



CONCUSSION SETTLEMENT

In Re: National Football League Players' Concussion Injury
Litigation No. 2:12-md-02323 (E.D.Pa.)

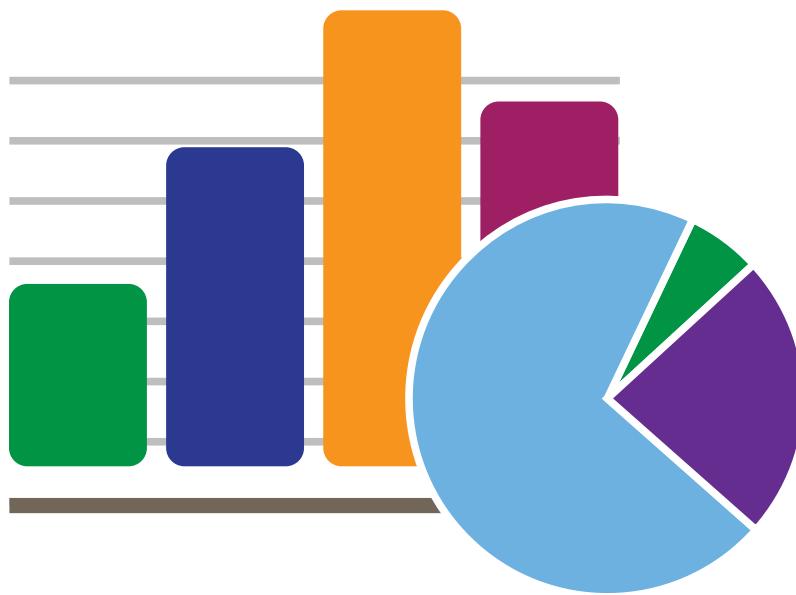


INSIGHTS

The Claims Administrator's News Source for Settlement Class Members

July 2018

New Program Report



On July 16, 2018, we began posting an NFL Settlement Program Summary Report to combine what has been three reports into one Summary Report that covers both registrations and claims (<https://www.nflconcussionsettlement.com/ReportsList.aspx>). We added a new section called "Status of Monetary Award Claims" to show where the Monetary Award claims are in the claims process and removed some items to make the report easier to use. In Claims Administrator Status Report No. 2 (discussed more fully on page 2 of this newsletter), we provide a detailed overview of the new Summary Report.

A Message From the Claims Administrator

I hope you find this second edition of "Insights" even more helpful and informative than the first edition from last month and invite you to send us suggestions for topics to cover in future newsletters. We want to cover the things of most interest to you. If you have questions or just want to check the status of your claim, call 1-855-887-3485 or email us at ClaimsAdministrator@NFLConcussionSettlement.com. We are here to help!

Remember, the best source of information is the Settlement Website (<https://www.NFLConcussionSettlement.com>), where you can find the Settlement Agreement, important alerts, Frequently Asked Questions ("FAQs"), official forms and a report about registrations and claims.

Orran Brown

Founding Partner BrownGreer PLC

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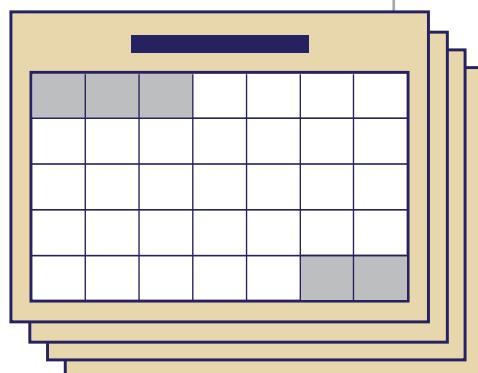
Updates to Settlement Program Rules



On June 19, 2018, we posted an Alert to the Settlement Website (<https://www.nflconcussionsettlement.com/Alerts.aspx>) explaining some additions to the previously-posted Rules Governing Registration Appeals. The updated set of Rules, now called the Rules Governing Registration Determinations and Appeals, is posted on the [Rules](#) page of the Settlement Website and all user portals. Should any of the Rules change in the future, we will post similar Alerts to explain what has changed. Check the Settlement Website often to make sure you see the latest updates, though we will attempt to cover the most important updates in this newsletter each month.

Responding to Requests for Documents and Information

The Settlement Agreement gives you 120 days (four months) to respond to a notice requesting additional information and/or documents (a “Notice of Preliminary Review” or “Notice of Request for Additional Documents”). While you may take this full amount of time should you need it, if you have what is being requested, send it to us right away. The sooner you respond to a notice, the sooner your claim can move forward in the review process. If you respond early but do not give us everything that is needed, you may receive another notice asking for what is still missing, or we will contact you to tell you what you need to do. If you ever have any questions about what you need to submit after receiving a notice requesting additional information and/or documents, contact us for help.



Claims Administrator Status Reports

On April 13, 2018, we filed a comprehensive Status Report with the Court explaining our implementation of the Settlement. We filed a second Status Report on July 24, 2018. Both reports are posted to the Settlement Website (under “Information” click “Documents” and then “Status Reports and Court Notices”). We will file more of these Status Reports in the future and will post them to the Settlement Website. Each Status Report will explain new developments, FAQ updates, Rule changes and the progress that has been made since the last one. We encourage you to read these Status Reports if you have not done so already, as they contain a lot of useful information.



AAP vs. Non-AAP Review of Monetary Award Claims

The [Diagnosis and Review Table](#) on the Settlement Website (under “Information” click “Documents” and then “Information on Monetary Awards”) shows what diagnoses the AAP reviews. 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. To summarize the information in that table, we review Qualifying Diagnoses that were made:

- (a) After January 7, 2017, by Qualified BAP

Providers and Qualified MAF Physicians; and

- (b) On or before July 1, 2011, by a board-certified neurologist, board-certified neurosurgeon, or other board-certified neuro-specialist physician.

An AAP doctor reviews all other Qualifying Diagnoses made on or before January 7, 2017. An AAP doctor also may review a Claim Package as part of an Audit or appeal, as needed.

Top 10 Tips for Monetary Award Claims

We compiled a list of the top 10 things you need to know to submit your best Claim Package in a timely manner and respond fully to a notice requesting additional information and/or documents:

1. If you received your Qualifying Diagnosis on or before February 6, 2017, submit your claim by the February 6, 2019 deadline. If you were diagnosed after February 6, 2017, submit your claim within two years of the date of your diagnosis.
2. Send us a Claim Package after you get the results from your BAP exam, not while you are still waiting for those results. Wait to see if you receive a Qualifying Diagnosis (Level 1.5 or Level 2).
3. If you received a Qualifying Diagnosis from a Qualified MAF Physician or Qualified BAP Provider, do not submit your Claim Package until you have a signed Diagnosing Physician Certification Form from the diagnosing physician and records from his or her diagnosis.
4. Use the correct type of Diagnosing Physician Certification Form for your Qualifying Diagnosis. There is one for pre-Effective Date diagnoses and another for diagnoses made in the BAP or by Qualified MAF Physicians.
5. Give us a Claim Form and HIPAA Form after getting diagnosed by a Qualified MAF Physician or

through the BAP. The physician’s records, alone, are not a complete Claim Package.

6. Provide all the medical records from your evaluation and/or that relate to the Qualifying Diagnosis. More is better.
7. If you cannot provide medical records or a Diagnosing Physician Certification Form, give us instead: (a) an explanation of why you cannot get the item(s); and (b) a list of facilities or physicians who you attempted to get the item(s) from that could not provide them.
8. If you suffered a Stroke before your diagnosis date, tell us about that Stroke in Section VI(A) of the Claim Form. Check the box if the Stroke is not causally related to your Qualifying Diagnosis.
9. You must submit your claim before we can review it. If you simply upload documents to your portal but do not submit the claim, we will not know you are ready for us to review it. If you make a change to the Claim Form after you submit your claim, you must sign the Claim Form again and resubmit the claim.
10. If you receive a Notice of Request for Additional Documents or Notice of Preliminary Review, Section III of the notice provides detailed information about what is missing. This customized language is designed to help explain exactly what you need to do to complete the Claim Package.

Next Steps After Getting Diagnosed by a Qualified MAF Physician

If you received a Level 1.5 Neurocognitive Impairment, Level 2 Neurocognitive Impairment, Alzheimer's Disease, Parkinson's Disease, or ALS diagnosis by a Qualified MAF Physician, the [Rules Governing Qualified MAF Physicians](#) require that the Qualified MAF Physician send us the MAF Diagnosing Physician Certification Form and medical records reflecting the Qualifying Diagnosis, including a report summarizing the Qualified MAF Physician's evaluation of the Player and any:

- 1** CDR questionnaire/worksheet completed by the Qualified MAF Physician or the neuropsychologist for evaluating the Player's functional impairment;
- 2** Documentary evidence or third-party sworn affidavit corroborating the Player's functional impairment that the Qualified MAF Physician reviewed in making the diagnosis;
- 3** Neuropsychological testing evaluation the Qualified MAF Physician reviewed or relied on to make the diagnosis;
- 4** Historical records from other providers that the Qualified MAF Physician reviewed or relied on to make the diagnosis; and
- 5** Other imaging or test results the Qualified MAF Physician reviewed or relied on to make the diagnosis.

The Rules also require that the Qualified MAF Physician give you these records, if you request them. Although the Qualified MAF Physician is required to provide us with records related to your Qualifying Diagnosis, you also may submit them to us yourself if you get them from the Qualified MAF Physician. To complete your Claim Package, you must submit, in addition to the previously-mentioned items, a completed and signed:

- 1. Claim Form; and**
- 2. Claim Package HIPAA Form.**

If you want to prove more Eligible Seasons than what we already have for you, send records showing the Player's employment or participation in NFL Football.

You can submit your Claim Package and any other documents through your online Portal account (<https://www.nflconcussionsettlement.com/Login.aspx>) or by sending it to one of the addresses below. Contact us if you have any questions.

Reporting Fraud in the Program

We take very seriously and investigate fully any information about potential fraud in the Program. If you suspect or know of any potential fraud concerning the Program, you can report it to the Claims Administrator anonymously and confidentially by phone (1-844-812-5666), email (ClaimsAdministrator@NFLConcussionSettlement.com), or online (<https://www.nflconcussionsettlement.com/ReportFraud.aspx>). Be sure to include as much detail as possible, such

as when the activity (or suspected activity) happened, who is involved, how you know about the activity and if anyone else may have information about the activity. The [Rules Governing the Audit of Claims](#) govern Audit by us and what happens to potentially fraudulent claims referred to the Special Master after we complete an Audit. You also can find more information about this process in the [Audit FAQs](#) on the Settlement Website.

You can send materials to us at one of these addresses:

U.S. Mail:

NFL Concussion Settlement
Claims Administrator
P.O. Box 25369
Richmond, VA 23260

Delivery (ex., FedEx, UPS):

NFL Concussion Settlement
c/o BrownGreer PLC
250 Rocketts Way
Richmond, VA 23231

If you call us at 1-855-887-3485 with questions about the BAP, select Option 2 to speak to the BAP Administrator.