

The Settlement Agreement controls what medical criteria applies when making a Qualifying Diagnosis, who reviews that diagnosis to see if it qualifies for a Monetary Award – the Appeals Advisory Panel of neurologists or the Claims Administrator – and how the review is to be done. This table shows how this works. The [Blue](#), underlined phrases are defined below this table.

DIAGNOSIS AND REVIEW REQUIREMENTS IN THE NFL CONCUSSION SETTLEMENT							
	1	2	3	4	5	6	
	<u>QUALIFYING DIAGNOSIS</u>	<u>WHEN DIAGNOSED</u>	<u>WHO MAY DIAGNOSE</u>	<u>DIAGNOSTIC CRITERIA</u>	<u>WHO REVIEWS</u>	<u>REVIEW STANDARD</u>	
A.	LEVEL 1.5	1.	On or Before 7/1/11	<a href="#">Group 1 Specialists</a>	<a href="#">Generally Consistent</a>	Claims Administrator* <a href="#">AAP**</a>	<a href="#">Generally Consistent</a>
		2.	7/2/11 - 7/6/14	Group 1 Specialists	Generally Consistent	AAP	Generally Consistent
	LEVEL 2	3.	7/7/14 - 1/7/17	<a href="#">Group 2 Specialists</a>	Generally Consistent	AAP	Generally Consistent
		4.	Player Deceased Before 1/7/17	<a href="#">Group 3 Specialists</a>	Generally Consistent	AAP	Generally Consistent
		5.	After 1/7/17	<a href="#">BAP Provider in BAP</a>	<a href="#">Exhibit 1</a>	Claims Administrator	<a href="#">Exhibit 1</a>
<a href="#">Qualified MAF Physician</a>	Generally Consistent			Claims Administrator	Generally Consistent		
B.	ALZHEIMER'S DISEASE	1.	On or Before 7/1/11	Group 1 Specialists	Exhibit 1	Claims Administrator* AAP**	Generally Consistent
	PARKINSON'S DISEASE	2.	7/2/11 - 7/6/14	Group 1 Specialists	Exhibit 1	AAP	Generally Consistent
		3.	7/7/14 - 1/7/17	Group 2 Specialists	Exhibit 1	AAP	Generally Consistent
		4.	Player Deceased Before 1/7/17	Group 3 Specialists	Exhibit 1	AAP	Generally Consistent
	ALS	5.	After 1/7/17	Qualified MAF Physician	Exhibit 1	Claims Administrator	Exhibit 1
C.	DEATH WITH CTE	1.	Death On or Before 7/1/11	Board-Certified Neuropathologist	Exhibit 1	Claims Administrator* AAP**	Generally Consistent
		2.	Death 7/2/11 – 7/7/14 (diagnosed after death)	Board-Certified Neuropathologist	Exhibit 1	AAP	Generally Consistent
		3.	Death 7/8/14 - 4/21/15 (diagnosed within 270 days after date of death)	Board-Certified Neuropathologist	Exhibit 1	AAP	Generally Consistent

\*The Claims Administrator reviews diagnoses made by a board-certified neurologist, board-certified neurosurgeon, or other board-certified neuro-specialist physician.

\*\*The AAP reviews diagnoses made by physicians who are not board-certified neurologists, board-certified neurosurgeons, or other board-certified neuro-specialist physicians.

## Definitions and Explanations

<b>1.</b>	<b>QUALIFYING DIAGNOSIS</b>	<p>These diagnoses are eligible for a Monetary Award:</p> <ul style="list-style-type: none"><li>(a) Level 1.5 Neurocognitive Impairment;</li><li>(b) Level 2 Neurocognitive Impairment;</li><li>(c) Alzheimer's Disease;</li><li>(d) Parkinson's Disease;</li><li>(e) Death with CTE (for a Retired NFL Football Player who died before April 22, 2015); and</li><li>(f) ALS.</li></ul>
<b>2.</b>	<b>WHEN DIAGNOSED</b>	<p>The Settlement Agreement divides diagnoses into these time periods:</p> <ul style="list-style-type: none"><li>(a) Diagnoses made on or before July 1, 2011;</li><li>(b) Diagnoses made from July 2, 2011 through July 6, 2014;</li><li>(c) Diagnoses made from July 7, 2014, the date the Settlement Agreement was preliminarily approved by the Court, through January 7, 2017, which was the date the Settlement Agreement became effective after all appeals;</li><li>(d) Diagnoses made on Players while living but who died before January 7, 2017;</li><li>(e) Diagnoses made on Players after January 7, 2017; and</li><li>(f) Diagnoses of Death with CTE made on Players who died on or before April 22, 2015, which was the date the Court finally approved the Settlement Agreement but before all appeals were done.</li></ul>
<b>3.</b>	<b>WHO MAY DIAGNOSE</b>	<p>The physician who has authority under the Settlement Agreement to make a diagnosis for purposes of a Monetary Award depends on the kind of Qualifying Diagnosis and when it was made. Find the kind of Qualifying Diagnosis in column 1 of row A, B or C. Then look at column 2 for when the diagnosis was made and column 3 for what kind of doctor has authority under the Settlement Agreement to make that diagnosis for purposes of a Monetary Award.</p>

**Definitions and Explanations**

<b>4.</b>	<b>Group 1 Specialists</b>	These include: (a) Board-certified neurologists; (b) Board-certified neurosurgeons; (c) Other board-certified neuro-specialist physicians; or (d) Otherwise qualified neurologists, neurosurgeons, or other neuro-specialist physicians. See Section 6.3(d) of the Settlement Agreement.
<b>5.</b>	<b>Group 2 Specialists</b>	These include: (a) Board-certified neurologists (b) Board-certified neurosurgeons; or (c) Other board-certified neuro-specialist physicians. See Section 6.3(c) of the Settlement Agreement.
<b>6.</b>	<b>Group 3 Specialists</b>	These include: (a) Board-certified neurologists; (b) Board-certified neurosurgeons; (c) Other board-certified neuro-specialist physicians; (d) Otherwise qualified neurologists, neurosurgeons, or other neuro-specialist physicians; or (e) Other physicians who have sufficient qualifications (1) in the field of neurology to make a Qualifying Diagnosis of Level 1.5 Neurocognitive Impairment, Level 2 Neurocognitive Impairment, Alzheimer's Disease, Parkinson's Disease, or ALS; or (2) in the field of neurocognitive disorders to make a Qualifying Diagnosis of Level 1.5 Neurocognitive Impairment or Level 2 Neurocognitive Impairment. See Section 6.3(e) of the Settlement Agreement.

## Definitions and Explanations

<p><b>7.</b></p>	<p><b>BAP Provider in the BAP</b></p>	<p>Qualified BAP Providers are:</p> <ul style="list-style-type: none"> <li>(a) Neuropsychologists certified by the American Board of Professional Psychology (ABPP) or the American Board of Clinical Neuropsychology (ABCN, a member board of the American Board of Professional Psychology), in the specialty of Clinical Neuropsychology; and</li> <li>(b) Board-certified neurologists.</li> </ul> <p>Only qualified neuropsychologists and neurologists can perform BAP exams. To qualify, these experts must be board-certified in their specialty and meet other requirements. Every Qualified BAP Provider was evaluated and selected by the independent, Court-appointed BAP Administrator and then approved by Co-Lead Class Counsel and the NFL Parties.</p>
<p><b>8.</b></p>	<p><b>Qualified MAF Physician</b></p>	<p>A Qualified MAF Physician is a board-certified neurologist, board-certified neurosurgeon, or other board-certified neuro-specialist physician, who is part of a list of physicians approved by Co-Lead Class Counsel and the NFL Parties (“the Parties”) as authorized to make a Qualifying Diagnosis after January 7, 2017. A physician is not a Qualified MAF Physician until he or she has been approved by the Parties and has signed a contract with the Claims Administrator. The list of Qualified MAF Physicians eligible to make Qualifying Diagnoses is posted on the Settlement Website.</p>
<p><b>9.</b></p>	<p><b>DIAGNOSTIC CRITERIA</b></p>	<p>For diagnoses of Level 1.5 and Level 2 Neurocognitive Impairment made in the BAP, doctors follow the diagnostic criteria set forth in Exhibits 1 and 2.</p> <p>Diagnoses of Level 1.5 and 2 Neurocognitive Impairment made outside the BAP must show that the evaluation and evidence behind those diagnoses are “generally consistent” with the diagnostic criteria set for Qualified BAP Providers and outlined in Exhibits 1 and 2.</p> <p>Diagnoses of Alzheimer’s Disease, Parkinson’s Disease, ALS and Death with CTE are not made in the BAP and are all made following the diagnostic criteria set out in Exhibit 1 (and the “generally consistent” standard does not apply).</p> <p>Find the kind of Qualifying Diagnosis in column 1. Then look at column 4 for the diagnostic criteria used.</p>

## Definitions and Explanations

<p><b>10.</b></p>	<p><b>Generally Consistent (Column 4)</b></p>	<p>The diagnostic criteria, testing and documentation used by the diagnosing physician does not have to be 100% the same as the Exhibit 1 criteria, but must be <i>generally consistent</i> with the Exhibit 1 diagnostic criteria, testing and documentation requirements. Something is “generally consistent with” something else if the two things have more elements or characteristics in common with each other than they have elements or characteristics that differ from each other. The common elements or characteristics must predominate over the uncommon ones. The closer a set of diagnostic criteria match those specified in Exhibit 1, the more “consistent” it will be with Exhibit 1.</p>
<p><b>11.</b></p>	<p><b>Exhibit 1 (Column 4)</b></p>	<p>Exhibit 1 to the Settlement Agreement sets forth the diagnostic criteria that Qualified BAP Providers must follow when determining if a Retired NFL Football Player has Level 1, Level 1.5, or Level 2 Neurocognitive Impairment. Exhibit 1 also sets forth the diagnostic criteria that other physicians must follow when making diagnoses of Alzheimer’s Disease, Parkinson’s Disease, Death with CTE and ALS.</p>
<p><b>12.</b></p>	<p><b>WHO REVIEWS</b></p>	<p>The Claims Administrator first reviews all Claim Packages to make sure they have the necessary information and documents.</p> <p>If the Claim Package is complete or once it is made complete after notices from the Claims Administrator on what is missing, either the Claims Administrator or a doctor from the Appeals Advisory Panel reviews it to determine if there is a Qualifying Diagnosis made by a physician with the proper credentials and whether it is eligible for a Monetary Award.</p> <p>The Claims Administrator reviews Qualifying Diagnoses that were made:</p> <ul style="list-style-type: none"> <li>(a) After January 7, 2017, by Qualified BAP Providers or Qualified MAF Physicians; and</li> <li>(b) On or before July 1, 2011, by a board-certified neurologist, board-certified neurosurgeon, or other board-certified neuro-specialist physician.</li> </ul> <p>An AAP doctor reviews all other Qualifying Diagnoses made on or before January 7, 2017.</p> <p>Find the kind of Qualifying Diagnosis in column 1. Then look at column 2 for when it was made and column 5 for who reviews it.</p>

## Definitions and Explanations

13.	AAP	The Appeals Advisory Panel (“AAP”) consists of board-certified neurologists whom the Court approved to make recommendations to the Court and the Special Masters, upon their request, about the medical aspects of the Settlement and review claims for certain Qualifying Diagnoses. The AAP also may be asked by the BAP Administrator to determine a Retired NFL Football Player’s level of neurocognitive impairment when there is a lack of agreement between two Qualified BAP Providers.
14.	REVIEW STANDARD	<p>A Qualifying Diagnosis that must be made following the criteria in Exhibit 1 is reviewed by the Claims Administrator to see if it followed the criteria outlined in Exhibit 1.</p> <p>When a Qualifying Diagnosis has been made based on evaluation and evidence “generally consistent” with the criteria set in Exhibit 1, the Claims Administrator or the doctors on the Appeals Advisory Panel, as appropriate, review these diagnoses to ensure that they have been made on principles generally consistent with the Exhibit 1 criteria.</p> <p>Find the kind of Qualifying Diagnosis in column 1. Then look at column 2 for when it was made and column 6 for the review standard that applies.</p>
15.	Generally Consistent (Column 6)	<p>The Claims Administrator or AAP will review the Claim Package and Qualifying Diagnosis to make sure the diagnostic criteria, testing and documentation is <i>generally consistent</i> with the Exhibit 1 diagnostic criteria, testing and documentation requirements. Something is “generally consistent with” something else if the two things have more elements or characteristics in common with each other than they have elements or characteristics that differ from each other. The common elements or characteristics must predominate over the uncommon ones. These types of things are considered in reviews based on the generally consistent standard:</p> <ul style="list-style-type: none"><li>(a) Qualifications of the diagnosing physician;</li><li>(b) Year and state of medicine in which the Qualifying Diagnosis was made;</li><li>(c) Types of testing and diagnostic methods used by the diagnosing physician; and</li><li>(d) Supporting medical records.</li></ul>
16.	Exhibit 1 (Column 6)	The Claims Administrator or AAP will review the Claim Package and Qualifying Diagnosis to make sure the Exhibit 1 requirements are met.