

To: [Class Member Email Address]  
From: Blue Cross Blue Shield Claims Administrator (Notice@BCBSsettlement.com)  
Subject: Blue Cross Blue Shield Settlement Notice

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Dear [Class Member Name]:



**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.**

<b>YOUR UNIQUE ID:</b>	
<b>PLEASE SAVE THIS NUMBER TO FILE A CLAIM</b>	

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

You are not being sued. A federal court authorized this notice to you. It affects your rights. Please read it carefully.

On **DATE**, 2020, the Honorable R. David Proctor of the U.S. District Court for the Northern District of Alabama granted preliminary approval of this class action Settlement. The Court directed the parties to send this notice. Blue Cross and/or Blue Shield's records show that you may be a Settlement Class Member. You may be eligible to receive **a payment** from the Settlement in the *In re: Blue Cross Blue Shield Antitrust Litigation MDL 2406*, N.D. Ala. Master File No. 2:13-cv-20000-RDP.

Please visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com) for more information.

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## What is the lawsuit about?

Plaintiffs claim that the Blue Cross Blue Shield Association and Settling Individual Blue Plans (collectively, “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 claims. The Settling Defendants have asserted that their conduct results in lower healthcare costs and greater access to care for their customers. The Court has not decided who is right.

## Who Is affected?

You may be eligible to receive payment if you are an **Individual, Insured Group** (and their employees) or **Self-Funded Account** (and their employees) that purchased or were enrolled in a Blue Cross or Blue Shield health insurance or administrative services plan during one of the two Settlement Class Periods. Government accounts are excluded from the Class.

The Settlement Class Period for **Individuals** and **Insured Groups** is from February 7, 2008, through October 16, 2020. The Settlement Class Period for **Self-Funded Accounts** is from September 1, 2015 through October 16, 2020. Dependents, beneficiaries (including minors), and non-employees are **NOT** eligible to receive payment.

All **Individuals, Insured Groups, and Self-Funded Accounts** that purchased or were enrolled in a Blue Cross or Blue Shield health insurance or administrative services plan during the applicable Class Period will also benefit from the parts of the Settlement requiring Settling Defendants to change certain of their practices that were alleged to be anticompetitive. Dependents, beneficiaries (including minors), and non-employees will benefit from this part of the Settlement.

For more details about who is affected visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com).

## What can you get from the Settlement?

Class Members who submit valid claims may receive a cash payment from the Net Settlement Fund. The Net Settlement Fund is estimated to be approximately \$1.9 billion. This is after deducting attorneys’ fees, administration expenses and other costs from the \$2.67 billion Settlement Fund. For more details on the Plan of Distribution, read the Long Form Notice available at [www.BCBSsettlement.com](http://www.BCBSsettlement.com). You can also call (888) 681-1142. 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.

## How do you get a payment?

You must submit a valid claim online at [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or postmarked by mail no later than **[Month Day, Year]**. Claim Forms are available at [www.BCBSsettlement.com](http://www.BCBSsettlement.com) or may be requested by calling (888) 681-1142.

**FILE A CLAIM**

## What are your other options?

If you do not want to be legally bound by the Settlement, you may send a request for exclusion (“opt out”). You will receive no money, but you will keep your right to sue Settling Defendants for the claims in this case. If you do not exclude yourself, you may object to the Settlement. You will still be bound by the Settlement if your objection is rejected. For details on how to opt out or object, read the Long Form Notice available at [www.BCBSsettlement.com](http://www.BCBSsettlement.com). You can also call (888) 681-1142.

Opt outs and objections must be postmarked by **Month x, 202x**. The Court will hold a Fairness Hearing on **[Month Day, Year] at [Time]**, to consider whether the Settlement is fair, reasonable, and adequate. The Court will also decide whether to approve attorneys’ fees and expenses up to \$667.5 million and \$101 million for additional costs and service awards, which will be deducted from the \$2.67 billion Settlement Fund. You may ask to appear at the Fairness Hearing, on your own behalf or through counsel, but you don’t have to do so.

**Please Do Not Contact The Court Regarding This Notice.**

## Questions?



Visit [www.BCBSsettlement.com](http://www.BCBSsettlement.com), or email [info@BCBSsettlement.com](mailto:info@BCBSsettlement.com),



call (888) 681-1142, or



write *Blue Cross Blue Shield Settlement* c/o JND Legal Administration,  
P.O. Box 91390, Seattle, WA 98111.

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