

**If you purchased or were enrolled in a  
Blue Cross or Blue Shield health insurance or  
administrative services plan between 2008 and 2020,  
a \$2.67 billion Settlement may affect your rights**

*Para una notificación en español, visite [www.BCBSsettlement.com/espanol](http://www.BCBSsettlement.com/espanol)*

*A federal court authorized this Notice. This is not a solicitation from a lawyer.*

- Class Representatives (“Plaintiffs”) and the Blue Cross Blue Shield Association (“BCBSA”) and Settling Individual Blue Plans reached a Settlement in a class action antitrust lawsuit called *In re: Blue Cross Blue Shield Antitrust Litigation MDL 2406*, N.D. Ala. Master File No. 2:13-cv-20000-RDP (the “Settlement”).<sup>1</sup> BCBSA and Settling Individual Blue Plans are called “Settling Defendants.”
- Plaintiffs allege that Settling Defendants violated antitrust laws by entering into an agreement not to compete with each other and to limit competition among themselves in selling health insurance and administrative services for health insurance.
- Settling Defendants deny all allegations of wrongdoing and assert that their conduct results in lower healthcare costs and greater access to care for their customers.
- The Court has not decided who is right or wrong. Instead, Plaintiffs and Settling Defendants have agreed to a Settlement to avoid the risk and cost of further litigation.
- The Court certified two Settlement Classes in this case—a Damages Class and an Injunctive Relief Class. These Classes are further defined in Question 5.
- If approved by the Court, the Settlement will establish a **\$2.67 billion Settlement Fund**. Settling Defendants will also agree to make changes in the way they do business that will increase the opportunities for competition in the market for health insurance.
- Your legal rights are affected whether you act or do not act. Please read this Notice carefully.

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<sup>1</sup> All capitalized terms used in this Notice shall have the same meaning as provided for in the Settlement Agreement, unless stated otherwise.

## YOUR LEGAL RIGHTS AND OPTIONS IN THIS SETTLEMENT

<b>FILE A CLAIM (DAMAGES CLASS ONLY)</b>	<ul style="list-style-type: none"> <li>• File a claim for payment online or by mail.</li> <li>• Be bound by the Settlement.</li> <li>• Give up your right to sue or continue to sue Settling Defendants for the claims in this case.</li> </ul>	Submitted online or postmarked by <b>November 5, 2021</b>
<b>ASK TO BE EXCLUDED (“OPT OUT”) (DAMAGES CLASS ONLY)</b>	<ul style="list-style-type: none"> <li>• Remove yourself from the Class.</li> <li>• Receive no payment.</li> <li>• Keep your right to sue or continue to sue Settling Defendants for the claims in this case.</li> </ul>	Postmarked by <b>July 28, 2021</b>
<b>OBJECT</b>	<ul style="list-style-type: none"> <li>• Write to the Court about why you do not like the Settlement.</li> </ul>	Postmarked by <b>July 28, 2021</b>
<b>ATTEND THE HEARING</b>	<ul style="list-style-type: none"> <li>• Ask to speak to the Court about the fairness of the Settlement.</li> </ul>	<b>October 20, 2021 at 10:00 a.m. Central Time</b>
<b>DO NOTHING</b>	<ul style="list-style-type: none"> <li>• Receive no payment</li> <li>• Be bound by the Settlement.</li> <li>• Give up your right to sue or continue to sue Settling Defendants for the claims in this case.</li> </ul>	

- These rights and options—**and the deadlines to exercise them**—are explained in this Notice. The deadlines may be changed, so please check the Settlement Website, [www.BCBSsettlement.com](http://www.BCBSsettlement.com), for updates and further details.
- The Court in charge of this case still has to decide whether to approve the Settlement. Payments will be made if the Court approves the Settlement and after any appeals are resolved. Please be patient.

Questions? Visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or call toll-free at (888) 681-1142

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## BASIC INFORMATION

### 1. Why was this Notice issued?

The Court authorized this Notice because you have a right to know about the proposed Settlement of certain claims against Settling Defendants in this class action lawsuit and about your options before the Court decides whether to approve the Settlement. If the Court approves the Settlement, and after objections and appeals are resolved, you will be bound by the judgment and terms of the Settlement. This Notice explains the lawsuit, the Settlement, and your legal rights and options, and the deadlines for you to exercise your rights.

### 2. What is this lawsuit about?

This class action is called *In re: Blue Cross Blue Shield Antitrust Litigation MDL 2406*, N.D. Ala., Master File No. 2:13-cv-20000-RDP and is pending in the United States District Court for the Northern District of Alabama Southern Division. U.S. District Court Judge R. David Proctor is overseeing this class action.

Plaintiffs allege that Settling Defendants violated antitrust laws by entering into an agreement where the Settling Defendants agreed not to compete with each other in selling health insurance and administration of Commercial Health Benefit Products in the United States and Puerto Rico, as well as agreeing to other means of limiting competition in the market for health insurance and administration of Commercial Health Benefit Products. Settling Defendants deny all allegations of wrongdoing. They assert that their conduct results in lower healthcare costs and greater access to care for their customers. The Court has not decided who is right or wrong. Instead, Plaintiffs and Settling Defendants have agreed to a Settlement to avoid the risk and cost of further litigation.

### 3. What is a class action, and who is involved?

In a class action lawsuit, one or more people or businesses called class representatives sue on behalf of others who have similar claims. All of the people or businesses who have similar claims together are a “class” or “class members” if the class is certified by the Court. Individual class members do not have to file a lawsuit to participate in the class action settlement or be bound by the judgment in the class action. One court resolves the issues for everyone in the class, except for those who exclude themselves from the class.

### 4. Why is there a Settlement?

The Court did not decide in favor of the Plaintiffs or Settling Defendants. Instead, both sides have agreed to the Settlement. Both sides<sup>3</sup> want to avoid the risk and cost of further litigation. The Plaintiffs and their attorneys think the Settlement is best for the Settlement Classes.

## WHO IS IN THE SETTLEMENT CLASSES?

### 5. Am I part of the Settlement Classes?

The Court certified two Settlement Classes in this case—a Damages Class and an Injunctive Relief Class.

- The Damages Class includes all **Individuals**, **Insured Groups**<sup>2</sup> (and their employees), and **Self-Funded Accounts**<sup>3</sup> (and their employees), that purchased, were covered by, or were enrolled in a Blue-

<sup>2</sup> Insured Groups include both employers and other groups (e.g., Taft-Hartley plans, multi-employer welfare arrangements, association health plans, retiree groups, and other non-employer groups).

<sup>3</sup> Self-Funded Accounts include both employers and other groups (e.g., Taft-Hartley plans, multi-employer welfare arrangements, association health plans, retiree groups, and other non-employer groups).

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Branded Commercial Health Benefit Product<sup>4</sup> sold, underwritten, insured, administered, or issued by any Settling Individual Blue Plan during the respective class periods. The class period for the fully insured **Individuals** and **Insured Groups** (and their employees) is from February 7, 2008, through October 16, 2020 (“Settlement Class Period”). The class period for the **Self-Funded Accounts** (and their employees) is from September 1, 2015 through October 16, 2020 (“Self-Funded Settlement Class Period”). Dependents, beneficiaries (including minors), and non-employees are **NOT** included in the Damages Class.

**Self-Funded Accounts** encompass any account, employer, health benefit plan, ERISA plan, non-ERISA plan, or group, including all sponsors, administrators, fiduciaries, and Members thereof, that purchased, were covered by, participated in, or were enrolled in a Self-Funded Health Benefit Plan during the Self-Funded Settlement Class Period. A Self-Funded Health Benefit Plan is any Commercial Health Benefit Product other than Commercial Health Insurance, including administrative services only (“ASO”) contracts or accounts, administrative services contracts or accounts (“ASC”), and jointly administered administrative services contracts or accounts (“JAA”).

For associational entities (e.g., trade associations, unions, etc.), the Self-Funded Account includes any member entity which was covered by, enrolled in, or included in the associational entity’s Blue-Branded Commercial Health Benefit Product. A Self-Funded Account that purchased a Blue-Branded Self-Funded Health Benefit Plan and Blue-Branded stop-loss coverage remains a Self-Funded Account.

Excluded from the Damages Class are:

- Government Accounts<sup>5</sup>;
  - Medicare and Medicaid Accounts;
  - Settling Defendants themselves, and any parent or subsidiary of any Settling Defendant (and their covered or enrolled employees);
  - Individuals or entities that file an exclusion or opt out from the Settlement; and
  - The judge presiding over this matter, and any members of his judicial staff, to the extent such staff were covered by a Commercial Health Benefit Product not purchased by a Government Account during the Settlement Class Period.
- The Injunctive Relief Class includes all **Individuals, Insured Groups, Self-Funded Accounts, and Members** that purchased, were covered by, or were enrolled in a Blue-Branded Commercial Health Benefit Product sold, underwritten, insured, administered, or issued by any Settling Individual Blue Plan during the applicable Settlement Class Period. Dependents, beneficiaries (including minors), and non-employees are included in the Injunctive Relief Class.

## 6. I am still not sure if I am included.

If you are still not sure if you are included in the Settlement Classes, please review the detailed information contained in the Settlement Agreement, available for download at [www.BCBSsettlement.com](http://www.BCBSsettlement.com). You may also contact the Claims Administrator at [info@BCBSsettlement.com](mailto:info@BCBSsettlement.com) or call toll-free at (888) 681-1142.

<sup>4</sup> Unless the person’s or entity’s only Blue-Branded Commercial Health Benefit Product during the class periods was a stand-alone vision or dental product.

<sup>5</sup> Additional information about Government Accounts is in the Settlement Agreement.

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## SETTLEMENT BENEFITS

### 7. What does the Settlement provide?

The Settlement provides monetary payments to Damages Class Members who submit a valid claim by **November 5, 2021**. Settling Defendants also agreed to make changes in the way they do business to increase the opportunities for competition in the market for health insurance (“injunctive relief”) that benefits Injunctive Relief Class Members. You may be included in both Settlement Classes.

If the Court approves the Settlement, in exchange for Class Members’ release of the Released Claims, a \$2.67 billion Gross Settlement Fund will be established. The money remaining in the Settlement Fund, after paying the Attorneys’ Fee and Expense Awards not to exceed \$667.5 million and the Notice and Settlement Administration costs of \$100 million, is called the “Net Settlement Fund.” The Net Settlement Fund is estimated to be approximately \$1.9 billion and will be distributed to Damages Class Members. This Net Settlement Fund will be split as described below:

#### **Monetary Damages:**

- 93.5% of the Net Settlement Fund (approximately \$1.78 billion) will be allocated to the Fully Insured (FI) Class Members as a “FI Net Settlement Fund.” The FI Net Settlement Fund will be distributed to **FI Authorized Claimants**, which include:
  - Individuals (“FI Individual Policyholders”);
  - Insured Groups (“FI Groups”); and
  - Insured Group Employees (“FI Employees”)who submit a valid claim by **November 5, 2021**.
- The remaining 6.5% of the Net Settlement Fund (approximately \$120 million) will be set up as a “Self-Funded Net Settlement Fund.” The Self-Funded Net Settlement Fund will be distributed to **Self-Funded Authorized Claimants**, which include:
  - Self-Funded Accounts (“Self-Funded Groups”); and
  - Self-Funded Account Employees (“Self-Funded Employees”)who submit a valid claim by **November 5, 2021**.
- The FI Net Settlement Fund and Self-Funded Net Settlement Fund are separate funds for FI Authorized and Self-Funded Authorized Claimants, respectively. If the claim rate is lower in one fund than the other, the payment to the Authorized Claimants will be proportionately increased in that fund only, and not to all Authorized Claimants overall.

#### **Injunctive Relief:**

- Settling Defendants have agreed to make changes in the way they do business that will increase the opportunities for competition in the market for health insurance. As part of the Injunctive Relief (the changes in the way the Settling Defendants do business), a Monitoring Committee will be established for five years to mediate any disputes resulting from the implementation of the Injunctive Relief. If the Monitoring Committee Process approves any systems or rules, that information will be included in the Release. It will also be posted in a report of Monitoring Committee Actions on the Settlement Website. Additional information is detailed in the Settlement Agreement, available at [www.BCBSsettlement.com](http://www.BCBSsettlement.com).

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## 8. How much can Damages Class Members get from the Settlement?

Damages Class Members who submit a valid approved claim (“Authorized Claimants”) will receive a payment from either the FI Net Settlement Fund or the Self-Funded Net Settlement Fund, if the Settlement is approved.

### **Distribution of the FI Net Settlement Fund**

**FI Authorized Claimants** qualify for a payment based on the total amount of estimated premiums they paid to the Settling Defendants (“Total Premiums Paid”) during the Settlement Class Period. Payments will be distributed on a proportional basis across all FI Authorized Claimants based on their estimated premiums.

The payment amount (i.e. claim payment) to FI Authorized Claimants will be determined by the following formula:

$$\begin{array}{c} \text{Total Premiums Paid During the Settlement Class Period} \\ \text{by FI Authorized Claimant A} \\ \\ \textit{Divided by} \\ \\ \text{Total Premiums Paid during the Settlement Class Period} \\ \text{by all FI Authorized Claimants who submit claims} \\ \\ \textit{Multiplied by} \\ \\ \text{Total dollars in FI Net Settlement Fund} \\ \\ = \text{Claim payment of FI Claimant A's claim} \end{array}$$

For Example<sup>6</sup>:

$$\begin{array}{c} \$1000 \\ \\ \textit{Divided by} \\ \\ \$10,000,000,000 \\ \\ \textit{Multiplied by} \\ \\ \$1,780,000,000 \\ \\ = \text{\$178} \end{array}$$

**FI Individual Policyholders** – Total Premiums Paid for FI Individual Policyholders will be based on data provided by Settling Defendants. In most cases that data should allow for the calculation of Total Premiums Paid without requiring the FI Authorized Claimant to submit any premium data.

**FI Groups and FI Employees** – Total Premiums Paid for FI Groups and FI Employees will be based on (a) data provided by the Settling Defendants showing the total amount of premiums paid by any FI Group and (b) a process for allocating the Total Premiums Paid between each specific FI Group and any FI Employees of that FI Group who submit a claim.

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<sup>6</sup> These numbers are provided **for example only**. The numbers do not show actual premiums or an anticipated actual ratio of premiums paid by a Claimant to the Total Premiums Paid by all Claimants.

Because FI Groups and FI Employees typically share the economic burden of premium payments, the Plan of Distribution allocates premiums between the two. When filing a claim, FI Groups and FI Employees may choose a Default or Alternative Option for determining the allocation of Total Premiums Paid between the employer and any employee of that FI group that file a claim. To efficiently process claims, the Plan of Distribution sets a Default allocation as follows: (1) 15% of an employee’s premium for single coverage is deemed to have been paid by the employee (with the remainder to the employer) and (2) 34% of an employee’s premium for family coverage is deemed to have been paid by the employee (with the remainder to the employer). The Alternative option allows the claimant to submit data or records supporting a contribution higher than the Default. The below scenarios are examples of how an estimated premium may be calculated for use in determining a claimant’s proportional share of the FI Net Settlement Fund. In any case where an FI Group makes a claim, it will receive credit for any premiums not otherwise allocated to claiming employees.

IF...	THEN...
<ul style="list-style-type: none"> <li>• FI Group files a claim</li> <li>• No FI Employees for that FI Group file a claim</li> </ul>	<ul style="list-style-type: none"> <li>• FI Group’s share will be calculated from full premium paid by that FI Group</li> </ul>
<ul style="list-style-type: none"> <li>• FI Group files a claim and accepts Default option</li> <li>• One or more of its FI Employees files a claim and accepts Default option</li> </ul>	<ul style="list-style-type: none"> <li>• For each claiming FI Employee, the Default % will be used to calculate their premiums paid, with remainder allocated to FI Group</li> </ul>
<ul style="list-style-type: none"> <li>• FI Group files a claim and selects Alternative Option and provides relevant data or records to support a contribution % higher than the Default %</li> <li>• FI Employee files a claim</li> </ul>	<ul style="list-style-type: none"> <li>• Allocation between the FI Group and claiming FI Employees will be based on the relevant data or materials provided by each (dependent on a review process)</li> </ul>
<ul style="list-style-type: none"> <li>• FI Group files a claim and accepts Default option</li> <li>• One or more FI Employees for that FI Group files a claim and selects the Alternative Option</li> <li>• One or more FI Employees for that FI Group files a claim and accepts Default option</li> </ul>	<ul style="list-style-type: none"> <li>• Allocation between the FI Employees who select the Alternative Option and for the related FI Group with regard to these employees will be based on the relevant data or materials provided by each (dependent on a review process)</li> <li>• Default % will be used to calculate premiums for the claimants who accept the Default option</li> </ul>
<ul style="list-style-type: none"> <li>• FI Employee files a claim and does not select the Alternative Option</li> <li>• FI Group(s) does not file a claim</li> </ul>	<ul style="list-style-type: none"> <li>• The FI Employee’s premium will be calculated based on the Default % as seen above</li> </ul>
<ul style="list-style-type: none"> <li>• FI Employee files a claim and selects the Alternative Option and provides relevant data or records to support a contribution % higher than the Default %</li> <li>• FI Group(s) does not file a claim</li> </ul>	<ul style="list-style-type: none"> <li>• The FI Employee will receive an allocation based on the relevant data or materials he or she provides (dependent on a review process)</li> </ul>

**Employer Groups:** Purchasing Entities and Covered Entities are both eligible to file a claim.<sup>7</sup>

<sup>7</sup> Information about the plan of allocation for Employer Groups can be found in the Plan of Distribution.

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## **Distribution of Self-Funded Net Settlement Fund**

**Self-Funded Authorized Claimants** are eligible for compensation for Total Self-Funded Fees Paid to the Settling Defendants during the Self-Funded Settlement Class Period. Payments will be distributed on a proportional basis across all Self-Funded Authorized Claimants.

The amount of each claim submitted by any given Self-Funded Authorized Claimant will be determined by the following formula:

$$\begin{array}{c} \text{Total Administrative Fees Paid During the Self-Funded Settlement Class} \\ \text{Period} \\ \text{by Self-Funded Claimant B} \\ \\ \textit{Divided by} \\ \\ \text{Total Administrative Fees Paid during the Self-Funded Settlement Class} \\ \text{Period} \\ \text{by all Self-Funded Authorized Claimants who submit claims} \\ \\ \textit{Multiplied by} \\ \\ \text{Total dollars in Self-Funded Net Settlement Fund} \\ \\ = \text{Claim payment of Self-Funded Claimant B's claim} \end{array}$$

Total Administrative Fees Paid will be based upon (a) the data provided by the Settling Defendants showing the total amount of Administrative fees paid by any Self-Funded Group and (b) an allocation process to split the Total Self-Funded Fees Paid between each specific Self-Funded Group and any Self-Funded Employees of that Self-Funded Group who submit claims. The Self-Funded Groups/Employees will have the same opportunity to choose either the Default or Alternative option, as outlined in the chart on page 8 for the FI Group and FI Employees.

The Self-Funded Default Option allocation is: (1) 18% of an employee's administrative fee for single coverage is deemed to have been paid by the employee (with the remainder to the employer); and (2) 25% of an employee's administrative fee for family coverage is deemed to have been paid by the employee (with the remainder to the employer). The Alternative option allows the claimant to submit data or records supporting a contribution higher than the Default.

### **Minimum Claim Payment**

If the total payment for any Damages Class Member is equal to or less than \$5.00 ("minimum claim payment"), no payment will be made to the Damages Class Member. The claimant will be notified that there will be no distribution given the minimum claim payment.

No distributions will be made until there is a final resolution of all determinations and disputes that could potentially impact the Claims Payments.

### **Claimant Review**

Authorized Claimants will be able to review the Total Premiums Paid and/or Total Administrative Fees Paid used to calculate their award before the distribution of the Net Settlement Fund. If an Authorized Claimant disagrees with their Total Premiums Paid and/or Total Administrative Fees, they must provide the necessary documentation to support the amount they believe it should be. The Claims Administrator will review any data

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submitted and determine whether to change the Total Premiums Paid and/or Total Administrative Fees for that Authorized Claimant.

## 9. How do I get a Payment?

To make a claim and receive a payment, you must file a claim form online or by mail postmarked **November 5, 2021**. Claims may be submitted online at [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or by mail to:

Blue Cross Blue Shield Settlement  
c/o JND Legal Administration  
PO Box 91390  
Seattle, WA 98111

If you select the Alternative Option, you must submit relevant data or records showing a higher contribution percentage. Otherwise the Default Option will be used. Instructions for submitting your claim are on the claim form and on the Settlement Website. When required, sufficient documentation shall include an attestation signed under penalty of perjury when other documentation is no longer available.

## 10. What am I giving up by staying in the Settlement Classes?

Unless you exclude yourself, you remain in the Settlement Classes. This means that you cannot sue, continue to sue, or be part of any other lawsuit against Settling Defendants that makes claims based on the facts and legal theories involved in this case or any of the business practices the Settling Defendants adopt pursuant to the Settlement Agreement. It also means that all of the Court's orders will apply to you and legally bind you. The Released Claims are detailed in the Settlement Agreement, available at [www.BCBSsettlement.com](http://www.BCBSsettlement.com). For purposes of clarity, if a Self-Funded Account that opts out meets the criteria to request a Second Blue Bid under the terms of the Settlement Agreement, that Self-Funded Account does not release any claims for declaratory or injunctive relief to request a Second Blue Bid during any time it meets the criteria to request such a bid under the terms of the Settlement Agreement. All other claims for declaratory or injunctive relief released under the Settlement Agreement are released.

## 11. What happens if I do nothing at all?

If you do nothing, you will remain a member of the Settlement Classes and be bound by the Settlement. However, if you had been entitled to share in the Settlement proceeds, you will not get a payment.

### EXCLUDING YOURSELF FROM THE DAMAGES CLASS

## 12. How do I exclude myself from the Damages Class?

If you are a member of the Damages Class, do not want the monetary benefits, and do not want to be legally bound by the terms of the Settlement, or if you wish to pursue your own separate lawsuit against Settling Defendants, you must exclude yourself from the Damages Class. This requires submitting a written request to the Claims Administrator stating your intent to exclude yourself from the Damages Class (an "Exclusion Request"). Your Exclusion Request must include the following: (a) your name, including the name of your business (if your business purchased health insurance from a Blue Cross or Blue Shield entity during the Class Period for employees), address, and telephone number; (b) a statement that you want to be excluded from the Damages Class in *In re: Blue Cross Blue Shield Antitrust Litigation*; and (c) your personal, physical signature (electronic signatures, including DocuSign, or PDF signatures are not permitted and will not be considered personal signatures). Requests signed solely by your lawyer are not valid. You must mail or email your Exclusion Request, postmarked or received by **July 28, 2021**, to:

Questions? Visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or call toll-free at (888) 681-1142

Blue Cross Blue Shield Settlement  
c/o JND Legal Administration – **Exclusion Dpt.**  
PO Box 91393  
Seattle, WA 98111  
or [info@BCBSsettlement.com](mailto:info@BCBSsettlement.com)

**13. If I do not exclude myself, can I sue Settling Defendants for the same thing later?**

No. Unless you exclude yourself, you give up the right to sue Settling Defendants for any claims that are released by the Settlement Agreement. If you have a current lawsuit against the Settling Defendants, speak to your lawyer in that lawsuit immediately to determine whether you must exclude yourself from the Settlement Classes to continue your own lawsuit against Settling Defendants.

**OBJECTING TO THE SETTLEMENT**

**14. How do I tell the Court that I do not like the Settlement?**

If you are a Settlement Class Member and have not excluded yourself from the Settlement, you can object to the Settlement if you do not like part or all of it. The Court will consider your views.

To object, you must send a letter or other written statement saying that you object to the Settlement in *In re: Blue Cross Blue Shield Antitrust Litigation* and the reasons why you object to the Settlement. This letter must include:

- The name of the Action – *In re: Blue Cross Blue Shield Antitrust Litigation*
- Description of your objections, including any applicable legal authority and any supporting evidence you wish the Court to consider;
- Your full name, address, email address, telephone number, and the plan name under which Blue Cross Blue Shield was provided and dates of such coverage;
- Whether the objection applies only to you, a specific Settlement Class or subset of a Settlement Class, or both Settlement Classes;
- The identity of all counsel who represent you, including former or current counsel who may be entitled to compensation for any reason related to the objection, along with a statement of the number of times in which that counsel has objected to a class action within five years preceding the submission of the objection, the caption of the case for each prior objection, and a copy of any relevant orders addressing the objection;
- Any agreements that relate to the objection or the process of objecting between you, your counsel, and/or any other person or entity;
- Your (and your attorney's) signature on the written objection;
- A statement indicating whether you intend to appear at the Final Fairness Hearing (either personally or through counsel); and
- A declaration under penalty of perjury that the information provided is true and correct.

Do not send your written objection to the Court or the judge. Instead, mail the objection to the Claims Administrator with copies to Co-Lead Counsel and Counsel for Settling Defendants at the addresses listed below.

**Questions? Visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or call toll-free at (888) 681-1142**

Your objection must be postmarked by **July 28, 2021**.

**Claims Administrator:**

Blue Cross Blue Shield Settlement  
c/o JND Legal Administration  
PO Box 91393  
Seattle, WA 98111  
(888) 681-1142

**Plaintiffs' Co-Lead Counsel:**

BLUE CROSS BLUE SHIELD  
SETTLEMENT  
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Washington, DC 20006  
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BCBSsettlement@hausfeld.com

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BLUE CROSS BLUE SHIELD  
SETTLEMENT  
C/O DAVID BOIES  
BOIES SCHILLER FLEXNER LLP  
333 Main Street  
Armonk, NY 10504  
(888) 698-8248  
BCBS-Settlement@bsflp.com

**15. What is the difference between excluding myself and objecting?**

Objecting is telling the Court that you do not like something about the Settlement. You can object only if you do not exclude yourself from the Settlement Classes. Excluding yourself is telling the Court that you do not want to be part of the Settlement Classes or the lawsuit as outlined in Question 12. If you exclude yourself, you are no longer a member of the Settlement Classes and you do not have a right to share in the Settlement's proceeds or to object because the Settlement no longer affects you.

**THE LAWYERS REPRESENTING YOU**

**16. Do I have a lawyer in this case?**

The Court has appointed (1) Michael Hausfeld of Hausfeld LLP and (2) David Boies of Boies Schiller Flexner LLP as Co-Lead Counsel on behalf of the Plaintiffs and Settlement Class Members. Their contact information is provided above in Question 14.

You do not need to hire a lawyer because Co-Lead Counsel is working on your behalf.

If you wish to pursue your own lawsuit separate from this one, or if you exclude yourself from the Settlement Classes, these lawyers will no longer represent you. You will need to hire a lawyer if you wish to pursue your own lawsuit against Settling Defendants.

**17. How will the lawyers be paid?**

Settlement Class Counsel may submit an application(s) to the Court ("Fee and Expense Application") for: (i) an award of attorneys' fees plus (ii) reimbursement of expenses and costs, up to a combined total of 25% of the \$2.67 billion fund (i.e., \$667,500,000) created by the Settlement. This fee will include Self-Funded Class Counsel's application. You will not have to pay any fees or costs.

**Questions? Visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or call toll-free at (888) 681-1142**

## THE COURT'S FAIRNESS HEARING

### 18. When and where will the Court decide whether to approve the Settlement?

The Court will hold a hearing to decide whether to approve the Settlement. You may attend and you may ask to speak, but you do not have to. The Court will hold a Fairness Hearing at **10:00 a.m. Central Time on October 20, 2021**, at the United States District Court for the Northern District of Alabama, Hugo L. Black United States Courthouse, 1729 5<sup>th</sup> Avenue North, Birmingham, Alabama 35203. At this hearing, the Court will consider whether the Settlement is fair, reasonable, and adequate. The Court will also consider whether to approve attorneys' fees and expenses up to \$667.5 million and \$101 million for additional costs and service awards. If there are objections, the Court will consider them. The Court will listen to people who have asked to speak at the hearing. After the hearing, the Court will decide whether to approve the Settlement. We do not know how long these decisions will take.

### 19. Do I have to come to the hearing?

No. Co-Lead Counsel will attend the hearing and answer any questions the Court may have. However, you are welcome to come at your own expense. If you send an objection, you do not have to come to the hearing to talk about it. As long as you mailed your written objection on time, the Court will consider it. You may also pay your own lawyer to attend, but it is not necessary.

### 20. May I speak at the hearing?

You may ask to speak at the Fairness Hearing. To do so, you must send a letter saying that it is your "Notice of Intention to Appear in *In re: Blue Cross Blue Shield Antitrust Litigation*." Be sure to include your name, including the name of your business (if applicable), current mailing address, telephone number, and signature. Your Notice of Intention to Appear must be postmarked by **July 28, 2021**, and it must be sent to the Clerk of the Court, Co-Lead Counsel, and Defense Counsel. The address for the Clerk of the Court is: Clerk of Court, United States District Court for the Northern District of Alabama, Hugo L. Black United States Courthouse, 1729 5<sup>th</sup> Avenue North, Birmingham, Alabama 35203. The addresses for Co-Lead Counsel and Defense Counsel are provided in Question 14. You cannot ask to speak at the hearing if you excluded yourself from the Settlement.

## GETTING MORE INFORMATION

### 21. How do I get more information about the Settlement?

This Notice summarizes the proposed Settlement. More details are in the Settlement Agreement. You can find a copy of the Settlement Agreement, other important documents, and information about the current status of the case by visiting [www.BCBSsettlement.com](http://www.BCBSsettlement.com). You may contact the Claims Administrator at [info@BCBSsettlement.com](mailto:info@BCBSsettlement.com) or toll-free at (888) 681-1142. You may also contact Co-Lead Counsel at the address, phone number, and email address provided in Question 14.

**PLEASE DO NOT CONTACT THE COURT REGARDING THIS NOTICE.**

**Questions? Visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or call toll-free at (888) 681-1142**