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## **October 5, 2010 Deadline to File Claim for \$350 Million United Healthcare Class Action Settlement**

For more than a decade, UnitedHealth Group (formerly known as United Healthcare Corporation) and its subsidiaries were using flawed databases operated by Ingenix, one of UnitedHealth Group's subsidiaries, to determine reimbursement amounts for out-of-network physicians. These flawed databases increased insurers' profits at the expense of physicians and patients by understating the true usual and customary rates (UCR) of medical care by up to 28%. Additionally, these databases inadequately disclosed the policies in determining reimbursement amounts. A class action lawsuit was filed against UnitedHealth Group and its subsidiaries to remedy these flawed databases and thousands of physicians may now be eligible to receive settlement dollars.

On Dec. 3, 2009, the United States District Court for the Southern District of New York granted preliminary approval of the previously disclosed \$350 million settlement that would resolve a class-action lawsuit against UnitedHealth Group. The settlement requires UnitedHealth Group pay to \$350 million for additional reimbursement on behalf of health plan members and out-of-network physicians that have been underpaid on account of the flawed UCR database. On or about September 13, 2010, a Final Settlement Hearing will be held to determine the fairness, reasonableness, and adequacy of the settlement to the members of the settlement class, among other things.

Physicians must submit a proof of claim to become a part of the settlement class and be eligible to receive money from the \$350 million settlement fund by the October 5, 2010 deadline. To eligible for the settlement class and the \$350 million settlement fund, physicians must meet the following two requirements:

- (1) The physician must have provided covered out-of-network services or supplies between March 15, 1994 and November 18, 2009 to patients who were covered by a health plan insured or administered by UnitedHealthcare, Oxford Health Plans, Metropolitan Life Insurance Company, American Airlines or any of those companies' parents, subsidiaries, predecessors or successors; and
- (2) The physician must have billed one of these health plans and received payment for providing out-of-network services or supplies.

Physicians can receive 50%, 70% or 90% of the Recognized Loss (the difference between what was billed to the Defendant and the amount the Defendant and/or the Subscriber paid), depending on the amount of documentation they can produce.

Physicians have the option of filing a simplified claim based solely on the information provided by the Defendant on the Claims Administrator's report regarding services or supplies provided from January 1, 2002 through May 28, 2010. Physicians that file the simplified claim are eligible to receive 50% of the Recognized Loss.

Alternatively, physicians may recover for claims in addition to those included on the Claims Administrator's report, as far back as March 15, 1994, by submitting additional documentation. To be eligible to receive additional compensation from the claim fund, physicians must submit the name of the patient(s), date(s) of service, billed amount(s), allowed amount(s), and the amount(s) paid for each claim.

**The deadline to file a claim for the \$350 million settlement fund is October 5, 2010. The proof of claim form is available at [www.uniteducrsettlement.com](http://www.uniteducrsettlement.com).**

For more information or for assistance with filing a claim please feel free to contact Eric Jones, the OOA's legal counsel, at (614) 545-9998 or email [ejones@ericjoneslaw.com](mailto:ejones@ericjoneslaw.com).