U.S. ASR HIP SETTLEMENT

U.S. ASR Hip Settlement Alert – 3/12/15

2015 Settlement Enrollment Process

1. Introduction. On March 2, 2015, DePuy and the Settlement Oversight Committee signed the 2015 ASR Settlement Agreement that compensates eligible ASR patients in the United States who had surgery to replace their ASRTM XL Acetabular Hip System or ASRTM Hip Resurfacing System, known as revision surgery, between August 31, 2013, and January 31, 2015 ("2015 Settlement"). To enroll in the 2015 Settlement, represented and unrepresented claimants must submit the Enrollment Form and Required Submissions described in Section 4.1 and Exhibit 4.1.3.1 of the Settlement Agreement on or before May 1, 2015. The Required Submissions for enrollment are: (1) an Enrollment Form; (2) a full valid Release signed by the Product User and any spouse or Legal Representative, if applicable; (3) a Dismissal with Prejudice Stipulation, if the claimant filed an ASR Hip Implant-related lawsuit against DePuy; (4) an Orange Claim Form; (5) a Blue Claim Form; and (6) contemporaneous medical records from ASR Index and ASR Revision Surgeries, including records that identify the device that was implanted in the Product User, the history and physical records, operative reports, and discharge summaries. Product Users, or their attorneys, may submit the required medical records listed in Section 4.1.3.6 up until June 1, 2015. A complete list of Materials Required for Enrollment is available on the Documents page of the U.S. ASR Hip Settlement website.

Product Users who wish to participate in the 2015 Settlement can now begin the enrollment process. **The Enrollment Deadline is May 1, 2015.** Product Users, or their attorneys, must submit their Orange Claim Form, Blue Claim Form, Enrollment Form, Release, and Dismissal with Prejudice Stipulation, if applicable, by May 1, 2015, and must submit the required medical records and product identifying information on or before June 1, 2015.

Enrollment is available through the ASR Portal. The Portal is a secure internet portal that allows a user to exchange information with the Claims Processor, which facilitates an efficient and quick submission of all required Enrollment materials and supporting documentation. It is the most efficient and secure method of communicating with the Claims Processor. The Portal is available to law firms and unrepresented claimants and allows you to monitor the status of your claim at any time and track any deadlines. Product Users who are represented by Counsel do not have access to the Portal and should not submit their own enrollment materials. Instead, the Primary Law Firms will use the Portal to submit enrollment materials for all Product Users they represent.

If you are an unrepresented claimant and need access to the Portal, contact the Claims Processor by email, <u>claimsprocessor@USASRHipSettlement.com</u>, or phone at (877) 391-3169. You also may contact the Claims Processor to request a hard copy version of the Enrollment Packet. If you contact us by email, include your full name, Date of Birth, the last four digits of your Social Security Number, and a telephone number so that we can reach you with any questions or updates.

The online enrollment process on the Portal contains step-by-step instructions for enrollment and allows you to track the progress of your submissions. For Portal users, we will prepopulate the majority of required Enrollment data in the Claim Forms and Release of All Claims from the previously submitted registration data. You can also upload PDFs of supporting documents. This Alert explains how to use the online enrollment process on the Portal.

The Green Claim Form for Extraordinary Injury benefits is not yet ready for use. We will send additional updates when the Green Claim Form materials are available.

2. *Damages Calculator.* The Claims Processor prepared a Damages Calculator as a tool to help claimants and law firms calculate a Product User's potential PART A Base Award. This Damages Calculator is for informational purposes only and is not a requirement for the registration or enrollment phases of the Settlement Program. The Damages Calculator is available on the News and Development page of the U.S. ASR Hip Settlement website.

The amount calculated by this Damages Calculator is a representation of your PART A Base Award based on the information provided within this hypothetical tool. It is not binding on the Claims Processor and will not influence the Claims Processor's final PART A Base Award determination. The Claims Processor will not reference this Damages Calculator when determining a Product User's PART A Base Award. The Claims Processor will use the medical documents, other required proof, and Article 7 of the Settlement Agreement to determine the Product User's PART A Base Award.

- **3.** *Enrollment and Settlement Selection.* If a Product User has never enrolled in either Settlement, you must select the Settlement under which you will submit Enrollment Materials on the Claimant Details page in the Enrollment process.
 - (a) You may select the 2013 Settlement, the 2015 Settlement, or Both. If the Product User seeks compensation under both Settlements, you must submit a full Claims Package under each Settlement. If you previously enrolled the Product User under the 2013 Settlement, you will only have the option to select the 2015 Settlement option.

The image below shows the Settlement Selection page for a Product User that has never enrolled in either Settlement. If you have already enrolled the Product User in one or both settlements, the Settlement Selection buttons may be unavailable.

Home	Claimant Details		
Firm Administration	<< Back		
Registration	Settlement Selection		
Enrollment	You chose to Enroll Jane Jones, ASR ID: 325. You must select the Settlement under which you will submit Enrollment Materials.		
Notices	Settlement Agreement, executed on November 19, 2013, covers Product Users who had at least one U.S. ASR Hip Device revised on or before August 31, 2013. The second Settlement Agreement, executed on March 2, 2015, covers Product Users who had at least one U.S. ASR Hip Device		
EIF Claim Activity	must submit a full Claims Package for each Settlement from which the Product User seeks compensation.		
Change Password / Email	If you will submit Enrollment Materials for Jane Jones under the 2013 Settlement Agreement only, then click the 2013 Settlement Agreement button and scroll down to begin the Enrollment process. If you will submit Enrollment Materials for Jane Jones under the 2015 Settlement Agreement only, then click the 2015 Settlement Agreement button and scroll down to begin the Enrollment process. If you will submit Enrollment Materials for Jane Jones urder both Settlement Agreements, click the Both button and scroll down to begin the Enrollment process.		
Log Off			
	2013 Settlement Agreement 2015 Settlement Agreement Both		
	Product User's Demographic Information		
	Begin		
	ASR ID: 325 Name: * Jones Jane MI		

(b) If you click the button to enroll under both Settlement Agreements, there will be a dropdown menu above the Enrollment Process that will allow you to switch between the two Settlements after you save one or more forms. Note that the drop-down menu and Enrollment Process banner will indicate whether you are completing the 2013 Settlement Enrollment Process or the 2015 Settlement Enrollment Process.

Choose which Settlement Agreement you wish to sult the Product User's Demographic Information and ther by navigating to this dropdown menu and selecting the	omit Enrollment Materials under and then begin the Start in Step 1. You may switch between the Settle e other Settlement.	e Enrollment Process by clicking Begin in ments after you save one or more forms
View Documents	2013 Settlement Agreement	Registration Information
20	13 Settlement Enrollment Process	
Orange Form (Part A Base Award) - Not Y Use this form to start the Enrollment Process. T	et Started This form is mandatory.	Start

(c) To begin enrolling, you must click the Begin button in the Product User's Demographic Information section.

	Product User's Demographic Information
	Begin
ASR ID:	85
Name:	Smith John IV
Date of Birth:	12/15/1980
Social Security Number:	123 - 45 - 7890
Gender:	○ Male ○ Female
Telephone:	
Current Address 1:	
Address 2:	
City:	Henrico State: TX ZIP Code:
Date Began Residing at this Address:	Select this box if you have resided at the same address since the date of your ASR Index Surgery
Was the Product User a citizen or legal re- Index	ident of the United States at the time of the Ores ONO Surgery to implant the ASR Hip Implant(s)?
Any other names used or by which th	e Product User has been known, including but not limited to Maiden Name?

(d) After confirming the Product User Demographic Information, click the Start button in Step 1 of the Enrollment Process to complete the Required Submissions.

Choose which Settlement Agreement you wish to submit Enrollment Materials under and then begin the Enrollment Process by clicking Begin in the Product User's Demographic Information and then Start in Step 1. You may switch between the Settlements after you save one or more forms by navigating to this dropdown menu and selecting the other Settlement. 2015 Settlement Agreement V View Documents Status Glossary 2015 Settlement Enrollment Process 1. Orange Form (Part A Base Award) - Not Yet Started Use this form to start the Enrollment Process. This form is mandatory.

- **4.** *Submit the Required Submissions.* Follow these steps to confirm that you have uploaded all of the Required Submissions and are ready to submit them to the Claims Processor for review.
 - (a) On the Enrollment Process screen for the relevant ASR ID, click the Submit Required Submissions button next to Step Nine.

9. Submit Required Submissions and Enrollment Form To submit your Required Submissions and sign the Enrollment Form, select the Submit Required Submissions button. The Claims Processor will provide you with a list of documents you have submitted to date. You will then have the opportunity to sign the Enrollment Form electronically, which will notify the Claims Processor that you wish to Enroll in the U.S. ASR Hip Settlement Program.

Submit Required Submissions

(b) The Uploaded Documents screen appears so you can review the list of documents and confirm that you have uploaded all of the Required Submissions.

Uploaded Documents

The documents you have submitted for Enrollment appear below. If you categorized your document submissions using the Upload feature in Step 8 (Supporting Documents), all documents will appear as Uploaded. If you did not utilize the Upload feature to identify your supporting medical documents, the documents will appear as Not Uploaded. Pursuant to Sections 4.1.3.5 through 4.1.3.7 of the Settlement Agreement, you must produce all medical records pertaining to any ASR Index or Revision Surgeries in your possession. Carefully review the list below to make sure that you have submitted the Required Submissions and that you wish to Enroll.

Uploaded	Orange Form
Uploaded	Blue Form
Uploaded	Red Form
Not Yet Started	Green Form
Uploaded	Release of All Claims
Uploaded	History & Physicals – Index and/or Revision (H&P)
Uploaded	Operative Reports – Index and/or Revision (OR)
Uploaded	Discharge Summaries – Index and/or Revision (DS)
Uploaded	Proof of Height and Weight at Time of Index Surgery (H/W)
Uploaded	Proof of Smoking Status at Time of Revision Surgery (SS)
Uploaded	Product/Lot Codes – Index and/or Revision (PC)

If you have confirmed that you have uploaded the necessary documentation or will supplement the missing required medical documentation by June 1, 2015, click Submit Required Submissions.

Under the terms of the Settlement Agreement, you will have the ability to provide additional medical records even after submitting the documents listed above. To add supplemental medical documentation after submitting these documents and the Enrollment Form, use the Upload Feature in Step 8 (Supporting Documents). Click Cancel to return to the Enrollment screen.

Submit Required Submissions Cancel

Note: If you categorized your document submissions using the Upload feature in Step 8 (Supporting Documents), all documents will appear as Uploaded. If you did not use the Upload feature to identify your supporting medical documents, the documents will appear as Not Uploaded.

- (c) Click the Submit Required Submissions button if you have uploaded all Required Submissions or will supplement the missing medical documentation by June 1, 2015. Click the Cancel button to return to the Enrollment Process screen if you need to upload additional supporting documents.
- (d) After you click the Submit Required Submissions button, the Enrollment Form screen appears.

- 5. *Submit the Enrollment Form*. Follow these steps to submit the Enrollment Form.
 - (a) Read the Enrollment Form carefully to make sure you understand all of the representations and agreements you are making when you electronically sign the Form. The text of the Enrollment Form is the same for each claimant.
 - (b) After reading the Enrollment Form, sign it electronically by typing your name in the signature box at the bottom of the Form.

Sign it one of three ways, depending on whether you are Counsel, an unrepresented claimant or a legal representative for a deceased or incapacitated unrepresented claimant:

(1) If you are a lawyer representing the claimant, type your name in the Counsel's Signature box;

Counsel's Signature: * s/ John Smith Esq		Submit Enrollment Form	
	Cancel		

(2) If you are an unrepresented claimant and competent to sign on your own behalf, type your name in the Claimant's Signature box; or

Claimant's Signature: * s/ John Doe		Submit Enrollment Form	
	Cancel		

(3) If you are a legal representative for a deceased or incapacitated unrepresented claimant, type your name in the Claimant's Signature box like this: "*Legal Representative's Name* on behalf of *Product User's Name*."

Claimant's Signature: * s/ John Doe as Legal Representative of Jane Doe	Submit Enrollment Form
Cancel	

- (c) Click the Submit Enrollment Form if you are ready to enroll. Click the Cancel button to return to the Enrollment Process screen if you are not ready to enroll.
- (d) After you click the Submit Enrollment Form button, a Confirmation screen appears.



This confirms that you are submitted for enrollment and advises that the Claims Processor automatically saves a PDF copy of the Enrollment Form with the Required Submissions. To view the Enrollment Form and the Required Submissions, go to the Enrollment Process screen and click the View Documents button.

- 6. *How to Upload Supporting Documentation*. Product Users, or their attorneys, must submit all required medical documentation **on or before June 1, 2015**. Follow these steps to upload all required supporting documentation:
 - (a) On the Enrollment Process screen for the relevant ASR ID, click the Upload button next to Step Eight.

8. Supporting Documents The U.S. ASR Hip Settlement Agreement requires that you provide the Claims Processor with the following documentation: (1) The manufacturer/product stickers for the Qualifying ASR that identify the Product and Lot Codes for the device implanted into the Product User; (2) a true and correct copy of all Contemporaneous Medical Records identifying the ASR XL Acetabular Hip System, ASR 300 Acetabular Cup System, or ASR Resurfacing System that was surgically implanted in the Product User in an ASR Index Surgery and removed during a Revision Surgery (this includes all records in your possession and obtained as a result of	
ordering medical records]; (3) a true and correct copy of the Contemporaneous Medical	
Records, including Admission Records (including History and Physical Examination Records),	
Discharge Summaries, Anesthesia Record and Operative Reports pertaining to any ASR Index	
at the time of your ASR Index Surgery and your moking status at the time of your ASR	
Revision Surgery. Additionally, Section 4.1.3.7 of the Settlement Agreement requires you to	Lipland
submit full copies of all required medical records in your possession and any that you	opioad
obtain as a result of ordering additional medical records required under the Settlement	
Agreement.	
To submit these required documents, the Claims Processor has created this Upload feature.	
When uploading your supporting document(s), you can select which required document you	
are uploading and can enter the specific page numbers. For example, if you are uploading a	
single document that contains the Product User's History & Physical documentation,	
byes and provide the relevant page number(s) from the document in the text box. It is not	
mandatory for you to provide this information, but it will help guide the Claims Processor to	
the specific location of the required document(:) and will speed up reviews. The Upload	
feature is available at all times, and you can useit as many times as necessary to submit the	
Required Submissions for the Claims Package.	

(b) When the Upload Document screen displays, check the box(es) next to the document type(s) you are adding to the claimant's file and indicate the page number(s) in the PDF where the documents are located. You can upload the required medical records as one

PDF or as a separate PDF for each required document. If the file that you are uploading contains more than one of the documents required by the Settlement Agreement, check all document types that apply and note the page range for each. If you have created an excerpted PDF file that contains only the relevant records, you can check the boxes that correspond to the document types included in that file without entering the page numbers and then upload the larger file that includes all documents in your possession for the Product User without checking any document types.

Upload Document

NOTICE: Submit all Required Submissions related to ASR Index and ASR Revision Surgeries. Section 5.1.4.1 of the Settlement Agreement prohibits the Special Master from considering any documents on appeal that were not provided to the Claims Processor before issuance of an award determination.

1. Select the type of requirement document(s) your submission includes and provide the page number(s), or check only the document type boxes that pertain to your excerpted document:

Document Type	Page(s)
History & Physicals – Index and/or Revision (H&P)	
Operative Reports – Index and/or Revision (OR)	
Discharge Summaries – Index and/or Revision (DS)	
Proof of Height and Weight at Time of Index Surgery (H/W)	
Proof of Smoking Status at Time of Revision Surgery (SS)	
Product/Lot Codes – Index and/or Revision (PC)	

2. Click the Browse button to navigate to the file location on your local network. You can upload any file that is an Excel, Adobe PDF or JPEG file.

Browse ...

Upload Document: *

3. In addition to uploading your documentation, the Claims Processor has provided an optional Comments box for each submitted document. You may use the Comments box to provide a narrative description of the document or provide insight to any complicated or unusual fact patterns involving the Product User or the collection of the documentation.

Comments:		< >	
	Max 2,000 characters		\sim
	Upload Cancel		

If you are uploading a PDF that includes multiples of the same document type, separate page numbers with a comma. For example, if you are uploading a PDF of a medical record that includes multiple Operative Reports and Discharge Summaries, check the boxes next to Operative Reports (OR) and Discharge Summaries (DS) and then indicate in the Page(s) box next to each type the pages numbers in the PDF where the Claims Processor can locate the documents.

	Document Type	Page(s)
	History & Physicals – Index and/or Revision (H&P)	
	Operative Reports – Index and/or Revision (OR)	1,5-6
>	Discharge Summaries – Index and/or Revision (DS)	2,4
	Proof of Height and Weight at Time of Index Surgery (H/W)	
	Proof of Smoking Status at Time of Revision Surgery (SS)	
	Product/Lot Codes – Index and/or Revision (PC)	5

Note: Selecting document types and page numbers for your Claims Package, or creating an excerpted file that contains only the relevant records, is mandatory and will speed up the Claims Processor's ability to review your claim. However, this requirement is **in addition to and does not take the place of** the requirement in Section 4.1.3.7 of the Settlement Agreement to provide full copies of all medical records in your possession and any that you obtain as a result of ordering additional records.

(c) After identifying the document type(s) included in the PDF, click the Browse button in the middle of the screen to locate the document on your computer or local network.

2. Click the Browse button to navigate to the file location on your local network. You can upload any file that is an Excel, Adobe PDF or JPEG file.	
Upload Document: *	Browse

(d) If there is something you need to clarify about the document or file you are uploading, provide an explanation in the Comments box that: (1) provides the clarifying information; and (2) tells the Claims Processor where in the document to find it.

3. In addition to uploading your required documentation, the Claims Processor has provided an optional Comments box for each submitted document. You may use the Comments box to provide a narrative description of the document or provide insight to any complicated or unusual fact patterns involving the Product User or the collection of the required documentation.

Comments: The Operative Report on page 1 relates to the ASR Index Surgery and the one on pages 5-6 relates to the ASR Revision Surgery.

- (e) After providing all information related to the document you are uploading, click the Upload button to save the document to the Product User's file.
- (f) Repeat these steps for each file that you want to upload.
- **7.** *Questions*. If you have any questions about this Alert, call or email your assigned Claims Processor contact, email us at <u>claimsprocessor@usasrhipsettlement.com</u>, or call 1 (877) 391-3169.