

How to Respond to Notices of Claim Package Deficiency for Monetary Award Claims Asserting Level 1.5 and 2 Neurocognitive Impairment

Exhibit A-1 to the Settlement Agreement requires that Qualifying Diagnoses of Level 1.5 and 2 Neurocognitive Impairment made outside of the Baseline Assessment Program (“BAP”) be “generally consistent” with the BAP requirements for Level 1.5 and 2 Diagnoses. Section 6.4 of the Settlement Agreement requires that the Appeals Advisory Panel (“AAP”) review certain Qualifying Diagnoses made before the January 7, 2017 Effective Date. Before we send your Claim Package to an AAP member, you may wish to make it as complete as possible. If your medical records are missing any element of the requirements in Exhibit A-1, we send a notice to let you know what is not in your records. If you want the AAP member to review your Claim Package as submitted, you can let us know and we will send your Claim Package to the AAP member for review.

We are now issuing notices with a third column labeled “Required to Send Claim to AAP?” and will do so going forward. If you have already received an incomplete notice on a Level 1.5 or 2 claim that does not have this column and have not yet responded, we will send a replacement notice to you. The “Required to Send Claim to AAP?” column shows whether you have to submit the missing information or document before we will send the Claim Package to the AAP member. For any items with a Yes in this column, you need to send us the information or documents to cure the issue on or before the deadline stated at the top of the Notice. If you have any items with a No, you may send us the missing information or documents, or choose instead to have the AAP member review the Claim Package without those materials. If you have both Yes and No items in this column, you must respond to all Yes items before we will send the Claim Package to the AAP member, but you still have the option to respond to any No items.

You will have 120 days to respond to your Notice and/or provide the missing information or documents. We will wait the full 120 days to re-review your Claim Package unless you: (1) confirm that you have finished responding, or (2) let us know to send your Claim Package to the AAP for review, if that option is available.