

**YOU MUST SUBMIT YOUR
REGISTRATION FORM
AND CLAIM FORM BY
March 4, 2025**

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Submitting a Claim under the Acute Care Hospital Class Action Settlement Agreements

To make a Claim for benefits under the Acute Care Hospital Class Action Settlement Agreements¹ reached in the litigation titled *San Miguel Hospital Corp., d/b/a Alta Vista Regional Hospital v. Johnson & Johnson, et al.*, Case No. 1:23-cv-00903-KWR-JFR (D.N.M.) (the “Settlements”), a representative from your Acute Care Hospital must fill out the attached Registration Form and submit it via email to info@acutecarehospitalsettlement.com no later than **March 4, 2025**. Upon registration, a secure file transfer protocol (“SFTP”) link will be provided for you to submit the attached Claim Form and any supporting documentation. Claim Form and documentation submissions must be completed no later than **March 4, 2025**. Each Acute Care Hospital making a Claim must submit a separate Registration Form and Claim Form. You may obtain extra copies of all forms at www.acutecarehospitalsettlement.com. Your Allocated Amount for each Settlement will be determined in accordance with the attached Plan of Allocation.

Deadline: If you do not complete and submit your Registration and Claim Forms by 5:00 p.m. Central Standard Time on March 4, 2025, your Claim will be rejected and you will be precluded from receiving an Allocated Amount under the Acute Care Hospital Class Action Settlement Agreements. Do not send your Registration Form or Claim Form to the Court or to anyone other than the Notice and Claims Administrators.

Capitalized terms not otherwise defined shall have the meaning ascribed to them in the Acute Care Hospital Class Action Settlement Agreements in *San Miguel Hospital Corp., d/b/a Alta Vista Regional Hospital v. Johnson & Johnson, et al.*, Case No. 1:23-cv-00903-KWR-JFR (D.N.M.).

¹ “Acute Care Hospital Class Action Settlement Agreements” refers collectively to the Distributor Class Action Settlement Agreement with Acute Care Hospitals dated September 26, 2024, the Janssen Class Action Settlement Agreement with Acute Care Hospitals dated September 27, 2024, the Teva Defendants Class Action Settlement Agreement with Acute Care Hospitals dated September 30, 2024, and the Allergan Defendants Class Action Settlement Agreement with Acute Care Hospitals dated October 1, 2024, all of which are available at www.acutecarehospitalsettlement.com.

Class Members submitting Claims may be contacted by representatives of Class Counsel or the Notice and Claims Administrators for additional information regarding the Class Member's Claims.

A Class Member must do each of the following, according to the guidelines set forth below:

1. Complete the Registration Form electronically, which is a fillable PDF that can be downloaded from www.acutecarehospitalsettlement.com and must be emailed to info@acutecarehospitalsettlement.com;

If the "Quick Pay" option is selected on the Registration Form in Section E, there is no further action needed unless directed by the Notice and Claims Administrators. If the "Quick Pay" option is **NOT** selected, a Class Member must complete the steps outlined in items 3-6 below;

2. Once the Registration Form is received, the Notice and Claims Administrators will communicate instructions to you for accessing an SFTP;
3. Complete the Business Associate and Confidentiality Agreement (the "BAA") electronically, which is a fillable PDF that can be downloaded from www.acutecarehospitalsettlement.com, and submit it via SFTP;
4. The Notice and Claims Administrators will provide you with an executed BAA via the SFTP to download for your records;
5. Complete the Claim Form, as applicable, electronically, which is a fillable PDF that can be downloaded from www.acutecarehospitalsettlement.com; and
6. Submit the completed Claim Form with all supporting documents and information requested therein, along with the requisite claims data as described in Section F.8 of the Claim Form, via SFTP.

PLEASE NOTE THAT THE BAA, CLAIM FORM, AND ACCOMPANYING CLAIMS DATA ABOVE SHALL NOT BE SUBMITTED VIA EMAIL. Instead, by submitting the Registration Form described in item 1 above, you will receive instructions for accessing an SFTP to which the BAA, the Claim Form, and accompanying requisite claims data must be submitted.

IT IS IMPORTANT THAT YOU ANSWER ALL QUESTIONS FULLY AND ACCURATELY. FAILURE TO PROVIDE THE REQUESTED INFORMATION, DATA AND/OR DOCUMENTATION BY THE DEADLINE WILL CAUSE YOUR CLAIM TO BE REJECTED AND YOUR ACUTE CARE HOSPITAL WILL BE PRECLUDED FROM RECEIVING AN ALLOCATED AMOUNT.

PLAN OF ALLOCATION

- A. The Notice and Claims Administrators (A.B. Data Group and Cherry Bekaert Advisory, LLC) shall utilize this Plan of Allocation for the determination of all Claims, including any Allocated Amount due to any Qualifying Class Member under the proprietary Acute Care Hospital Allocation Model and Algorithm (the “Model”). The Notice and Claims Administrators will consider the eligibility of a Class Member with respect to each Settlement Class separately.
- B. The Model is prepared and operated by Cherry Bekaert Advisory, LLC (formerly known as Legier & Company, apac) and is consistent with the algorithm developed in the Purdue Pharma bankruptcy proceedings (Case No. 19-23649), and utilized thereafter in the Mallinckrodt, plc (Case No. 20-12522) and Endo (Case No. 22-22549) bankruptcy proceedings. Cherry Bekaert Advisory, LLC retains all intellectual property rights in the Model.
- C. A.B. Data Group shall mail the Notice to Class Members no later than twenty-one (21) calendar days following the entry of the Preliminary Approval Order pursuant to the Notice Plan. Following the occurrence of the Effective Date for each Settlement, A.B. Data Group will be authorized to remit payment to Qualifying Class Members under this Plan of Allocation. Cherry Bekaert Advisory, LLC shall manage the Settlement website www.acutecarehospitalsettlement.com, shall issue SFTP links upon a Class Member timely submitting the Registration Form, and shall process all timely submissions for determining eligibility for an Allocation Amount under the Model.
- D. Any Qualifying Class Member may elect to participate in the Quick Pay option by submitting via email to info@acutecarehospitalsettlement.com a completed Registration Form (1) agreeing to be bound by the terms of each of the four Acute Care Hospital Class Action Settlement Agreements and (2) accepting the terms of the Quick Pay Option in this Plan of Allocation. The default Quick Pay Amount shall be \$5,000. However, if one or more Settlements is not approved, or if a Class Member is ineligible for one or more settlements by reason of a prior release, then the Quick Pay Amount owed shall be reduced, proportionally, based upon a comparison of the Up-Front Settlement Amount contributed by the Settling Defendant(s) in the Settlement(s) at issue with the total Up-Front Settlement Amounts of the four Settlements. The Up-Front settlement Amount is the amount in cash to be paid into escrow by the Settling Defendant under its Settlement Agreement by no later than thirty (30) days following the Effective Date of the Settlement Agreement. Following a determination of the Class Member’s eligibility to participate in each of the four Acute Care Hospital Class Action Settlement Agreements, Qualifying Class Members electing Quick Pay will be disbursed funds within forty-five (45) days of the Effective Date of the approved Settlements.
- E. A Class Member may elect to participate in the more detailed damages calculation using the Model, which may result in an Allocated Amount greater (but not less) than the Class Member’s Quick Pay Amount. This process requires the Class Member to establish through requisite claims data (see Claim Form F.8) that it has calculable damages under the Model. The rejection or denial of a

claim under the Model will result in a Qualifying Class Member receiving their Quick Pay Amount after an eligibility determination is made.

- F. Under the Model, Cherry Bekaert Advisory, LLC shall determine the Allocated Amount distributable to each Qualifying Class Member who has not elected a Quick Pay based on: (1) the diagnostic codes associated with operational charges incurred by the Qualifying Class Member in connection with the treatment of OUD patient encounters in (a) the Emergency Department (b) Inpatient settings, and (c) Outpatient settings², (2) the portion of such charges that were not reimbursed; and (3) the following distribution determination factors and weights:³

Factors	Weighting %
MMEs	10%
OUD Rates	10%
Opioid Deaths	5%
Operational Impact	35%
Opioid Patients %	15%
Litigation Participation	25%
Total	100.00%

The above factors are defined as follows:

1. Units of morphine milligram equivalents (“MMEs”) shipped into the Qualifying Class Member’s service area (“Service Area”) during the period of January 1, 2006 through December 31, 2014 (the “Measurement Period”);
2. Opioid use disorder rates (“OUD Rates”) at the state level, prorated for each Qualifying Class Member;
3. Opioid overdose deaths in the Qualifying Class Member’s Service Area (“Opioid Deaths”);
4. Operational impact calculated using the Qualifying Class Member’s opioid diagnoses codes, and charge and reimbursement data (“Operational Impact”);
5. The Qualifying Class Member’s opioid related patients as a percentage of its total patients (“Opioid Patient %”);

² Refer to the Claim Form and instructions for the claims data details. Physician office visits and non-acute care visits should NOT be included in the data provided.

³ “The “Model” calculates a Qualifying Class Member’s loss resulting from its treatment of patients with OUD and other opioid diagnoses in the emergency department and inpatient and outpatient settings, considering, among other things, the total charges and collections, including a causation algorithm applied to each patient encounter.

6. Participation in active litigation against an Opioid Manufacturer and/or any Settling Defendant⁴ (“Litigation Participation”) by commencing a civil action in a state or federal court and engaging in the following activities:⁵
- (a) Hosting expert visits for the purpose of enabling the experts to engage with hospital personnel on the opioid epidemic at the hospital, and to review hospital policies, procedures, and programs regarding opioids;
 - (b) Producing claims data to the Settling Defendants;
 - (c) Actively engaging in discovery by, e.g., responding to interrogatories and requests for production or admissions; supplying hospital financial documents, policies and procedures, custodial emails, and/or dispensing and discharge prescription data in response to requests by Settling Defendants or orders of a court; provided 30(b)(6) and/or fact witness testimony; propounding discovery to Settling Defendants; formally disclosing expert opinions consistent with federal and/or state court rules; or engaging in motion practice before a court and/or a special master; and
 - (d) Obtaining a court-ordered trial date.
- G. Qualifying Class Members shall be paid no more than ninety (90) days following the Effective Date of the Settlement Agreement for which the Qualifying Class Member has submitted a Claim, on a *pro rata* basis (up to the available amounts in the Net Settlement Funds) in a manner to be determined by Cherry Bekaert Advisory, LLC. Qualifying Class Members that submit a valid Claim will receive a payment of no less than what they would be entitled to receive from that Settlement under the “Quick Pay” option. A Qualifying Class Member will receive maximum payment if it submits a valid Claim for all four Settlements and the Effective Date for all four Settlements occurs.
- H. An Acute Care Hospital that previously received an allocation from the Chapter 11 Bankruptcy cases of Mallinckrodt, plc (Case No. 20-12522), and/or Endo (Case No. 22-22549) may direct the Notice and Claims Administrators (or their agents or representatives) to utilize in this claims process (to the extent applicable), the claims data, and/or information submitted in those claims processes.
- I. In order to encourage the development of innovative and effective hospital-led abatement programs, the Special Master, in consultation with the Notice and Claims Administrators, may elect to award up to \$3,000,000.00 of Net Settlement Funds to one non-profit Qualifying Class Member that maintains and formal abatement plan and OUD treatment program, in addition to any Allocated Amount that the non-profit Qualifying Class Member receives. A separate Notice will be sent alerting all Acute Care Hospitals of the process for making applications to receive these funds. The Special Master shall in his sole discretion award the funds.

⁴ The Settling Defendants means the Released Entities defined in each of the Acute Care Hospital Class Action Settlement Agreements.

⁵ This participation factor is weighted at 25%, to be split equally amongst sub-factors (a)-(d).