

# BCBS ANTI-TRUST SETTLEMENT FAQs

Q. What is the BCBS Anti-Trust Settlement?

A. For information about the settlement please go [here](#).

Q. Is Guidestone filing a claim?

A. Not at this time.

Q. Should I submit a claim?

A. Since Guidestone is not filing on your behalf you as an individual will need to determine whether you would like to submit a claim for yourself. If you decide to file a claim you can find a step-by-step guide [here](#). (If you did not receive a unique code, you can find instructions on how to file [here](#).)

Q. What is the deadline for filing a claim?

A. The deadline to submit a claim is November 5<sup>th</sup>. The July 28<sup>th</sup> deadline, referenced in the BCBS email, is for those who are “opting out” or objecting to the settlement. For more information on “opting out” please reference the BCBS Long Form Notice [here](#) and scroll to Question 12.

Q. What about us as an employer, can we submit a claim?

A. BCBS does not recognize our individual employers but views all our groups under one Self-Funded Account, being Guidestone Financial Resources. For more information regarding who is part of the settlement please refer to Question 5 in the BCBS Long Form notice [here](#).

# Instructions for Filing a Claim with BCBS

## Step 1: Receive a Unique ID from BCBS:

Dear ROBERT D RUDD:



**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)

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

On November 30, 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.

## Step 2: Go to [www.bcbssettlement.com](http://www.bcbssettlement.com) and enter your Unique ID from your email

Blue Cross Blue Shield Online Claim Form

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A screenshot of the "Online Claim Form" web page. The page has a blue header with the title "Online Claim Form" and a sub-header "Please enter the Unique ID contained in the email or on the postcard notice that you received and click Login." Below this is a text input field labeled "Unique ID" containing a blacked-out ID number. A red arrow points to this field. Below the input field is a dark blue button labeled "LOGIN →". A second red arrow points to this button. At the bottom of the form area, there is a light blue box with the text "Don't have a Unique ID?" and a link "File a claim here →".

**Step 3: you will be filing on behalf of yourself:**

Are you filing for a **business** ⓘ or are you filing for **yourself** ⓘ ?

Business



Myself



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**Step 4: Select "Enrolled through Employer"**

Were you enrolled through your **employer or other entity** ⓘ , or did you buy insurance **directly** ⓘ from a BCBS company, or do both?

Enrolled through Employer



Purchased Myself



Both



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## Step 5: Enter your personal information

- 1 Subscriber Information
- 2 Health Plan Details
- 3 Allocation of Premiums
- 4 Payment Election
- 5 Review & Signature

### Subscriber Information

First Name *	Middle Initial	Last Name *
<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Line 1 *	Street Line 2	
<input type="text"/>	<input type="text"/>	
City *	State *	
<input type="text"/>	<input type="text"/>	
Zip *	Country *	
<input type="text"/>	United States of America	
Phone *	Email *	
<input type="text"/>	<input type="text"/>	

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## Step 6: Enter Health Plan Details (Employer Name should be Guidestone):

- 1 Subscriber Information
- 2 Health Plan Details
- 3 Allocation of Premiums
- 4 Payment Election
- 5 Review & Signature

### Health Plan Details

Please do your best to provide as much information as you can below. While more information will assist the Claims Administrator in processing your claim, only boxes marked with an \* are required.

#### 1 Health Plan Entry


Health Plan Name	Group #	
<input type="text" value="Highmark Blue Cross Blue Shield"/>	<input type="text" value="CQM363"/>	
Employer Name *		
<input type="text" value="Guidestone Financial Resources"/>		
Employer Address		
<input type="text" value="5005 LBJ Freeway, Ste 2200 Dallas, TX 75244"/>		
Subscriber or Member ID	Coverage Start Date	Coverage End Date
<input type="text"/>	<input type="text" value="MM/YYYY"/>	<input type="text" value="MM/YYYY"/>


## Step 7: Select the Default Option for Allocation of Premiums:

**Allocation of Premiums**


The Settlement provides that payments will be based, in part, on premiums paid for BCBS health insurance or administrative services plans during the relevant periods between February 2008 and October 2020 for fully insured plans, and between September 2015 and October 2020 for administrative services plans.

The Settlement further provides default formulas for the Claims Administrator to use when determining what percentage of the premium was paid by an employer/entity and what percentage was contributed by its employees/members.

If you accept the **Default option** , you are **NOT** required to provide any additional data or evidence in support of your claim at this time. If another claimant's filing affects your claim, you will be provided with an opportunity to respond at a later date.

If you proceed with the **Alternative option** , you must also provide data or evidence to support the alternative contribution percentages you provide. If you select this option, for any time period for which supporting data or evidence is not provided, the Default Option will be applied.

**Accept the Default Option**

**Apply for an Alternative Contribution %** 

## Step 8: Select how you would like to receive your payment from the dropdown box:

**Payment Election**

Please let us know how you would like to receive your settlement payment if your claim is deemed valid.

Final determinations of claim amounts will not be made until after processing by the Claims Administrator is complete. Claims will not be paid if the value is equal to or less than \$5.00.

Claimants who submit valid, approved claims shall receive a pro-rata percentage of the Net Settlement Fund allocated to their type of coverage (fully-insured or self-funded) based upon their estimated proportion of the cumulative total of premiums and/or administrative fees paid by all claimants.

**Payment Option \***

- Please Select
- Please Select**
- Venmo
- PayPal
- Pre-paid Card
- Check

**NEXT** →

## Step 9: Sign Electronically and Submit



### Signature

By checking this box, I affirm under the laws of the United States and the laws of my State of residence that the information supplied in this Claim Form by the undersigned is true and correct to the best of my recollection, and that this form was executed on the date set forth below. \*

By checking this box, I understand that I may be asked to provide supplemental information to the Claims Administrator and/or Settlement Administrator before my claim will be considered complete and valid. \*

Type your name in the box below to electronically sign your claim \*

Date

06/28/2021

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SUBMIT

## Step 10: Receive your Confirmation Number

Blue Cross Blue Shield Online Claim Form

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- ✓ Subscriber Information
- ✓ Health Plan Details
- ✓ Allocation of Premiums
- ✓ Payment Election
- ✓ Review & Signature

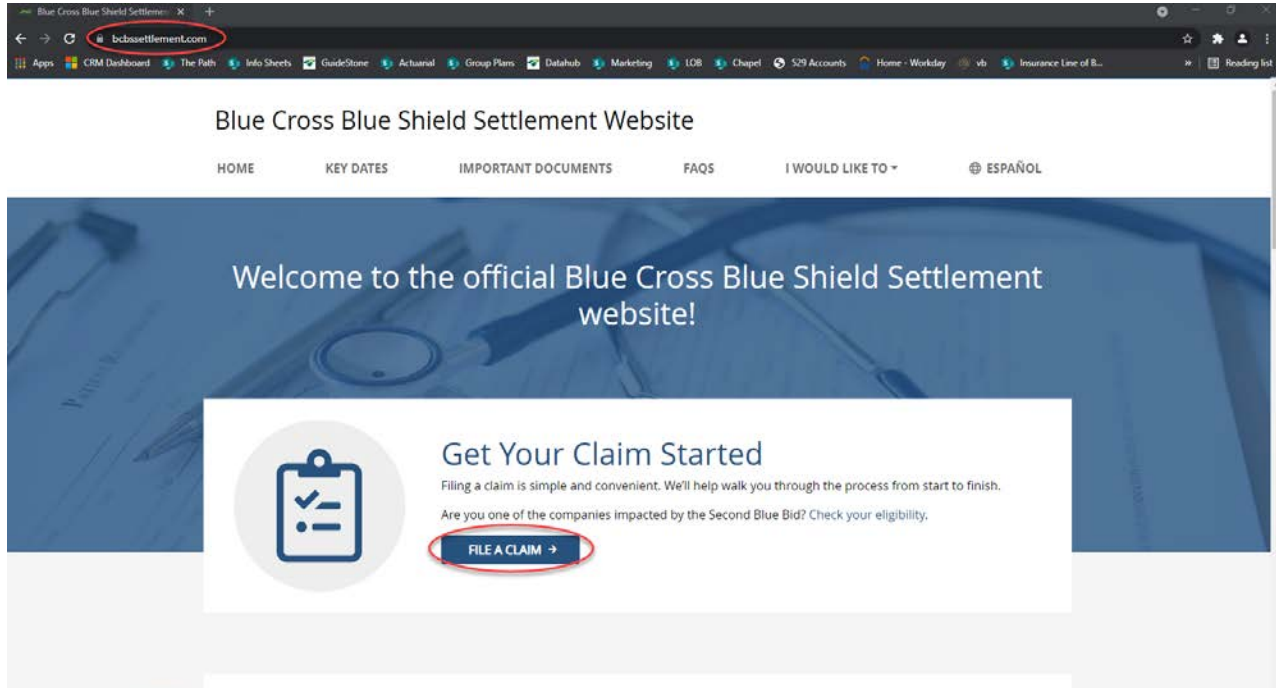
### Confirmation

Your claim form has been submitted successfully. Please keep the Claim Number below for your records.

Claim Number: [REDACTED]

# Instructions for Filing a Claim Without a Unique Code

**Step 1:** go to [www.bcssettlement.com](http://www.bcssettlement.com)



**Step 2:** Select "File a Claim here" then go to **Step 3** above

