty-first day of July, 2007.

RICHARD BLUMENTHAL
ATTORNEY GENERAL

By:



MICHAEL E. COLE
Assistant Attorney General
Chief, Antitrust Department
Designee of the Attorney General
Pursuant to Section 35-42 of the
Connecticut General Statutes

Schedule A

2006 - Lyme Disease Guideline Development Panel

Gary P. Wormser, MD
New York Medical College
Westchester Co. Med Center
ID Sec/Munger Pavilion-209 SE
Valhalla, NY 10595

Johan S. Bakken, MD, PhD
St Luke ID Associate
Ste. #L201, 1001 East Superior St.
Duluth, MN 55802

Linda Bockenstedt, MD
Yale University
School of Medicine
Section of Rheumatology
Department of Internal Medicine
300 Cedar Street
Room 525 TAC
P.O. Box 208031
New Haven, CT 06520

Raymond J. Dattwyler, MD
New York Medical College
Basic Science Building, C30
Department of Microbiology
Valhalla, NY 10595

J. Stephen Dumler, MD
Professor, Department of Pathology,
Division of Medical Microbiology
The Johns Hopkins Hospital
Department of Pathology
Division of Microbiology
Ross 624
720 Rutland Avenue
Baltimore, MD 21205

Dorland Fish, PhD
Yale School of Public Health
Yale University
60 College Street
P.O. Box 208034
New Haven, CT 06520-8034

John J. Halperin, MD
Overlook Hospital, Atlantic Neuroscience
99 Beauvoir Avenue
Summit, NJ 07902

Mark S. Klempner, MD
Boston Medical Center
Division of Infectious Diseases
Department of Medicine
650 Albany Street, EBRC 640
Boston, MA 02118

Peter J. Krause, MD
Connecticut Childrens Medical Center
282 Washington Street, Dir, Div of ID,
Department of Pediatrics
Hartford, CT 06106

Robert B. Nadelman
New York Medical College
Section of Infectious Diseases
Munger Pavilion-Room 245
Westchester Medical Center
Valhalla, NY 10595

Eugene D. Shapiro, MD
Yale University School of Medicine
333 Cedar Street
P.O. Box 208064
Dept. of Pediatrics
New Haven, CT 06520

Gerold Stanek, MD
Ao. Univ. Prof. Dr.
Klinisches Institut für Hygiene und
Medizinische Mikrobiologie
1090 Wien, Kinderspitalgasse 15
Vienna, Austria

Allen C. Steere, MD
Director, Rheumatology Fellowship
Program Training Director
Professor of Medicine
Massachusetts General Hospital
55 Fruit Street, BUL 165
Boston, MA

Franc Strle, MD, PhD
Univ. Med Center
Japljeva 2, Dept of ID
Ljubljana, 1525
Slovenia

Infectious Diseases Society of America
1300 Wilson Blvd., Suite 300
Arlington, VA 22209

CERTIFICATE OF COMPLIANCE

State of _____)
) ss:
County of _____)

I, _____, hereby certify that I have reviewed the responses to the Interrogatories and Subpoena Duces Tecum and that they are true and accurate to the best of my knowledge and belief. I further certify that all of the required material, excepting that for which a privilege has been claimed herein, within the possession, custody, or control of the person to whom this subpoena is directed has been produced.

Name

Title

Subscribed to and sworn to before me this _____ day of _____, 2007.

Notary Public
Commissioner of the Superior Court

My Commission Expires:

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee <small>(Endorsement Required)</small>		
Restricted Delivery Fee <small>(Endorsement Required)</small>		
Total Postage & Fees	\$	

Postmark
Date

Sent To *Aetna*
Street, Apt. No.,
or PO Box No. *151 Farmington Ave*
City, State, ZIP+4 *Hartford, CT 06156*

PS Form 3800, June 2002 See Reverse for Instructions

7004 2890 0001 2202 5275

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. <p>1. Article Addressed to:</p> <p style="text-align: center; margin-left: 40px;">Aetna, Inc. 151 Farmington Avenue Hartford, CT 06156</p>	<p>A. Signature <input checked="" type="checkbox"/> <i>BERWIN KHAN</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery AUG 02 2007</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number <small>(Transfer from service label)</small></p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>PS Form 3811, February 2004</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p style="text-align: center; font-size: 1.2em;">7004 2890 0001 2202 5275</p> <p style="text-align: center; font-size: 0.8em;">Domestic Return Receipt 102595-02-M-1540</p>

RICHARD BLUMENTHAL,
ATTORNEY GENERAL.



55 Elm Street
P.O. Box 120
Hartford, CT 06144-0120

Office of The Attorney General
State of Connecticut

Phone: (860) 808-5169
Fax: (860) 808-5033

July 31, 2007

Via Certified Mail

Anthem Insurance Companies, Inc.
c/o Wellpoint, Inc.
120 Monument Circle
Indianapolis, IN 46204

RE: CID to Anthem Insurance Companies, Inc. (Lyme Disease Guidelines)

Gentlemen:

Enclosed please find a civil investigative demand regarding the State's antitrust review of the process used to promulgate clinical practice guidelines for Lyme disease.

Should you have any questions or comments, please feel free to contact me at the above number.

Very truly yours,

A handwritten signature in black ink, appearing to read "Steven M. Rutstein".

Steven M. Rutstein
Assistant Attorney General

Enclosure

STATE OF CONNECTICUT
OFFICE OF THE ATTORNEY GENERAL

INTERROGATORIES AND SUBPOENA DUCES TECUM

TO: **Anthem Insurance Companies, Inc.**
c/o Wellpoint, Inc.
120 Monument Circle
Indianapolis, IN 46204

BY AUTHORITY OF THE STATE OF CONNECTICUT, and more particularly, pursuant to the Connecticut Antitrust Act, Chapter 624, Section 35-42 of the Connecticut General Statutes, you are hereby commanded and required to submit to the Attorney General of the State of Connecticut, or his designee, at his office, 55 Elm Street, Hartford, Connecticut 06106, on or before **August 20, 2007** the following documentary materials and written answers to interrogatories, UNDER OATH, because the Attorney General has reason to believe that a person has engaged in a contract, combination or conspiracy which is in restraint of trade or commerce and, more particularly, which is for the purpose, or has the effect of lessening competition in the provision of healthcare services for Lyme disease by refusing to deal or inducing third parties to refuse to deal with others in the sale of such services in violation of Sections 35-26 and 35-28(d) of the General Statutes of Connecticut, or has engaged in conduct which constitutes an abuse of monopoly power in violation of Section 35-27 of the General Statutes of Connecticut, and that you have information relevant thereto.

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expenses, bonuses, research or other grants, expert witness fees, consulting payments for medical guideline preparation or individual medical necessity and disability review, in kind contributions, or any other transfers of value. The terms compensations or payments excludes compensation paid for reimbursement for patient care.

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CLAIMS OF PRIVILEGE

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INTERROGATORIES

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DOCUMENTARY MATERIAL TO BE PRODUCED

Please produce the following:

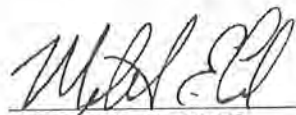
1. All documents identified in response to the above Interrogatory, including contracts for expert witness or consulting service.

HEREOF FAIL NOT UNDER PENALTY OF LAW.

Dated at Hartford, Connecticut this thirty-first day of July, 2007.

RICHARD BLUMENTHAL
ATTORNEY GENERAL

By:



MICHAEL E. COLE
Assistant Attorney General
Chief, Antitrust Department
Designee of the Attorney General
Pursuant to Section 35-42 of the
Connecticut General Statutes

Schedule A

2006 - Lyme Disease Guideline Development Panel

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Valhalla, NY 10595

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Program Training Director
Professor of Medicine
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Boston, MA

Franc Strle, MD, PhD
Univ. Med Center
Japljeva 2, Dept of ID
Ljubljana, 1525
Slovenia

Infectious Diseases Society of America
1300 Wilson Blvd., Suite 300
Arlington, VA 22209

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>Fred H. Hudson</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>ADD 07 2004</i> C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p><i>Anthem Insurance Co.'s c/o Wellpoint, Inc. 120 Monument Circle Indianapolis, IN 46204</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>2. Article Number (Transfer from service label) <u>7004 2890 0001 2202 5343</u></p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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City, State, ZIP+4[®] *Indianapolis IN 46204*

PS Form 3800, June 2002 See Reverse for Instructions

7004 2890 0001 2202 5343

RICHARD BLUMENTHAL
ATTORNEY GENERAL



55 Elm Street
P.O. Box 120
Hartford, CT 06141-0120

Office of The Attorney General
State of Connecticut

Phone: (860) 808-5169
Fax: (860) 808-5033

July 31, 2007

Via Certified Mail

CIGNA Corporate Headquarters
Two Liberty Place
1601 Chestnut Street
Philadelphia, PA 19192

RE: CID to CIGNA (Lyme Disease Guidelines)

Gentlemen:

Enclosed please find a civil investigative demand regarding the State's antitrust review of the process used to promulgate clinical practice guidelines for Lyme disease.

Should you have any questions or comments, please feel free to contact me at the above number.

Very truly yours,

A handwritten signature in black ink, appearing to read "Steven M. Rutstein".

Steven M. Rutstein
Assistant Attorney General

Enclosure

STATE OF CONNECTICUT
OFFICE OF THE ATTORNEY GENERAL

INTERROGATORIES AND SUBPOENA DUCES TECUM

TO: CIGNA Corporate Headquarters
Two Liberty Place
1601 Chestnut Street
Philadelphia, PA 19192

BY AUTHORITY OF THE STATE OF CONNECTICUT, and more particularly, pursuant to the Connecticut Antitrust Act, Chapter 624, Section 35-42 of the Connecticut General Statutes, you are hereby commanded and required to submit to the Attorney General of the State of Connecticut, or his designee, at his office, 55 Elm Street, Hartford, Connecticut 06106, on or before **August 20, 2007** the following documentary materials and written answers to interrogatories, UNDER OATH, because the Attorney General has reason to believe that a person has engaged in a contract, combination or conspiracy which is in restraint of trade or commerce and, more particularly, which is for the purpose, or has the effect of lessening competition in the provision of healthcare services for Lyme disease by refusing to deal or inducing third parties to refuse to deal with others in the sale of such services in violation of Sections 35-26 and 35-28(d) of the General Statutes of Connecticut, or has engaged in conduct which constitutes an abuse of monopoly power in violation of Section 35-27 of the General Statutes of Connecticut, and that you have information relevant thereto.

DEFINITIONS

AS USED HEREIN:

(A) “You,” “your” or “company” means the addressee of this set of Interrogatories and Subpoena Duces Tecum, its domestic and foreign parents, predecessors, divisions, subsidiaries, affiliates, partnerships and joint ventures, and all directors, officers, employees, agents and all other persons or entities, acting on behalf of said addressee. The terms “subsidiary,” “affiliate” and “joint venture” refer to any entity in which there is partial (25% or more) or total control between the company and any other person.

(B) “Agreement” means any written or oral understanding, promise or condition, or any document containing any such understanding, promise or condition, including any amendment or modification thereto.

(C) The terms “And” and “or” are terms of inclusion and not of exclusion and shall be construed either disjunctively or conjunctively as necessary to bring within the scope of this subpoena any document or information that might otherwise be construed to be outside its scope.

(D) The term “Any” means each and every and one or more.

(E) “Communicate” or “communication” means every manner or means of disclosure, transfer or exchange, and every disclosure, transfer or exchange of ideas or information, whether orally, by document, or electronically, or whether face-to-face, by telephone, mail, personal delivery, electronic transmission or otherwise.

(F) “Compensation” or “payment(s)” means any form of compensation, consideration, or remuneration of any kind, including, but not limited to, fees, payments,

expenses, bonuses, research or other grants, expert witness fees, consulting payments for medical guideline preparation or individual medical necessity and disability review, in kind contributions, or any other transfers of value. The terms compensations or payments excludes compensation paid for reimbursement for patient care.

(G) The term “Concerning”, “relate to” or “relating to” means in whole or in part constituting, evidencing, containing, discussing, commenting upon, describing, analyzing, identifying, stating, pertaining to, referring to, or forming the basis of.

(H) The term “Documentary material” or “document” shall mean all written or graphic matter, whether in final or draft form, however produced, or reproduced, of every kind and description in your actual or constructive possession, custody, care or control, including without limitation, all writings, account letters, account recommendations, appointment books, books, books of accounts, calendars, CD-ROMs, charts, computer or electronic files stored on file servers, e-mail servers, hard drives or other electronic media within your control, computer printouts, contracts, cost sheets, data compilations from which information can be obtained or can be translated through detection devices into reasonably usable form, diaries, drafts, drawings, e-mail, faxes, graphs, hotel charges, invoices, ledgers, magnetic discs, magnetic strips, magnetic tape, memoranda, microfiche, microfilm, minutes, notes, optical characters, papers, photographs, punched cards, punched paper tapes, receipts, recognition characters, reports, sound tapes or recordings, statements, statistical records, stenographer notebooks, studies, telegraphs, time sheets or logs, video tapes or recordings, vouchers, weigh tickets, working papers, or any other tangible thing.

(I) “Guideline” means an expression of authoritative guidance relative to setting standards or determining a course of action for Healthcare Service.

(J) “Healthcare service” means the provision of a service to diagnose, treat, cure, prevent, manage or mitigate illness or disease through the services offered by medical, nursing and allied health professionals.

(K) “Identify,” “identity,” or “identification,” when used in reference to a natural person, means to state his or her full name and present or last-known address, present or last-known position and business affiliation and each position with you, social security numbers, and telephone numbers for residence and business; when used in reference to any other person means to state its full name, present or last-known address, and telephone number; when used in reference to a document means to state the type of document (i.e., letter, memoranda, chart, handwritten notes, calendar (electronic or paper), spreadsheet, sound reproduction, report, computer inputs or outputs, etc.), the location where maintained, your identifying marks and code, the subsidiary, division, or department where prepared and sent, the document date, the author and persons to whom copies were sent or persons initialing or reading or approving the document, and the name and address of each of the present custodians of the document; when used in reference to an event or instance means to identify each natural person involved in the event, to state when and where the event occurred, to state a description of the nature and substance of the event, and to identify any document related to the event; when used in reference to a communication means to state each communication, the persons involved in the communication, where the communication took place, and a brief description of

the substance of the communication, and to identify any document related to the communication.

(L) "IDSA" means the Infectious Diseases Society of America.

(M) The term "Person" includes any natural person, corporate entity, partnership, association, joint venture, government entity or trust, and any other business or legal entity.

(N) The Present tense shall be construed to include the past tense and the past tense shall be construed to include the present tense.

(O) All references to the singular include the plural and vice versa.

INSTRUCTIONS

The response to this Demand shall be submitted in the following manner:

1. Documents provided shall be complete and, unless privileged, unredacted, submitted as found in your files (*e.g.*, documents that in their original condition were stapled, clipped or otherwise fastened together or maintained in separate file folders shall be produced in such form). You may submit photocopies (with color photocopies where necessary to interpret the document), in lieu of original documents, provided that such copies are true, correct and complete copies of the original documents.

2. Number each box and mark each box with your identification and the name(s) of any other person(s) whose files are contained in that box. Documents shall be submitted in sturdy cartons not larger than 1.5 cubic feet. Cartons shall be filled completely.

3. Documents submitted shall be produced in the order in which they appear in your files and shall not be shuffled or otherwise rearranged. Mark each page with your identification and consecutive document control numbers. Place all documents produced in file folders. Mark each file folder with your identification, the name of any other person whose documents are in the folder and how the original file was labeled.

4. Documents should be produced as they are maintained in the normal course of business, and thus if documents are maintained in the original or "native" file format in which they were originally created, they should be produced in such electronic form (including any embedded data or metadata). Data must be produced in the data format in which it is typically used and maintained. Moreover, to the extent a responsive document has been electronically scanned (for any purpose), that document must be produced in a readable and accessible electronic format, with the opportunity provided to review the original document. Documents that have been electronically scanned should be produced in a .tif (TIFF image format) files, with an Opticon load file and a Concordance database with beginning and ending page, and numbers of pages noted. If a Concordance database is not attainable, a .csv (Comma Delimited Text) file with the same information is acceptable, with a caret (^) used to separate multi-value fields. If the OCR data is provided in individual text (.txt) files and there is no text for a text file, the following should be inserted in that text file; "Page intentionally left blank." If your documents are maintained electronically in an OCR (Optical Character Recognition) format, we ask that the OCR text be produced as well. Moreover, this subpoena requires all objective coding for the production, to the extent it exists.

5. For electronic mail, please provide all responsive emails and if applicable, email attachments and any related documents, in a Concordance database format with .tif images, an Opticon load file, and an OCR (Optical Character Recognition) file. If a Concordance database is unattainable, please provide the data in a .pst (Outlook personal folder) file.

6. Produce deposition, proceeding, and trial transcripts in minuscrit form, with a word index, and electronically on CD or DVD. The electronic version of the transcripts should be in Live notes PTF (Portable Transcript Format), PCF (Portable Case Format), or Plain Text format.

7. Your document retention policy should be suspended to prevent the destruction of any documents that may be relevant to the Attorney General's investigation as described in this subpoena.

8. Documents to be produced include all documents in your possession, custody or control, wherever located, including documents in the possession, custody or control of your employees, representatives or agents. Without limitation on the term "control," a document is deemed to be in your control if you have the right to secure that document or a copy thereof from another person.

9. No agreement by the Attorney General of the State of Connecticut purporting to modify, limit or otherwise vary this subpoena shall be valid or binding on the Attorney General of the State of Connecticut unless confirmed or acknowledged in writing by a duly authorized representative thereof.

CLAIMS OF PRIVILEGE

If you contend that any answer to any Interrogatory or any document demanded by this subpoena is privileged in whole or in part, file with your response to these Interrogatories and Subpoena Duces Tecum a statement in writing and under oath and in such statement: (1) identify each such interrogatory answer or document; (2) state its general subject matter; and (3) state in detail the basis for each claim of privilege made with respect to it. If a claim of privilege is made to only a part of a document, then in addition to the statement required herein, produce a copy of such document from which the alleged privileged portion has been redacted, noting where in the document such redactions have been made.

SCOPE

Except where otherwise indicated, this set of Interrogatories and Subpoena Duces Tecum covers the period from **August 1, 1998**, up to and including the date of service.

If subsequent to your initial compliance with this Subpoena duces tecum you discover additional or new material or information responsive to any interrogatory or request for production in the Subpoena duces tecum, or you discover that any response you provide herein was totally or partially incorrect or, though correction was made, is no longer true, you must promptly (a) produce any additional responsive documents that come into your possession, custody or control or (b) notify the Attorney General of the State of Connecticut, or his designee and serve supplemented, corrected, and sworn responses upon the Attorney General of the State of Connecticut, or his designee.

COMPLIANCE

Attached to this request is a Certificate of Compliance which you are to complete and return, notarized, with your response.

INTERROGATORIES

1. For each fiscal year within the relevant time period, please identify (a) any compensation the company has paid directly or indirectly to each person identified in Schedule A, attached hereto, (b) the date(s) of each such payment, (c) the total amount of such payment, (d) the reasons for each such payment (including a complete description of any service or benefit provided to you), and (e) all documents related thereto.

DOCUMENTARY MATERIAL TO BE PRODUCED

Please produce the following:

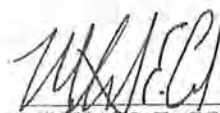
1. All documents identified in response to the above Interrogatory, including contracts for expert witness or consulting service.

HEREOF FAIL NOT UNDER PENALTY OF LAW.

Dated at Hartford, Connecticut this thirty-first day of July, 2007.

RICHARD BLUMENTHAL
ATTORNEY GENERAL

By:



MICHAEL E. COLE
Assistant Attorney General
Chief, Antitrust Department
Designee of the Attorney General
Pursuant to Section 35-42 of the
Connecticut General Statutes

Schedule A

2006 - Lyme Disease Guideline Development Panel

Gary P. Wormser, MD
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Westchester Co. Med Center
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New Haven, CT 06520

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Program Training Director
Professor of Medicine
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Boston, MA

Franc Strle, MD, PhD
Univ. Med Center
Japljeva 2, Dept of ID
Ljubljana, 1525
Slovenia

Infectious Diseases Society of America
1300 Wilson Blvd., Suite 300
Arlington, VA 22209

CERTIFICATE OF COMPLIANCE

State of _____)
) ss:
County of _____)

I, _____, hereby certify that I have reviewed the responses to the Interrogatories and Subpoena Duces Tecum and that they are true and accurate to the best of my knowledge and belief. I further certify that all of the required material, excepting that for which a privilege has been claimed herein, within the possession, custody, or control of the person to whom this subpoena is directed has been produced.

Name

Title

Subscribed to and sworn to before me this _____ day of _____, 2007.

Notary Public
Commissioner of the Superior Court

My Commission Expires:

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Sent To: CIGNA
 Street, Apt. No. or PO Box No.: 1601 Chestnut St.
 City, State, ZIP+4: Phila, PA 19192

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <u>[Signature]</u> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Queen Hunt</u> C. Date of Delivery <u>8/8/07</u></p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">CIGNA Corporate Headquarters Two Liberty Place 1601 Chestnut Street Philadelphia, PA 19192</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label) <u>7004 2890 0001 2202 5336</u></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

RICHARD BLUMENTHAL
ATTORNEY GENERAL



55 Elm Street
P.O. Box 120
Hartford, CT 06141-0120

Office of The Attorney General
State of Connecticut

Phone: (860) 808-5169
Fax: (860) 808-5033

July 31, 2007

Via Certified Mail

Health Net, Inc.
P.O. Box 10198
Van Nuys, CA 91410

RE: CID to Health Net, Inc. (Lyme Disease Guidelines)

Gentlemen:

Enclosed please find a civil investigative demand regarding the State's antitrust review of the process used to promulgate clinical practice guidelines for Lyme disease.

Should you have any questions or comments, please feel free to contact me at the above number.

Very truly yours,

A handwritten signature in black ink, appearing to read "Steven M. Rutstein".

Steven M. Rutstein
Assistant Attorney General

Enclosure

STATE OF CONNECTICUT
OFFICE OF THE ATTORNEY GENERAL

INTERROGATORIES AND SUBPOENA DUCES TECUM

TO: **Health Net, Inc.**
P.O. Box 10198
Van Nuys, CA 91410-0198

BY AUTHORITY OF THE STATE OF CONNECTICUT, and more particularly, pursuant to the Connecticut Antitrust Act, Chapter 624, Section 35-42 of the Connecticut General Statutes, you are hereby commanded and required to submit to the Attorney General of the State of Connecticut, or his designee, at his office, 55 Elm Street, Hartford, Connecticut 06106, on or before **August 20, 2007** the following documentary materials and written answers to interrogatories, UNDER OATH, because the Attorney General has reason to believe that a person has engaged in a contract, combination or conspiracy which is in restraint of trade or commerce and, more particularly, which is for the purpose, or has the effect of lessening competition in the provision of healthcare services for Lyme disease by refusing to deal or inducing third parties to refuse to deal with others in the sale of such services in violation of Sections 35-26 and 35-28(d) of the General Statutes of Connecticut, or has engaged in conduct which constitutes an abuse of monopoly power in violation of Section 35-27 of the General Statutes of Connecticut, and that you have information relevant thereto.

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expenses, bonuses, research or other grants, expert witness fees, consulting payments for medical guideline preparation or individual medical necessity and disability review, in kind contributions, or any other transfers of value. The terms compensations or payments excludes compensation paid for reimbursement for patient care.

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(I) “Guideline” means an expression of authoritative guidance relative to setting standards or determining a course of action for Healthcare Service.

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(K) “Identify,” “identity,” or “identification,” when used in reference to a natural person, means to state his or her full name and present or last-known address, present or last-known position and business affiliation and each position with you, social security numbers, and telephone numbers for residence and business; when used in reference to any other person means to state its full name, present or last-known address, and telephone number; when used in reference to a document means to state the type of document (i.e., letter, memoranda, chart, handwritten notes, calendar (electronic or paper), spreadsheet, sound reproduction, report, computer inputs or outputs, etc.) , the location where maintained, your identifying marks and code, the subsidiary, division, or department where prepared and sent, the document date, the author and persons to whom copies were sent or persons initialing or reading or approving the document, and the name and address of each of the present custodians of the document; when used in reference to an event or instance means to identify each natural person involved in the event, to state when and where the event occurred, to state a description of the nature and substance of the event, and to identify any document related to the event; when used in reference to a communication means to state each communication, the persons involved in the communication, where the communication took place, and a brief description of

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2. Number each box and mark each box with your identification and the name(s) of any other person(s) whose files are contained in that box. Documents shall be submitted in sturdy cartons not larger than 1.5 cubic feet. Cartons shall be filled completely.

3. Documents submitted shall be produced in the order in which they appear in your files and shall not be shuffled or otherwise rearranged. Mark each page with your identification and consecutive document control numbers. Place all documents produced in file folders. Mark each file folder with your identification, the name of any other person whose documents are in the folder and how the original file was labeled.

4. Documents should be produced as they are maintained in the normal course of business, and thus if documents are maintained in the original or "native" file format in which they were originally created, they should be produced in such electronic form (including any embedded data or metadata). Data must be produced in the data format in which it is typically used and maintained. Moreover, to the extent a responsive document has been electronically scanned (for any purpose), that document must be produced in a readable and accessible electronic format, with the opportunity provided to review the original document. Documents that have been electronically scanned should be produced in a .tif (TIFF image format) files, with an Opticon load file and a Concordance database with beginning and ending page, and numbers of pages noted. If a Concordance database is not attainable, a .csv (Comma Delimited Text) file with the same information is acceptable, with a caret (^) used to separate multi-value fields. If the OCR data is provided in individual text (.txt) files and there is no text for a text file, the following should be inserted in that text file; "Page intentionally left blank." If your documents are maintained electronically in an OCR (Optical Character Recognition) format, we ask that the OCR text be produced as well. Moreover, this subpoena requires all objective coding for the production, to the extent it exists.

5. For electronic mail, please provide all responsive emails and if applicable, email attachments and any related documents, in a Concordance database format with .tif images, an Opticon load file, and an OCR (Optical Character Recognition) file. If a Concordance database is unattainable, please provide the data in a .pst (Outlook personal folder) file.

6. Produce deposition, proceeding, and trial transcripts in minuscrit form, with a word index, and electronically on CD or DVD. The electronic version of the transcripts should be in Live notes PTF (Portable Transcript Format), PCF (Portable Case Format), or Plain Text format.

7. Your document retention policy should be suspended to prevent the destruction of any documents that may be relevant to the Attorney General's investigation as described in this subpoena.

8. Documents to be produced include all documents in your possession, custody or control, wherever located, including documents in the possession, custody or control of your employees, representatives or agents. Without limitation on the term "control," a document is deemed to be in your control if you have the right to secure that document or a copy thereof from another person.

9. No agreement by the Attorney General of the State of Connecticut purporting to modify, limit or otherwise vary this subpoena shall be valid or binding on the Attorney General of the State of Connecticut unless confirmed or acknowledged in writing by a duly authorized representative thereof.

CLAIMS OF PRIVILEGE

If you contend that any answer to any Interrogatory or any document demanded by this subpoena is privileged in whole or in part, file with your response to these Interrogatories and Subpoena Duces Tecum a statement in writing and under oath and in such statement: (1) identify each such interrogatory answer or document; (2) state its general subject matter; and (3) state in detail the basis for each claim of privilege made with respect to it. If a claim of privilege is made to only a part of a document, then in addition to the statement required herein, produce a copy of such document from which the alleged privileged portion has been redacted, noting where in the document such redactions have been made.

SCOPE

Except where otherwise indicated, this set of Interrogatories and Subpoena Duces Tecum covers the period from **August 1, 1998**, up to and including the date of service.

If subsequent to your initial compliance with this Subpoena duces tecum you discover additional or new material or information responsive to any interrogatory or request for production in the Subpoena duces tecum, or you discover that any response you provide herein was totally or partially incorrect or, though correction was made, is no longer true, you must promptly (a) produce any additional responsive documents that come into your possession, custody or control or (b) notify the Attorney General of the State of Connecticut, or his designee and serve supplemented, corrected, and sworn responses upon the Attorney General of the State of Connecticut, or his designee.

COMPLIANCE

Attached to this request is a Certificate of Compliance which you are to complete and return, notarized, with your response.

INTERROGATORIES

1. For each fiscal year within the relevant time period, please identify (a) any compensation the company has paid directly or indirectly to each person identified in Schedule A, attached hereto, (b) the date(s) of each such payment, (c) the total amount of such payment, (d) the reasons for each such payment (including a complete description of any service or benefit provided to you), and (e) all documents related thereto.

DOCUMENTARY MATERIAL TO BE PRODUCED

Please produce the following:

1. All documents identified in response to the above Interrogatory, including contracts for expert witness or consulting service.

HEREOF FAIL NOT UNDER PENALTY OF LAW.

Dated at Hartford, Connecticut this thirty-first day of July, 2007.

RICHARD BLUMENTHAL
ATTORNEY GENERAL

By:



MICHAEL E. COLE
Assistant Attorney General
Chief, Antitrust Department
Designee of the Attorney General
Pursuant to Section 35-42 of the
Connecticut General Statutes

Schedule A

2006 - Lyme Disease Guideline Development Panel

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Japljeva 2, Dept of ID
Ljubljana, 1525
Slovenia

Infectious Diseases Society of America
1300 Wilson Blvd., Suite 300
Arlington, VA 22209

CERTIFICATE OF COMPLIANCE

State of _____)
) ss:
County of _____)

I, _____, hereby certify that I have reviewed the responses to the Interrogatories and Subpoena Duces Tecum and that they are true and accurate to the best of my knowledge and belief. I further certify that all of the required material, excepting that for which a privilege has been claimed herein, within the possession, custody, or control of the person to whom this subpoena is directed has been produced.

Name

Title

Subscribed to and sworn to before me this _____ day of _____, 2007.

Notary Public
Commissioner of the Superior Court

My Commission Expires:

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

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Sent To: **Health Net**
 Street, Apt. No., or PO Box No.: **PO Box 10198**
 City, State, Zip+4: **Van Nuys, CA 91410-0198**

PS Form 3800, June 2002 See Reverse for Instructions

7004 2890 0001 2202 5282

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. <p>1. Article Addressed to:</p> <p style="text-align: center; padding-left: 40px;">Health Net, Inc. P.O. Box 10198 Van Nuys, CA 91410-0198</p> <p>2. Article Number (Transfer from service label) 7004 2890 0001 2202 5282</p>	<p>A. Signature Signature Perello <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	