

**UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

IN RE: NATIONAL FOOTBALL  
LEAGUE PLAYERS' CONCUSSION  
INJURY LITIGATION

No. 2:12-md-02323-AB

MDL No. 2323

**Hon. Anita B. Brody**

Kevin Turner and Shawn Wooden,  
*on behalf of themselves and  
others similarly situated,*  
Plaintiffs,

CIVIL ACTION NO: 14-00029-AB

v.

National Football League and  
NFL Properties, LLC,  
successor-in-interest to  
NFL Properties, Inc.,  
Defendants.

THIS DOCUMENT RELATES TO:  
ALL ACTIONS

**JOINT STATUS REPORT ON THE  
IMPLEMENTATION OF THE SETTLEMENT PROGRAM**

Co-Lead Class Counsel and the National Football League and NFL Properties LLC (collectively, the "Parties") submit this Joint Status Report on the Implementation of the Settlement Program (the "Report"). Accompanying the Report as Exhibit A and B are true and correct copies of the Declaration of Orran L. Brown, Sr. for Claims Administrator BrownGreer PLC, and the Declaration of Matthew Garretson for BAP Administrator and Lien Resolution Administrator Garretson Resolution Group, Inc.

On January 7, 2017, the Settlement became Effective<sup>1</sup> and commenced the timeline for implementing the Settlement program. Notable milestones have included the February 6, 2017 opening of registration, the March 23, 2017 launch of the claims process for Monetary Awards, and the June 6, 2017 commencement of the Baseline Assessment Program. As detailed below, the Parties have worked on a daily basis with the Claims, BAP and Lien Resolution Administrators, as well as the Special Masters, to ensure that each milestone is met and that the Settlement is implemented in accordance with the Settlement Agreement.

### **Registration**

On February 6, 2017, the Claims Administrator mailed paper copies of the registration form to the Settlement Class as part of the Court-approved Settlement Class Supplemental Notice, and then launched the online Registration Portal on February 6, 2017. The Claims Administrator, in consultation with the Parties, Special Masters and Court, spent months developing a user-friendly registration process, including policies, notices and procedures that allow for efficient processing. Settlement Class Members can register online by clicking the “Register Now” button on the Settlement Website and providing basic information about themselves and their basis for membership in the Settlement Class. Settlement Class Members may also obtain a hard copy of the registration form on the Settlement Website or by contacting the Claims Administrator by phone or email.

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<sup>1</sup> Two sets of objectors who had opposed the Settlement in both this Court and the Third Circuit filed petitions for *writ of certiorari* to the United States Supreme Court. On December 12, 2016, the Supreme Court denied both petitions. *Gilchrist v. NFL*, 137 S. Ct. 591 (2016); *Armstrong v. NFL*, 137 S. Ct. 607 (2016). Because no petitions for rehearing were filed with the Supreme Court, and no further appeal was possible, the Settlement became effective on January 7, 2017. See Settlement Agreement, §2.1(jj).

Beyond the Court-approved Settlement Class Supplemental Notice, the Claims Administrator and the Parties have undertaken numerous efforts to ensure that Settlement Class Members understand the need for and ease of registration in the Settlement program, and that registration will close on August 7, 2017.<sup>2</sup> Key among these efforts was the February 8, 2017 Status Conference at which the Court heard from the Parties and the settlement administrators about the status of Settlement implementation, with particular focus on the registration process. The Court allowed the Status Conference to be viewed live via the Internet, and video of the Conference remains available for viewing on the Settlement Website. Co-Lead Class Counsel has worked with the Claims Administrator to send emails to Settlement Class Members who have not yet registered, addressed registration directly with Settlement Class Members at NFL alumni events and webinars, and sought to reach the Settlement Class indirectly through continuing media and social-media outreach. In addition, the Claims Administrator, in conjunction with the Parties, has consistently maintained an up-to-date Settlement Website that provides reminders about and guidance on registration.

As of June 5, 2017, 14,507 people have submitted registration forms, including 12,082 Retired NFL Football Players, 546 Representative Claimants, and 1,879 Derivative Claimants. The Settlement Class Members are registering overwhelmingly through the online Registration Portal (over half of the registrations to date were submitted on an individual basis through the portal, while 39% of the registrations were submitted in bulk by law firms representing larger numbers of Settlement Class Members), and 55% of the Settlement Class Members are

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<sup>2</sup> Representative Claimants may also register within 180 days of receiving authorization by a court or other official of competent jurisdiction to be the authorized representative of the subject deceased or legally incapacitated or incompetent Retired NFL Football Player, and Derivative Claimants may register within 30 days of the date when their Retired NFL Football Player files a claim for a Monetary Award.

represented by counsel.<sup>3</sup> BrownGreer is continuously processing registration submissions and working with Settlement Class Members to cure any deficiencies that may exist. In addition, BrownGreer is working to confirm claims of legal representation asserted on behalf of Settlement Class Members, including conflicting claims by different lawyers and/or law firms.

Finally, as of June 5, 2017, 14,244 Settlement Class Members already have received Notices of Registration Determination that confirm their membership in the Settlement Class. Of these successful registrants, at least 9,526 of the Retired NFL Football Players are eligible to participate in the Baseline Assessment Program.

### **The Claims Process**

The claims process for Monetary Awards opened on March 23, 2017. The Claims Administrator, in consultation with the Parties and Special Masters, spent months developing a user-friendly claims process, including policies, notices and procedures that cover each stage of submission, review, determination, notice, potential appeal, and payment. The Claims Administrator will have an on-going dialogue with Settlement Class Members to ensure the completeness of claims packages and that they understand the steps in the claims process.

As of June 5, 2017, 869 Settlement Class Members have submitted Claim Packages or Derivative Claim Packages and BrownGreer has been continuously working with Settlement Class Members when their submissions are incomplete to ensure that any deficiencies are promptly cured. On May 26, 2017, BrownGreer issued the first Notice of Monetary Award Claim Determination to a Retired NFL Football Player, setting forth a \$5 million Monetary Award for a Qualifying Diagnosis of ALS, subject to resolution of certain healthcare liens and

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<sup>3</sup> Among the registration submissions received to date are 27 from Settlement Class Members who had initially opted out. Of these 27, 13 have decided to revoke their request to opt out as of June 5, 2017.

other holdbacks. On June 5, 2017, BrownGreer issued a second Notice to a Representative Claimant setting forth a \$4 million Monetary Award for a Qualifying Diagnosis of CTE, subject to certain holdbacks. BrownGreer will continue to review complete claim packages promptly and efficiently.

### **Appeals Advisory Panel**

On May 5, 2017, the Court appointed the candidates jointly recommended by the Parties<sup>4</sup> for the Appeals Advisory Panel (“AAP”) and the Appeals Advisory Panel Consultants (“AAPC”). The AAP plays several roles in the administration of the Settlement, including, with limited exceptions, review of claims for Monetary Awards based on Qualifying Diagnoses made before the Effective Date. The Claims Administrator has begun assigning claims based on pre-Effective Date Qualifying Diagnoses to AAP members, who will review them on a rolling basis to allow for prompt resolution.

### **Qualified MAF Physicians**

On April 7, 2017, the Claims Administrator posted an initial list of Qualified MAF Physicians on the Settlement Website, and additional Qualified MAF Physicians have been, and will continue to be, regularly added to this national network of board-certified neurologists. Retired NFL Football Players may visit Qualified MAF Physicians anytime over the next sixty-five years to be evaluated for potential Qualifying Diagnoses. In addition to professional credentials and board certifications, the Claims Administrator has prioritized geographic location as a key criterion to ensure that the Qualified MAF Physicians are reasonably convenient to the Retired NFL Football Players. As of June 5, 2017, the Claims Administrator has engaged in

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<sup>4</sup> The Parties spent months identifying leaders in the fields of neurology and neuropsychology and, with the assistance of the Claims Administrator, interviewed each of the candidates before making their final proposal to the Court.

contract negotiations with 99 potential Qualified MAF Physicians and contracted with 67 Qualified MAF Physicians in or near 49 of the 53 target cities closest to where the majority of living Retired NFL Football Players reside. Although the Parties approved and consulted with the Claims Administrator on contracts, forms and procedures, the Qualified MAF Physicians operate independent of the Parties and contract directly with the Claims Administrator.

### **Launch of the Baseline Assessment Program**

The Baseline Assessment Program launched on June 6, 2017. Each eligible Retired NFL Football Player who registers may receive a baseline assessment examination (consisting of a standardized neuropsychological examination and a basic neurological examination) performed by two Qualified BAP Providers who have been selected by and contracted with the BAP Administrator. As of June 5, 2017, the BAP Administrator has engaged in contract negotiations with 371 potential Qualified BAP Providers and contracted with 141 Qualified BAP Providers, including in 42 of the 53 target cities in or near where the majority of the living Retired NFL Football Players reside. The BAP Administrator is continuing its efforts to contract with Qualified BAP Providers in the remaining target cities. As stated above with respect to Qualified MAF Physicians, although the Parties provided approvals and consulted with the BAP Administrator on contracts, forms and procedures, the Qualified BAP Providers operate independent of the Parties and contract directly with the BAP Administrator.

### **Lien Resolution**

Finally, the Lien Resolution Administrator has continued negotiations with governmental agencies to resolve related healthcare liens on terms that are very favorable to the Settlement Class Members and protect their future benefits. In addition to a global resolution negotiated with the Centers for Medicare & Medicaid Services (“CMS”) on recovery for Medicare Part A

and Part B liens for certain Qualifying Diagnoses (*see* Exhibit B to the October 7, 2016 Joint Report on Preparation to Implement the Settlement Program After the Effective Date, ECF No. 6919-2), the Lien Administrator has secured CMS' agreement to not assert recovery claims against: (i) the BAP or Education Fund; (ii) Monetary Awards of Retired NFL Football Players whose last Eligible Season ended prior to December 5, 1980; and (iii) Derivative Claimant Awards.<sup>5</sup> Moreover, where the Lien Resolution Administrator must resolve recovery claims through an individual expenditure-based process, it has established procedures designed to ensure that Settlement Class Members receive Monetary Awards as quickly as possible and achieve recovery claim reductions where appropriate.

The Lien Resolution Administrator has also negotiated standard protocol agreements with 45 of the 52 Medicaid agencies it asked to enter into such agreements. These standard protocol agreements include terms that ensure each Medicaid agency's recovery claim will not exceed a certain percentage of a Settlement Class Member's gross settlement award and terms that provide for automatic reductions of the Medicaid agency's recovery claim. In addition to the 45 Medicaid agencies with whom the Lien Resolution Administrator has protocol agreements in place to date, two other Medicaid agencies are subject to statutory limits on their recovery. Thus, at present, there are forty-seven Medicaid agencies with established caps on their recovery claims. Finally, the Lien Resolution Administrator has secured an agreement with 22 Medicaid agencies to not assert a recovery claim against Derivative Claimant Awards. Three Medicaid agencies rejected the agreement, and the Lien Resolution Administrator is continuing its discussions with the remaining 27 Medicaid agencies.

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<sup>5</sup> CMS has agreed to this term conditioned on the amount of the Derivative Claimant Award being included in the gross Monetary Award amount for purposes of resolving CMS' Medicare Secondary Payer Act recovery claim for the associated Retired NFL Football Player.

For these reasons, and others, the Lien Resolution program will provide a substantial benefit to Settlement Class Members, as the Court noted in its final approval opinion. *See In re Nat'l Football League Players' Concussion Injury Litig.*, 307 F.R.D. 351, 421 (E.D. Pa. 2015), *amended* No. 2:12-MD-02323-AB, 2015 WL 12827803 (E.D. Pa. May 8, 2015), *and aff'd* 821 F.3d 410 (3d Cir. 2016), *as amended* (May 2, 2016) (“[T]he Lien Resolution program that accompanies [Settlement Agreement provisions mandating satisfaction of a Class Member’s governmental health insurance liens] is a substantial benefit for Class Members”).

Dated: June 15, 2017

Respectfully Submitted:

/s/ Christopher Seeger  
Christopher Seeger  
**SEGER WEISS LLP**  
77 Water Street  
New York, NY 10005  
Phone: (212) 584-0700  
Fax: (212) 584-0799  
[cseeger@seegerweiss.com](mailto:cseeger@seegerweiss.com)

*Co-Lead Class Counsel*

Sol Weiss  
**ANAPOL WEISS**  
130 North 18<sup>th</sup> Street, Suite 1600  
Philadelphia, PA 19103  
Phone: (215) 735-1130  
Fax: (215) 735-2024  
[sweiss@anapolweiss.com](mailto:sweiss@anapolweiss.com)

*Co-Lead Class Counsel*

/s/ Brad Karp  
Brad S. Karp  
Bruce Birenboim  
Lynn B. Bayard  
**PAUL, WEISS, RIFKIND, WHARTON &  
GARRISON LLP**  
1285 Avenue of the Americas  
New York, NY 10019-6064  
Phone: (212) 373.3000  
Fax: (212)757.3990  
[bkarp@paulweiss.com](mailto:bkarp@paulweiss.com)  
[bbirenboim@paulweiss.com](mailto:bbirenboim@paulweiss.com)  
[lbayard@paulweiss.com](mailto:lbayard@paulweiss.com)

*Attorneys for National Football League and  
NFL Properties LLC*



# Exhibit A



NFL Parties (the “Parties”) to launch the Settlement Program after the Effective Date in accordance with the terms of the Settlement Agreement. This Declaration focuses on actions taken since my last update to the Court on October 7, 2016.

**3. *Implementation Planning.*** We have been working with the Parties on weekly calls since April 19, 2016, to prepare all the functions needed for this Program. We have identified all processes and the steps and forms needed to implement them. As of June 5, 2017, we have conducted 54 regular weekly calls, held many more calls to deal with particular issues and developed 139 different notices, forms or procedure documents relating to each aspect and phase of the Settlement. On January 23, 2017, we began conducting weekly working session calls with Special Master Verrier and Special Master Pritchard to apprise them of all plans and receive their input.

**4. *NFL Concussion Settlement Website.*** As required by Section 4.1 of the Settlement Agreement, and in consultation with the Parties and the Settlement Class Notice Agent, we developed a public, informational website, [www.NFLConcussionSettlement.com](http://www.NFLConcussionSettlement.com) (the “Settlement Website”), to provide notice and additional courtesy information and services to the Settlement Class. On July 7, 2014, immediately following the Court’s entry of the Preliminary Approval Order, we launched an initial version of the Settlement Website to make available for viewing, printing, and downloading PDF versions of the Settlement Class Notice and Settlement Agreement. On July 14, 2014, we launched the comprehensive version of the Settlement Website that included notice materials, court documents, frequently asked questions (“FAQs”), and a link to sign up for more information.

**5. Updates to Settlement Website.** As directed by the Court and the Parties, we have regularly updated the Settlement Website to reflect progress and changes to the Settlement Program as follows:

- (a) On January 9, 2017, we modified the home page text to announce the Effective Date and when Registration would open. We also added an Information menu with sub-sections for Documents, FAQs, Alerts and Contact options to help users find information quickly. Since launching the website, we have added 54 additional FAQs to cover new topics, questions and issues, and updated 27 existing FAQs to clarify information or reflect important dates or deadlines. In total, we have a robust FAQ section on the Settlement Website that has 106 FAQs covering Settlement Program topics including Basic Information, Settlement Agreement Benefits, Registration, Baseline Assessment Program, and Monetary Awards, Lawyer Representation and Liens.
- (b) On February 6, 2017, we updated the Settlement Website home page again to announce that Registration had opened. In addition to updating all of the text and including a prominent “Register Now” button on the home page, we removed the “Sign Up For Future Information” option, added the Registration Form to the Documents tab, and created an Important Dates section to the Information menu. The “Register Now” button takes the user to online Registration screens that can be completed in a matter of minutes by Settlement Class Members or their attorneys. After opening Registration, we also added a button on the Settlement Website home page that users could click to watch the February 8, 2017 Status Conference proceedings live. An edited recording of that Status Conference is now available under the Alerts section for users to watch by clicking the same button.
- (c) On March 23, 2017, we revised the home page text to announce the opening of the claims submission period and provided details about who was eligible to submit a Monetary Award Claim or one for a Derivative Claimant Award. We posted an Alert at the top of the home page announcing that claims could be presented to us. Additionally, we launched a Forms option on the navigation bar and posted all Settlement Program Forms to this page, such as the Claim Form for Retired NFL Football Players and Representative Claimants, Derivative Claim Form, required HIPAA Authorization Forms and Diagnosing Physician Certification Forms.
- (d) On April 7, 2017, we updated the navigation bar on the website home page to include the Qualified MAF Physician List and launched the MAF Physician Locator Tool, which allows users to enter a zip code or city and/or state search to find a Qualified MAF Physician in their area.
- (e) On April 11, 2017, we posted an Alert on How to Calculate Eligible Seasons to help law firms and Settlement Class Members understand this requirement.

- (f) On April 19, 2017, we posted two Alerts on How to Prove Your Eligible Seasons for BAP Eligibility and How to Prove Your Status as a Retired NFL Football Player to help Settlement Class Members who have received Notices of Incomplete Registration. As part of both Alerts, we instructed Settlement Class Members what records will cure their Registration deficiencies and how to contact us for assistance in researching NFL and Member Club records.
- (g) On May 8, 2017, we posted an Alert on Easier Ways to Respond to Notices of Incomplete Registration explaining changes making it easier for Settlement Class Members to respond to two of the things making registrations incomplete.
- (h) On May 22, 2017, we posted an Alert on the BAP Class Member Portal announcing that it is now available for Settlement Class Members and their attorneys to request baseline assessment examination appointments online.

**6. Website Visitor Activity.** From the launch of the Settlement Website through June 5, 2017, the Settlement Website had received 251,996 unique visitors, with representation from all 50 states, as determined by IP Address. Before we removed the feature on February 6, 2017, with the launch of Registration, 8,946 visitors used the “Sign Up for Future Information” feature and provided contact information for the Settlement Program to use to reach them, including, among others, Retired NFL Football Players, family members of Retired NFL Football Players, and counsel for Retired NFL Football Players for updates on the status of the Settlement. Tables 1 and 2 in Attachment 1 to this Declaration present detailed information on website visitor activity and sign ups.

**7. Claims Administrator Post Office Box, Email Inbox and Other Contacts.** Through June 5, 2017, BrownGreer received and sent 251 letters to and from a P.O. Box established for Settlement Class Members and others to send general questions about the Settlement Agreement or Settlement Program. BrownGreer also received and sent 6,700 emails to and from the Settlement Program’s dedicated email address, ClaimsAdministrator@NFLConcussionSettlement.com. As a result of the communications

received, we signed up 900 individuals for more information through February 6, 2017. We also received 25 emails, letters, or faxes sent directly to individuals at BrownGreer before Registration opened on February 6, 2017. Prior to our assuming full responsibility for all call activity (below), we also received 32 inbound phone calls and made 20 outbound phone calls. As a result of these activities, we signed up 25 individuals for more information.

**8. *Call Center Activity.*** Through February 3, 2017, the Settlement Program’s Call Center, which had been staffed by Heffler Claims Group (“Heffler”), received 14,423 calls, logging over 837 hours of call time, with 7,297 of these callers speaking with live operators for over 489 hours. Through those communications, individuals received updates on the status of the litigation and had other questions answered. After Heffler spoke with the callers, 2,351 individuals signed up for more information. In total, 12,222 individuals signed up for more information on the program prior to the launch of Registration. On February 3, 2017, at 8:30 p.m. Eastern Time, Heffler transitioned the toll-free number for the Settlement Program to BrownGreer to administer as the Claims Administrator. Beginning February 6, 2017, with the launch of Registration, callers reached our live agents to discuss the questions they might have about the Settlement, including Registration and the benefits provided for registered Settlement Class Members. Through June 5, 2017, we had received and made 9,071 calls, totaling over 917 hours. Attachment 2 to this Declaration provides more information on communications since Registration opened.

**9. *Announcing Registration.*** In January 2017, we prepared a list (the “Notice Mailing List”) of 37,652 names with addresses using information obtained from our research for the original Settlement Class Notice mailing and data collected from individuals signing up for more information. On January 27, 2017, we mailed to everyone on the Notice Mailing

List a Pre-Registration Notice announcing the upcoming opening of Registration on February 6, 2017, and a status conference to be held by the Court on February 8, 2017. We also emailed the Pre-Registration Notice to 8,830 emails collected from individuals signing up for more information. We delivered the Notice Mailing list to the Settlement Class Notice Agent to mail the Settlement Class Supplemental Notice on February 6, 2017. On this same day, we emailed an announcement that Registration had opened to the 9,043 emails on file, including new individuals who had signed up for more information since January 27, 2017. At the February 8, 2017 Status Conference, I presented to the Court a summary about opening Registration and explained the online and hard copy methods Settlement Class Members can utilize to register for Settlement Program benefits.

**10. *Registration Opens.*** On February 6, 2017, we launched the Registration process as required by Article IV of the Settlement Agreement. Settlement Class Members and attorneys can register for Settlement benefits by visiting the Settlement Website and clicking the “Register Now” button. Settlement Class Members also can register by submitting a hard copy Registration Form that was included in the Settlement Class Supplemental Notice packet mailed on February 6, 2017, and is available on the Settlement Website. As of June 5, 2017, we had received 14,507 Registrations through the Settlement Website and by email and hard copy submissions. These Registrations include 12,082 Retired NFL Football Players, 546 Representative Claimants, and 1,879 Derivative Claimants.

**11. *Additional Announcements.*** On March 7, 2017, we mailed a Registration reminder letter to 23,882 individuals on the Notice Mailing list who had not registered. We also emailed the letter to 4,497 email addresses on file from individuals signing up for more

information who had not registered. On March 13, 2017, after removing 55 individuals who contacted us asking to be removed from the Notice Mailing List, we mailed to 37,597 individuals on the Notice Mailing List the Court approved Notice of Petition for Attorneys' Fees, Costs, and 5% Holdback on Award. We also emailed the Notice to 14,397 email addresses including those from individuals who provided an email address for the first time during Registration. On March 21, 2017, we emailed to 3,737 individuals with email addresses who had not registered an announcement of a free live webinar with Co-Lead Class Counsel on March 28, 2017.

**12. *Attorney Representation Notices.*** When reviewing Registrations we ensure that Settlement Class Members are registered only once and that representation is clear and consensual. We send a Notice of Attorney Representation to all Settlement Class Members represented by law firms informing them that an attorney has registered them in the Settlement Program and all future communications about their claim will be with that attorney. We copy the law firm on these notices sent to their clients. As of June 5, 2017, we have sent 8,751 Notices of Attorney Representation by mail, 7,604 of which were also emailed to the attorneys' clients.

**13. *Registration Notices.*** We have worked with the Special Masters and the Parties to draft the various notices for use during the Registration process. These notices inform registrants if they: (1) are Settlement Class Members who timely and properly registered, and whether they are eligible for the Baseline Assessment Program; (2) provided incomplete Registration information and need to supplement their Registration submission; or (3) are ineligible for the Settlement Program because they opted out or do not satisfy the definition of a Settlement Class Member. If a Settlement Class Member is eligible for the



Baseline Assessment Program, the notice provides instructions for the Retired NFL Football Player to schedule his baseline assessment examination by contacting Garretson Resolution Group (“GRG”), the Court-appointed BAP and Lien Administrator. We began issuing these Registration Notices on March 23, 2017, to coincide with the opening of the Claim Package submission process. As of June 5, 2017, we have issued 14,244 Registration Notices.

**14. *Opt Outs and Revocations of Opt Outs.*** As of June 5, 2017, there are 146 Opt Outs whose requests were categorized as timely and containing all information required by Section 14.2(a) of the Settlement Agreement or whose requests were otherwise approved by the Court. This reflects several Opt Outs that were later revoked by the Settlement Class Members. There are also 27 Opt Out requests that were categorized as untimely and/or missing information required by Section 14.2(a) of the Settlement Agreement. We maintain updated opt-out lists on the Settlement Website under the Court Documents page. Table 4 in Attachment 1 to this Declaration provides additional information on Opt Outs and Opt Out revocations. As of June 5, 2017, we have received Registration submissions from 27 Opt Outs, each of which we then contacted and asked whether he or she wishes to revoke. Of these 27, 13 have decided to revoke their request to opt out. We will continue to report revocation requests we receive to the Parties.

**15. *Claim Package Submission.*** We collaborated with the Special Masters and the Parties on the forms and procedures that will govern claims for Monetary Awards, which is how Settlement Class Members can submit the required elements of a Claim Package, including a Claim Form, Diagnosing Physician Certification Form, HIPAA Form, medical records in connection with the Qualifying Diagnosis, and records demonstrating employment and participation in NFL Football. The components of a Derivative Claim Package are more

streamlined. Section 30.15 directs us to create both online and hard-copy Claim Package submission options. We began accepting Claim Packages on March 23, 2017. We made the submission process as easy as possible for Settlement Class Members and will have an on-going dialogue with Settlement Class Members to ensure the completeness of Claim Packages and that they understand the steps in the claims process.

For example, we credit Eligible Seasons to Settlement Class Members to the extent possible based off of the participation data available to us. Our preliminary analysis of this data suggests that we can credit at least one-half of an Eligible Season to more than 10,000 Settlement Class Members who have submitted Registrations. Further, we will be able to credit more than 5,000 of the registrants with five or more Eligible Seasons, meaning they will not need to submit any NFL Football employment and participation records at all because there is no Offset to the Monetary Award if a player has accrued five or more Eligible Seasons. As of June 5, 2017, we had received 739 Monetary Award Claim Packages and 130 Derivative Claim Packages through the Settlement Website and by hard copy submissions. Of those 869 total Claim Packages, 535 are for Retired NFL Football Players (or associated Representative Claimants or Derivative Claimants) to whom we can credit five or more Eligible Seasons.

On May 26, 2017, BrownGreer issued the first Notice of Monetary Award Claim Determination to a Retired NFL Football Player, which provided a \$5 million Monetary Award for a Qualifying Diagnosis of ALS, subject to resolution of certain healthcare liens and other holdbacks. On June 5, 2017, BrownGreer issued a second Notice to a Representative Claimant setting forth a \$4 million Monetary Award for a Qualifying Diagnosis of CTE, subject to resolution of certain holdbacks. We are continuing to review claim packages on a daily basis.

**16. Appeals Advisory Panel.** On May 5, 2017, the Court entered an Order appointing the Appeals Advisory Panel (“AAP”) and the Appeals Advisory Panel Consultants (“AAPC”) jointly recommended by the Parties. We have contracted with each of the AAP members and the AAPC and have completed training them on the details of their roles in this Program. After we completed this training, we began routing complete Claim Packages to the AAP members for review and approval as required under Section 6.4 of the Settlement Agreement.

**17. Qualified MAF Physicians List.** Section 6.5 of the Settlement Agreement requires the Claims Administrator to establish within 90 days of the Effective Date a list of Qualified MAF Physicians eligible to provide Qualifying Diagnoses. Section 2.1(www) defines a Qualified MAF Physician as “a board-certified neurologist, board-certified neurosurgeon, or other board-certified neuro-specialist physician, who is part of an approved list of physicians authorized to make Qualifying Diagnoses.” Because board-certified neurologists also are eligible to serve as Qualified BAP Providers, we coordinate with GRG in identifying and recruiting key provider organizations in 53 target cities in or near where the majority of living Retired NFL Football Players currently reside, and together with GRG, we recruit the board-certified neurologists affiliated with each of these organizations to apply to be considered for both roles. Separately, we identify and contact additional providers who may wish to serve as Qualified MAF Physicians. Section 6.5(b) of the Settlement Agreement requires the Claims Administrator to select Qualified MAF Physicians based on several criteria. We list those criteria here together with the steps we take to satisfy each one:

- (a) Education, training, licensing, credentialing, board-certification and insurance coverage:** Through the application and credentialing process, we elicit from each provider organization information and supporting documents to prove each applicant’s

education, licensing, board-certification, training, liability insurance coverage, and other required information. We verify the provided information through independent third-party sources, including the National Plan & Provider Enumeration System, board-certifying bodies' official websites and rosters, and other commercial databases such as LexisNexis.

- (b) Ability to provide the specified examination necessary to make Qualifying Diagnoses:** We determine through the information submitted on the Provider Application, as well as that obtained through our verification process, each applicant's specific certifications, specialties and experience to ensure that all applicants have the background in diagnosing cognitive impairment and neuromuscular impairment that is necessary to make each Qualifying Diagnosis.
- (c) Ability to provide all required examinations and services in a timely manner:** Also through the application process, we elicit each applicant's availability to take on new patients as well as average wait times between requests for appointments and actual examinations. We use this information to confirm that we have sufficient Qualified MAF Physicians available to provide all required examinations in a timely manner.
- (d) Insurance accessibility:** Because each visit to see a Qualified MAF Physician is at the Retired NFL Football Player's own expense, we ask applicants for their accepted insurance plans through the Provider Application to ensure that the selected Qualified MAF Physicians accept a variety of health insurance plans, including Medicare. We may select Qualified MAF Physicians from multiple organizations within a geographic area to provide sufficient insurance accessibility.
- (e) Geographic proximity to Retired NFL Football Players:** We use the address information from the Notice Mailing List to determine where Retired NFL Football Players live. We then select Qualified MAF Physicians proportionally according to the geographic concentration of Retired NFL Football Players. This ensures that sufficient Qualified MAF Physicians are available to meet higher demand in more heavily populated areas.

On April 7, 2017, which was 90 days after the Effective Date, we posted on the Settlement Website a list of 102 approved Qualified MAF Physicians in or near 31 of the 53 target cities. We continue to identify and contact providers, collect Provider Applications, verify credentials, submit applicants to the Parties for approval, and contract with approved Qualified MAF Physicians. We will add Qualified MAF Physicians to the posted list as these steps are completed. As of June 5, 2017, we have engaged in contract negotiations

with 99 potential Qualified MAF Physicians and contracted with 67 Qualified MAF Physicians in or near 49 of the 53 target cities closest to where the majority of living Retired NFL Football Players reside. We expanded the posted list to include 144 of the total 166 approved Qualified MAF Physicians and will add the remaining 22 potential Qualified MAF Physicians as we contract with them.

I, Orran L. Brown, Sr., declare under penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct. Executed on this 14<sup>th</sup> day of June, 2017.

A handwritten signature in blue ink, appearing to read "Orran L. Brown, Sr.", is written above a horizontal line.

Orran L. Brown, Sr.

# NFL CONCUSSION SETTLEMENT

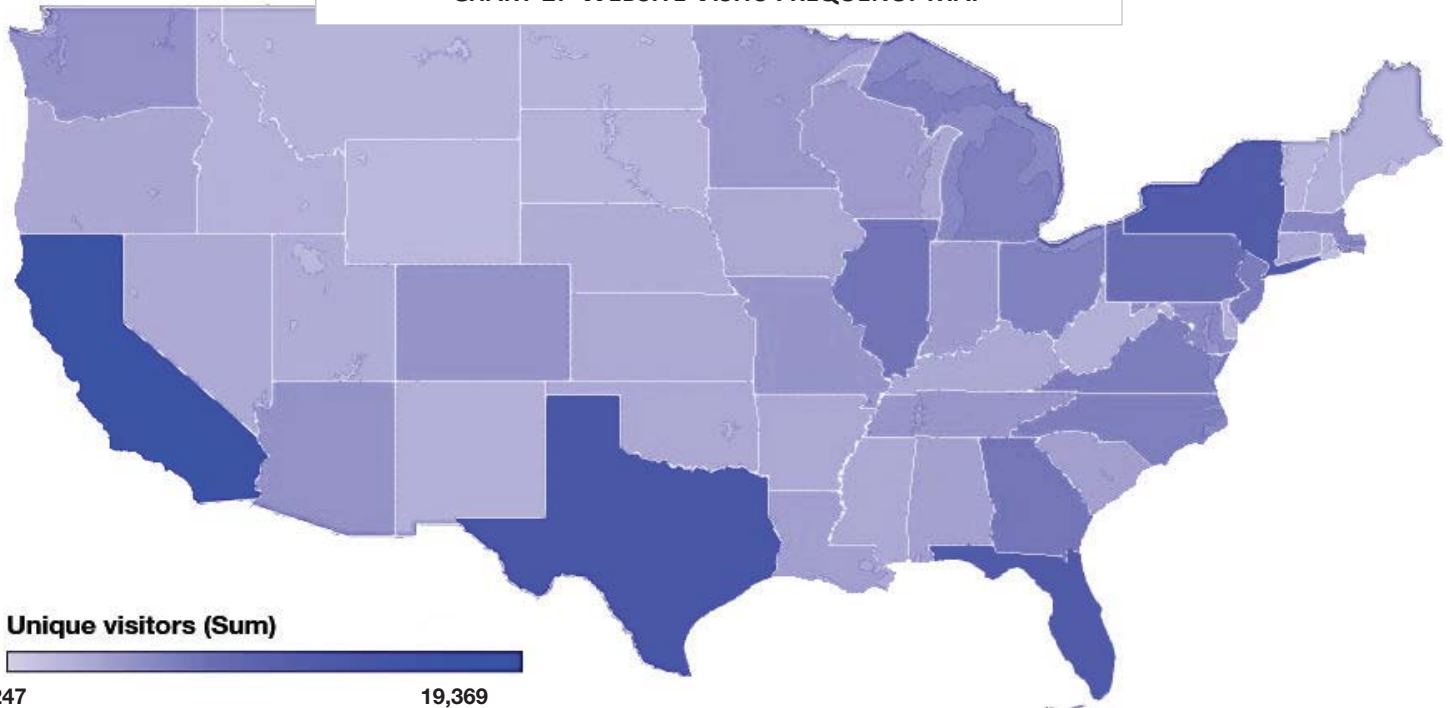
IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)

**CLAIMS ADMINISTRATOR UPDATE**  
(AS OF 6/5/17)

TABLE 1	WEBSITE VISITORS BY STATE					
	Location	Unique Visitors	Visits	Average Actions <sup>1</sup> Per Visit	Average Time (Minutes)	Bounce Rate <sup>2</sup>
1.	California	19,369	21,650	3	4	59.7%
2.	Texas	16,295	19,579	5	5	52.3%
3.	Florida	13,420	15,717	5	6	52.2%
4.	New York	10,842	12,700	3	3	59.0%
5.	Pennsylvania	7,197	8,203	4	4	58.9%
6.	Georgia	7,041	8,274	5	5	53.3%
7.	Illinois	6,151	6,589	3	2	65.9%
8.	New Jersey	5,279	5,634	2	2	67.0%
9.	Virginia	5,249	5,641	3	3	62.8%
10.	Michigan	5,083	5,517	3	3	64.2%
11.	North Carolina	5,008	5,402	2	2	66.6%
12.	Ohio	4,782	5,088	3	2	64.8%
13.	Unknown	76,394	87,384	4	4	58.3%
14.	Other	69,886	78,424	3	3	63.4%
15.	<b>Totals</b>	<b>251,996</b>	<b>285,802</b>	<b>3</b>	<b>4</b>	<b>59.8%</b>

<sup>1</sup> An action occurs anytime the visitor views a new webpage, follows a link or takes any other action on the website.  
<sup>2</sup> The Bounce Rate is the percentage of visitors who leave website after viewing only one page.

**CHART 1: WEBSITE VISITS FREQUENCY MAP**



# NFL

# CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)

## CLAIMS ADMINISTRATOR UPDATE (AS OF 6/5/17)

TABLE 2	PRE-REGISTRATION SIGN-UPS FOR FUTURE INFORMATION						
	Sign-Up Method	Retired Player	Authorized Rep	Attorney for Player or Family	Family Member	Other/Unknown	Total
1.	Website	5,786	440	353	1,594	773	8,946
2.	Call Center	1,310	18	20	778	225	2,351
3.	P.O. Box	40	1	18	12	9	80
4.	CA Inbox	207	11	349	86	167	820
5.	Other	3	0	3	5	14	25
6.	<b>Totals</b>	<b>7,346</b>	<b>470</b>	<b>743</b>	<b>2,475</b>	<b>1,188</b>	<b>12,222</b>

CHART 2: QUARTERLY INFORMATIONAL SIGN-UPS

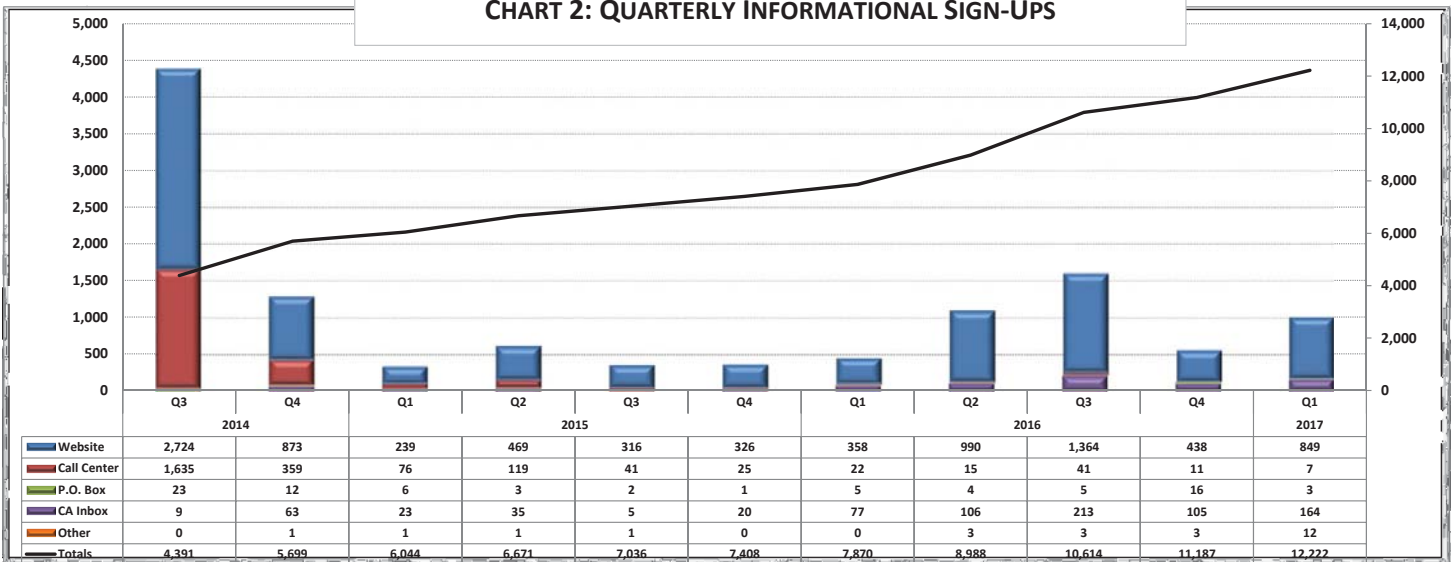


TABLE 3	PRE-REGISTRATION CORRESPONDENCE AND CLAIMS ADMINISTRATOR RESPONSES			
	Representation Status	Letters / Emails / Phone Calls / Faxes Received	Responses Sent	Response Not Required
1.	Pro Se or Unknown	638	577	61
2.	Represented	654	586	68
3.	<b>Totals</b>	<b>1,292</b>	<b>1,163</b>	<b>129</b>

TABLE 4	OPT-OUT SUMMARY			
	Settlement Class Member Type	Total Received	Revocation Requests Granted	Net Opt-Outs
<b>A. Timely Opt Out Requests Containing All Information Required by Section 14.2(a) or Otherwise Approved by the Court</b>				
1.	Retired NFL Football Players	185	58	127
2.	Relatives of a Retired NFL Football Player	23	4	19
3.	<b>Totals</b>	<b>208</b>	<b>62</b>	<b>146</b>
<b>B. Opt Out Requests That Were Untimely and/or Did Not Contain All Information Required by Section 14.2(a)</b>				
4.	Retired NFL Football Players	26		
5.	Relatives of a Retired NFL Football Player	1		
6.	<b>Totals</b>	<b>27</b>		
7.	<b>Grand Totals</b>	<b>235</b>	<b>62</b>	<b>146</b>

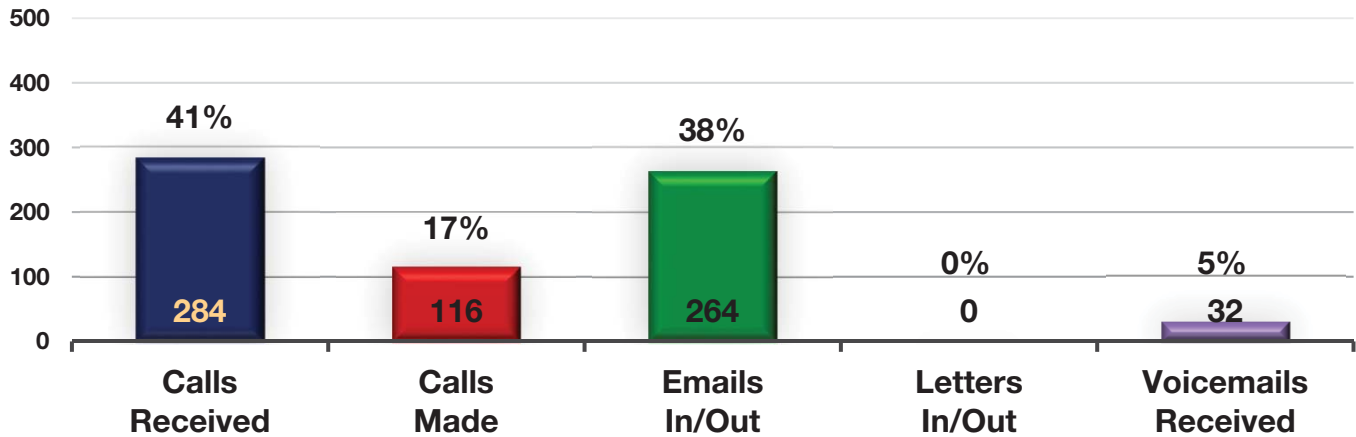


# CONCUSSION SETTLEMENT

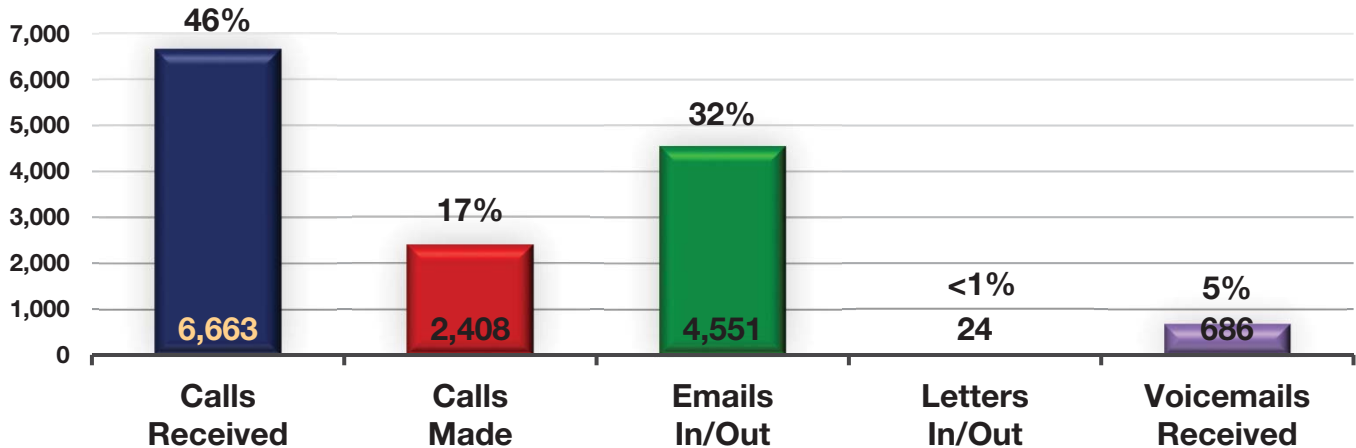
IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)

## Weekly Communications Summary (As of 6/5/17)

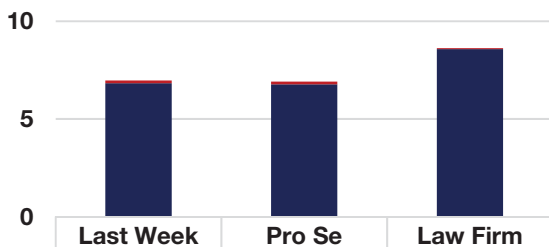
**CHART 1: LAST WEEK'S COMMUNICATIONS BY TYPE  
(TOTAL: 696)**



**CHART 2: CUMULATIVE COMMUNICATIONS BY TYPE  
(TOTAL: 14,332)**

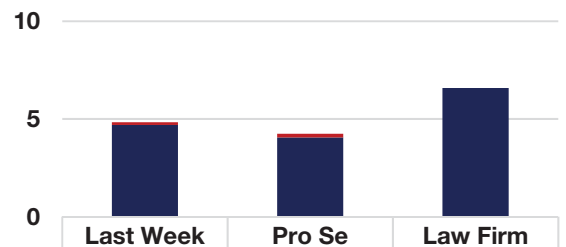


**CHART 3: AVERAGE DURATION OF CALLS RECEIVED (MINUTES)**



■ Hold Time	0.1	0.1	0.0
■ Talk Time	6.8	6.8	8.6

**CHART 4: AVERAGE DURATION OF CALLS MADE (MINUTES)**



■ Hold Time	0.1	0.2	0.0
■ Talk Time	4.7	4.1	6.6



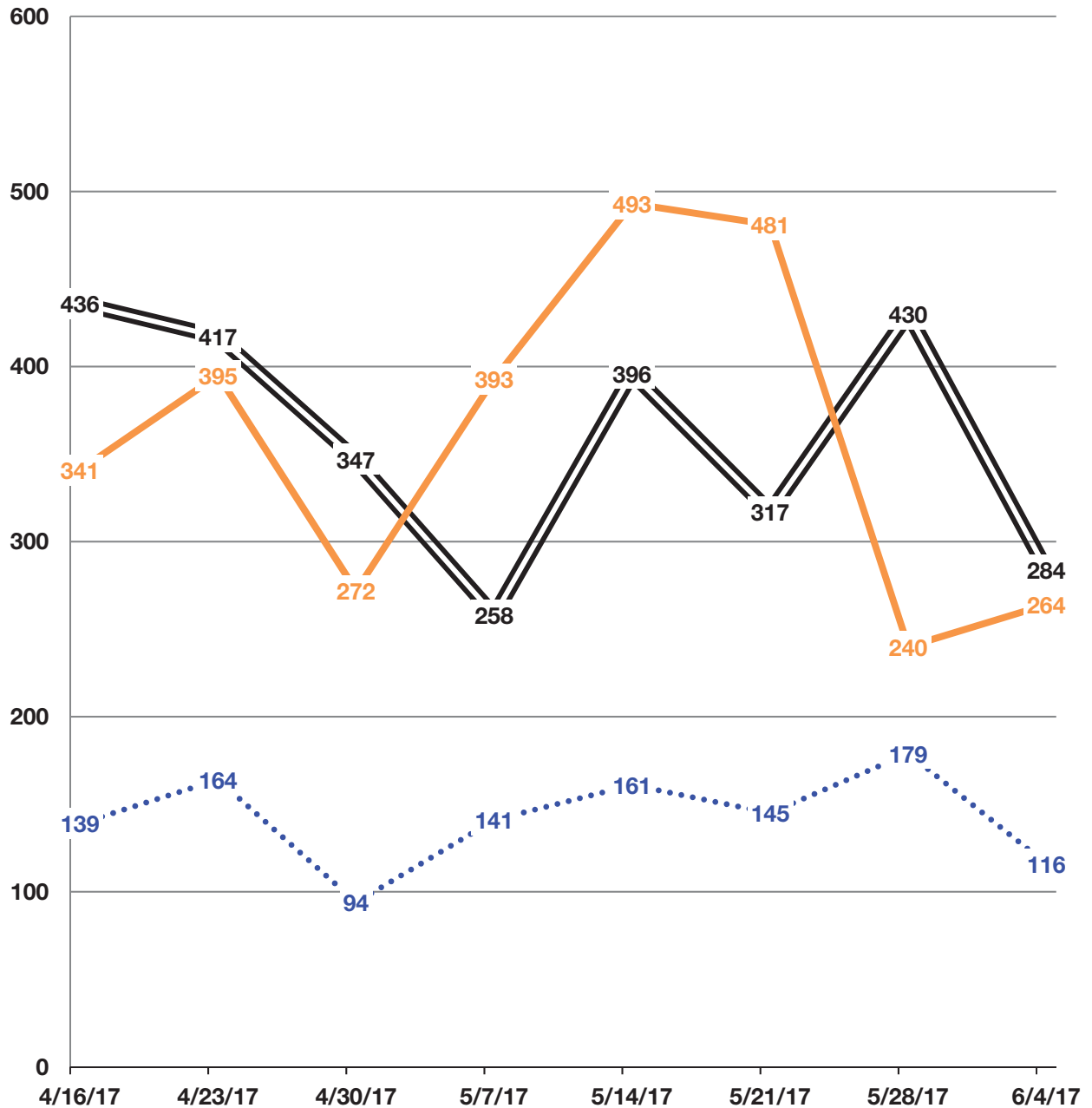


# CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)

## Weekly Communications Summary (As of 6/5/17)

CHART 5: CALL AND EMAIL VOLUME BY WEEK



	4/16/17	4/23/17	4/30/17	5/7/17	5/14/17	5/21/17	5/28/17	6/4/17
Calls Received	436	417	347	258	396	317	430	284
Calls Made	139	164	94	141	161	145	179	116
Emails In/Out	341	395	272	393	493	481	240	264



# CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)

## Weekly Communications Summary (As of 6/5/17)

CHART 6: FIRST CALL RESOLUTION

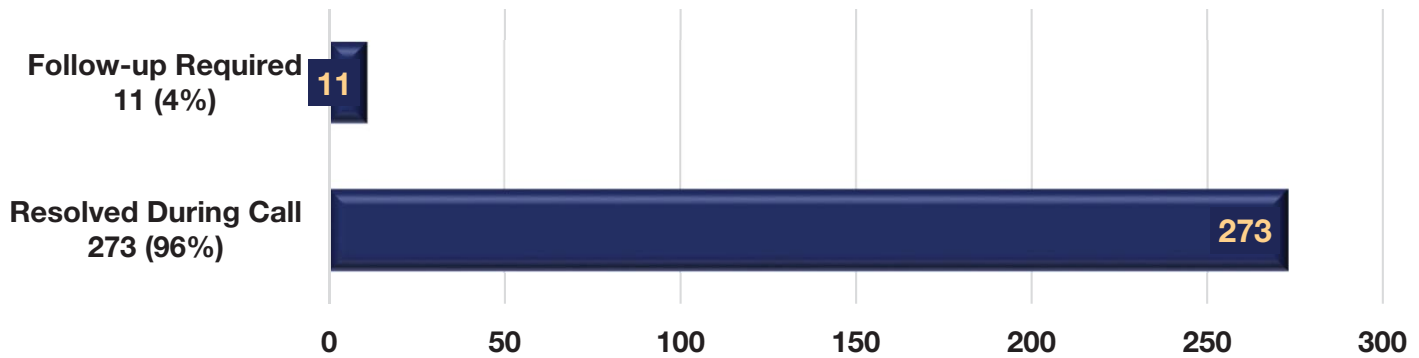
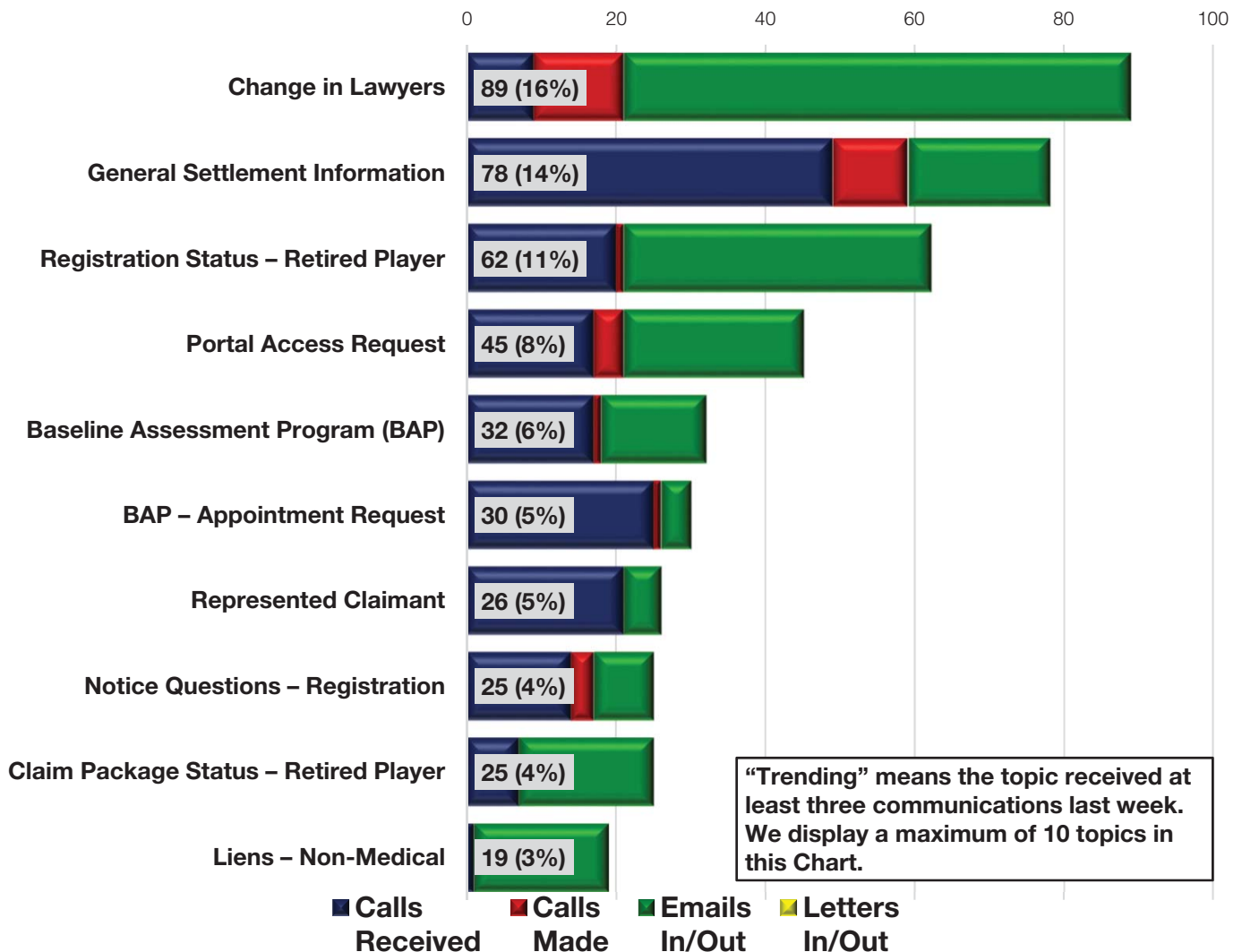


CHART 7: TRENDING COMMUNICATION TOPICS



**NFL****CONCUSSION SETTLEMENT**IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)**Weekly Communications Summary  
(As of 6/5/17)**

	<b>Topic</b>	<b>Total</b>	<b>%</b>
<b>1.</b>	<b>General Support</b>	<b>334</b>	<b>59%</b>
2.	General Settlement Information	78	14%
3.	BAP – Appointment Request	30	5%
4.	Baseline Assessment Program (BAP)	32	6%
5.	Change in Lawyers	89	16%
6.	MAF Physicians	13	2%
7.	Mailing Request(s)	6	1%
8.	Portal Access Request	45	8%
9.	Portal Navigation	13	2%
10.	Represented Claimant	26	5%
11.	Transfer to Firm Contact	1	<1%
12.	Unauthorized Third-Party	1	<1%
<b>13.</b>	<b>Registration Support</b>	<b>118</b>	<b>21%</b>
14.	Registration Process – Retired Player	17	3%
15.	Registration Process – Representative	17	3%
16.	Registration Process – Derivative	1	<1%
17.	Registration Status – Retired Player	62	11%
18.	Registration Status – Representative	15	3%
19.	Registration Status – Derivative	6	1%
<b>20.</b>	<b>Claim Package Support</b>	<b>55</b>	<b>10%</b>
21.	Claim Package Status – Retired Player	25	4%
22.	Claim Package Status – Representative	3	<1%
23.	Claim Package Status – Derivative	1	<1%
24.	Claim Package Submission Process – Retired Player	15	3%
25.	Claim Package Submission Process – Representative	6	1%
26.	Claim Package Submission Process – Derivative	5	<1%
<b>27.</b>	<b>Claims Process</b>	<b>22</b>	<b>4%</b>
28.	Liens – Non-Medical	19	3%
29.	Monetary Award Fund (MAF) Claims	3	<1%
<b>30.</b>	<b>Notice Questions</b>	<b>36</b>	<b>6%</b>
31.	Notice Questions – Registration	25	4%
32.	Notice Questions – MAF	11	2%
<b>33.</b>	<b>TOTAL</b>	<b>565</b>	<b>100%</b>

# Exhibit B



Agreement. I submit this declaration to provide an update to the Court on the status of GRG's work.

**BASELINE ASSESSMENT PROGRAM**

3. As the BAP Administrator, GRG is responsible for establishing and maintaining a network of Qualified BAP Providers to provide the specified baseline assessment examinations under the BAP and authorized medical services under the BAP Supplemental Benefits. (ECF No. 6481-1, Settlement Agreement § 5.7(a)(i).) GRG must establish this network of Qualified BAP Providers within ninety days after the Effective Date.

4. Under the Settlement Agreement, the BAP Administrator must select Qualified BAP Providers based on the following criteria:

- a. Education, training, licensing, credentialing, board certification, and insurance coverage;
- b. Ability to provide the specified baseline assessment examinations under the BAP;
- c. Ability to provide medical services under the BAP Supplemental Benefits;
- d. Ability to provide all required examinations and services in a timely manner;
- e. Geographic proximity to Retired NFL Football Players; and
- f. Rate structure and payments terms.

5. The BAP Administrator's selection of all Qualified BAP Providers is subject to written approval of Co-Lead Class Counsel and Counsel for the NFL Parties, each of which has the unconditional right to veto the selection of twenty Qualified BAP Providers, in addition to the unconditional right to veto the selection of any Qualified BAP Provider who has served or is serving as a litigation expert consultant or expert witness for a party or his, her or its counsel in connection with litigation relating to the subject matter of the Class Action Complaint since July 1, 2011.

6. In order to ensure that the network of Qualified BAP Providers was established in sufficient time to administer the BAP by the June 6, 2017 commencement date, GRG established an enrollment process that consisted of the following steps:

- a. Identification of suitable Qualified BAP Provider candidates, based on the criteria listed above;
- b. Initial contact with key decision makers in key provider organizations employing such Qualified BAP Provider candidates;
- c. Securing applications from Qualified BAP Provider candidates;
- d. Reviewing the credentials of Qualified BAP Provider candidates who have applied for participation in the BAP, including verification of state licensing and board certification, criminal and civil background checks, and review of Qualified BAP Provider candidates' answers to questions related to work as an expert witness and medical consultant;
- e. Submitting Qualified BAP Provider candidates to Co-Lead Class Counsel and Counsel for the NFL Parties for approval or veto in accordance with Section 5.7(a)(i) of the Settlement Agreement; and
- f. Contracting with approved Qualified BAP Provider candidates for enrollment in the Qualified BAP Provider network.

7. GRG has made significant progress in creating a robust, nationwide provider network. In order to plan for appropriate coverage, GRG analyzed preliminary ZIP-code-level data provided by the Claims Administrator to estimate the relative distribution of Retired NFL Football Players across the country. This analysis showed that by targeting its efforts toward fifty-three cities (comprising the fifty largest metropolitan statistical areas in the United States, plus Anchorage, Alaska; Honolulu, Hawaii; and Green Bay, Wisconsin), GRG would be able to effect coverage of seventy-eight percent of potential Settlement Class Members within fifty miles of one of the fifty-three target cities, eighty-five percent within 100 miles, and ninety-seven percent within 200 miles. This analysis also has enabled GRG to estimate the relative number of Qualified BAP Providers needed in each city.

8. GRG has identified key provider organizations with board-certified neurologists and ABPP- and ABCN-certified clinical neuropsychologists meeting the above criteria to serve as Qualified BAP Providers in each of the fifty-three target cities. GRG also has identified additional Qualified BAP Provider candidates outside the key provider organizations in order to ensure adequate network capacity for the forecasted level of participation in the BAP. As of June 5, 2017, GRG had secured applications for participation in the BAP from 485 board-certified neurologists and ABPP- or ABCN-certified clinical neuropsychologists, including clinical neuropsychologists in all fifty-three target cities and neurologists in fifty-two of fifty-three target cities (GRG is still pursuing a neurologist for participation in Anchorage, Alaska). Furthermore, as of June 5, 2017, GRG had engaged in contract negotiations with 371 potential Qualified BAP Providers and had contracted with 141 Qualified BAP Providers, including in 42 of the 53 target cities in or near where the majority of the living Retired NFL Football Players reside. GRG is continuing its efforts to enroll Qualified BAP Providers in the remaining target cities.

9. In addition to its efforts to establish the network of Qualified BAP Providers, GRG has worked to ensure the best possible experience for Settlement Class Members as they utilize their BAP benefits. Key elements of these efforts include:

- a. Coordination with the Claims Administrator to ensure Settlement Class Members can access benefits information and interact with the Claims Administrator and BAP Administrator via a simple, uniform, and secure online portal;
- b. Creation of a process for the Claims Administrator to securely transmit the Settlement Class Member identifying information necessary to schedule and administer baseline assessment examinations as soon as the Claims Administrator determines that a given Settlement Class Member is eligible to participate in the BAP;
- c. Development of an easy-to-understand process for requesting scheduling of the two baseline assessment examinations with Qualified BAP



Providers;

- d. Design and configuration of GRG's secure web portal for Settlement Class Members to request baseline assessment examinations and review BAP-related documents; and
- e. Design and configuration of GRG's secure web portal for Qualified BAP Providers to report the results of each baseline assessment examination and upload program-related documentation, including Diagnosing Physician Certifications and supporting medical records.

### **HEALTHCARE LIEN RESOLUTION**

10. The Settlement Agreement charges GRG, as the Lien Resolution Administrator, with the following responsibilities, among others:

- a. Administering the process for the identification and satisfaction of all applicable Liens, as set forth in Section 11.3 (ECF No. 6481-1, Settlement Agreement § 11.1(b)), which includes:
  - i. Fulfilling all state and federal reporting obligations (*id.* § 11.3(c)(iii));
  - ii. "Satisfy[ing] Lien amounts owed to a Governmental Payor or, to the extent identified by the Class Member pursuant to Section 11.3(a), Medicare Part C or Part D Program sponsor for medical items, services, and/or prescription drugs" (*id.* § 11.3(c)(iv)); and
  - iii. "Transmit[ting] all information received from any Governmental Payor or Medicare Part C or Part D Program sponsor pursuant to such authorizations (i) to the NFL Parties, Claims Administrator, and/or Special Master solely for purposes of verifying compliance with the MSP Laws or other similar reporting obligations and for verifying satisfaction and full discharge of all such Liens" (*id.* § 11.3(c)(v)).

11. As set forth below, GRG has made significant progress in fulfilling its duties and responsibilities under the Settlement Agreement for the benefit of Settlement Class Members. GRG has already reached agreements with the Centers for Medicare and Medicaid Services ("CMS") that establish defined parameters for satisfying and discharging CMS' Medicare Part A and/or Part B fee-for-service Medicare Secondary Payer ("MSP") recovery claims, protect Retired NFL Football Players' future Medicare benefits, and ensure equitable repayment

amounts. In addition, GRG is making great strides in establishing uniform and efficient processes to identify and resolve healthcare Liens and reimbursement claims that may be associated with a Settlement Class Member's settlement award through coordination with other entities, such as the individual state Medicaid agencies and other healthcare payors and providers.

### **Medicare Part A & Part B Resolution**

12. With respect to Medicare Part A and Part B, the Settlement Agreement provides, among other things, that the Lien Resolution Administrator shall undertake to obtain an agreement in writing with CMS that “[e]stablishes a global repayment amount per Qualifying Diagnosis and/or for all or certain Qualifying Diagnoses for Settlement Class Members who are or were beneficiaries of the Medicare Program, or, alternatively, otherwise sets forth a conditional payment resolution process.” (*Id.* § 11.3(c)(ii)(1).) To this end, GRG has obtained CMS’ agreement to globally resolve its Medicare Part A and/or Part B fee-for-service MSP recovery claims for certain Qualifying Diagnoses, to individually resolve those claims for the rest of the Qualifying Diagnoses, and to not assert a recovery claim against the BAP Fund or the Education Fund.

13. More specifically, CMS has agreed to a global resolution methodology and associated fixed global repayment values to satisfy Medicare’s Part A and/or Part B fee-for-service MSP recovery claims associated with Medicare-entitled Settlement Class Members who receive Monetary Awards for a Qualifying Diagnosis of Level 1.5 Neurocognitive Impairment and/or Level 2 Neurocognitive Impairment. The global repayment values are based on the clinical guidelines for the routine standard of care associated with the applicable Qualifying Diagnosis. Global resolution programs are proven to deliver numerous practical benefits to Settlement Class Members. These benefits include, among others, (1) ensuring similarly situated

Settlement Class Members achieve similar outcomes and fair repayment amounts, (2) ensuring compliance with federal Medicare statutes and regulations, (3) avoiding disbursement delays normally associated with pulling and auditing Medicare's conditional payments on a case-by-case basis, and (4) ensuring that Medicare will not deny Settlement Class Members coverage for any future medical expenses they might incur in connection with the relevant Qualifying Diagnoses.

14. With respect to Medicare-entitled Settlement Class Members who receive a Monetary Award in connection with a Qualifying Diagnosis of Alzheimer's Disease, Parkinson's disease, Death with Chronic Traumatic Encephalopathy, or Amyotrophic Lateral Sclerosis (also known as Lou Gehrig's Disease), CMS has agreed to resolve its MSP recovery claims through an individual expenditure-based process. Under this process, GRG will secure claims from the Medicare Program on an individual basis to identify the exact amounts the Medicare Program has paid on behalf of a Settlement Class Member. GRG will then audit each claim to ensure that only medical expenses related to the compensable injury from the date of injury through the date of settlement are included in the repayment obligation. In an effort to optimize the outcome for Settlement Class Members whose Medicare reimbursement obligations GRG will resolve through this expenditure-based process, GRG has established procedures designed to reduce time delays to the extent possible and to ensure a detailed review of all cases to achieve reductions where appropriate.

15. Finally, GRG has secured CMS' agreement to not assert an MSP recovery claim in connection with Monetary Awards of Retired NFL Football Players where the Retired NFL Football Player's last Eligible Season ended prior to December 5, 1980.<sup>2</sup> CMS has further

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<sup>2</sup> This determination was made in consideration of CMS' August 19, 2014 policy memo.

agreed to not separately assert an MSP recovery claim against Medicare-entitled Derivative Claimants who receive a Derivative Claimant Award so long as the amount of the Derivative Claimant Award is still included in the gross Monetary Award amount for purposes of resolving CMS' MSP recovery claim for the associated Retired NFL Football Player.

### **Medicaid Resolution**

16. With respect to state Medicaid reimbursement obligations, GRG has reached standard protocol agreements with forty-five of the fifty-two Medicaid agencies it asked to enter into such agreements. The purpose of these agreements is to establish a framework for resolving the agencies' recovery claims through an expenditure-based review process with terms designed to deliver significant advantages to Settlement Class Members that will maximize Settlement Class Members' net recovery.<sup>3</sup> GRG's standard protocol agreements include a term providing that the amount of each Medicaid agency's recovery claim against a Settlement Class Member will not exceed a specified percentage of the Settlement Class Member's gross settlement award (the "Holdback Amount"). In addition, GRG's protocol agreements include a term providing that each Medicaid agency will automatically reduce the agency's final recovery claim by a specified percentage (the "Offset").

17. Pursuant to its protocol agreement, GRG will first verify whether a Settlement Class Member was a beneficiary of the Medicaid Program in a given state. If the Settlement Class Member was not a beneficiary of that state's Medicaid Program, GRG will inform the Claims Administrator that no amount needs to be withheld from the Settlement Class Member's gross settlement award to satisfy a reimbursement obligation to that state's Medicaid agency. If

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<sup>3</sup> The Lien Resolution Administrator pursued standard protocol agreements with only fifty-two of the fifty-four Medicaid agencies based on historical claim volumes. If any Settlement Class Members are recipients of Medicaid benefits in Guam or the Virgin Islands, resolution of any Lien obligations will be performed on an individual basis.

the Settlement Class Member was a beneficiary, then GRG will ask the Claims Administrator to withhold the Holdback Amount. Since the Holdback Amount is the maximum amount a Medicaid agency can recover, funds in excess of the Holdback Amount can be disbursed to the Settlement Class Member (subject to holdback amounts established for other Lien types, if applicable to the Settlement Class Member) before the Medicaid lien resolution process is finished, allowing the Settlement Class Member to receive his or her funds earlier than he or she would if GRG's protocol agreement were not in place.

18. For those Settlement Class Members who received Medicaid benefits, the Medicaid agency will provide GRG with the itemized claims for which the Medicaid agency is seeking repayment. GRG will then conduct an audit of those claims to ensure that only medical expenses related to the applicable Qualifying Diagnosis or Qualifying Diagnoses are included in the Medicaid agency's recovery claim. Once a final claim amount is established, GRG will apply the Offset to that amount and will compare the result with the Holdback Amount. A Settlement Class Member's final reimbursement amount will be the lesser of the Holdback Amount or the final claim amount after applying the Offset. GRG will facilitate the satisfaction of the Medicaid agency's interest by ensuring that payment of the final reimbursement amount for the Settlement Class Member is made from the Settlement Class Member's gross settlement award.

19. In addition to the forty-five Medicaid agencies with whom GRG has protocol agreements in place to date, two other Medicaid agencies are subject to statutory limits on their recovery. Thus, at present, there are forty-seven Medicaid agencies with established caps on their recovery claims.


20. Finally, GRG has secured an agreement with twenty-two Medicaid agencies to not assert a recovery claim against Derivative Claimant Awards. Three Medicaid agencies

rejected the agreement, and GRG is continuing its discussions with the remaining twenty-seven Medicaid agencies.

THE DECLARANT SAYS NOTHING FURTHER.

I, Matthew L. Garretson, declare under penalty of perjury pursuant to 28 U.S.C. § 1746 that the foregoing is true and correct.

Executed on this 14th day of June, 2017.

  
Matthew L. Garretson