

RFP FOR SETTLEMENT IN THE NATIONAL COLLEGIATE ATHLETIC ASSOCIATION STUDENT-ATHLETE CONCUSSION INJURY LITIGATION

Date: August 29, 2016

Garretson Resolution Group has been retained by the parties in the settlement of the *National Collegiate Athletic Association Student-Athlete Concussion Injury Litigation* to administer a 50-year medical monitoring program. The program will provide medical evaluations for members of the settlement class who are current and former NCAA student-athletes who are eligible to receive a medical evaluation consisting of a neurological examination, neuropsychological examination, mood and behavioral evaluation, and ancillary testing, as needed.

We are issuing this Request for Proposal ("RFP") seeking responses from providers in 33 markets who may wish to participate and provide medical evaluations for qualifying class members.

The medical evaluations are designed to assess symptoms related to persistent post-concussion syndrome, as well as cognitive, mood, behavioral, and motor problems that may be associated with mid- to late-life onset diseases resulting from concussions and/or subconcussive hits, such as Chronic Traumatic Encephalopathy ("CTE") and related disorders.

Because many class members (defined as all persons who played an NCAA-sanctioned sport at an NCAA member institution on or prior to July 15, 2016) may not be aware that the debilitating symptoms they are experiencing may be caused by previous head injuries and repetitive subconcussive trauma, this

program is designed to assess current and former student-athletes so they may later seek treatment, if needed, outside the medical monitoring program.

We anticipate the majority of class members eligible will need evaluation for neurodegenerative disease. A small subset will need evaluation for post-concussion syndrome. Therefore, we plan to set up a geographically diverse provider network that primarily consists of neurologists with neurodegenerative disease experience and neuropsychologists with experience detecting neurocognitive and neuropsychiatric dysfunction at all stages of severity, ranging from acute-concussion to post-concussion syndrome to mild cognitive impairment through the spectrum of neurodegenerative diseases.

If you are interested in participating in this program, please provide a few basic pieces of information about your practice [here](#). This is the first step in the process and is only to gauge your interest – this is not binding.

Please indicate your interest by September 28th to be included in the program. We'll get back to you in the upcoming months with next steps on what will be needed as we select centers in your area for this program.

Within the next few pages, you'll find background about the litigation and requirements set out by the settlement.

We are excited to bring the best providers in the country together to help current and former student-athletes. We hope you are interested in being part of this program. Please reach out to Candice Young (cyoung@garretsongroup.com, (513) 394-7028) for any additional information about this program.

Sincerely,

Garretson Resolution Group

SETTLEMENT BACKGROUND

On July 15, 2016, Judge John Z. Lee, United States District Judge for the Northern District of Illinois, issued an order preliminarily approving a settlement that provides certain benefits for all persons who have played an NCAA-sanctioned sport.

The NCAA denies all allegations of liability and wrongdoing. Nonetheless, plaintiffs, through class counsel, and the NCAA have entered into a settlement that establishes, among other things, a two-part, \$70 million medical monitoring program (the "NCAA Medical Monitoring Program") to provide eligible class members with online screening and, depending on the results of the online screening, medical evaluations designed to assess symptoms related to persistent post-concussion syndrome, as well as cognitive, mood, behavioral and motor problems that may be associated with mid- to late-life onset diseases resulting from concussions and/or subconcussive hits, such as chronic traumatic encephalopathy ("CTE") and related disorders.

The settlement contemplates the NCAA Medical Monitoring Program will last for 50 years. While the settlement is estimated to cover up to 4.4 million current and former student-athletes in 43 different contact and non-contact sports, all of whom can participate in the online screening, the class members qualifying for medical evaluations through that screening will be significantly less.

WHO DESIGNED THE PROGRAM?

The parties to the settlement created—and the court approved—a Medical Science Committee to determine how to design the NCAA Medical Monitoring Program. The Medical Science Committee is composed of four clinicians with expertise in the diagnosis, care and management of concussions in sports and mid- to late-life neurodegenerative disease. The current members are Dr. Robert Cantu, Dr. Ruben Echemendia, Dr. Brian Hainline, and Dr. Robert Stern. Their biographies are attached as an exhibit. Retired United States District Judge Wayne R. Andersen serves as Chair of the Medical Science Committee.

The Medical Science Committee has created a screening questionnaire, which consists of an extensive medical history, five standardized psychological/cognitive functioning scales and screening criteria used to determine if a current or former student-athlete qualifies for a medical evaluation. The committee has also outlined the scope of the medical evaluations to be provided to qualifying class members. The Medical Science Committee will assess the scope of the NCAA Medical Monitoring Program annually to ensure that its screening and evaluations meet the current standard of care for assessment of and diagnoses related to persistent post-concussion syndrome and neurodegenerative diseases.

WHAT IS INCLUDED IN THE PROGRAM?

Student-athletes who wish to participate in the NCAA Medical Monitoring Program must complete an online or written screening questionnaire to determine whether they qualify for an in-person medical evaluation. The

student-athletes can complete the questionnaire at periodic intervals throughout the 50-year settlement period.

The Medical Science Committee has established criteria to determine which athletes qualify for a medical evaluation, determined through a scoring algorithm and pre-determined cut scores. Class members may qualify for up to two medical evaluations during the medical monitoring period, and a third medical evaluation may be permitted on a case-by-case basis decided by the Medical Science Committee.

Evaluations are conducted for assessment purposes only. Treatment is not included as part of the settlement. The full cost of approved medical evaluations will be paid by the NCAA Medical Monitoring Fund. Student-athletes who qualify for the medical evaluation will not have to pay out-of-pocket for any of the costs of a medical evaluation. No claims will be submitted to commercial, government, or other third-party health care payers.

WHICH PROVIDERS AND FACILITIES ARE NEEDED?

We seek neurologists with neurodegenerative disease experience and neuropsychologists with experience detecting neurocognitive and neuropsychiatric dysfunction at all stages of severity, ranging from acute-concussion to post-concussion syndrome to mild cognitive impairment through the spectrum of neurodegenerative diseases.

WHAT TYPE OF EVALUATION IS REQUIRED?

The medical evaluation will consist of a neurological examination, neuropsychological examination, mood and behavioral evaluation, and

ancillary testing, as needed. The Medical Science Committee has defined the scope of the examination and ancillary testing. Additional details will be provided after this initial RFP stage, and more information can also be found [here](#) in the committee's report filed with the court. Providers will be given an athlete's online screening responses prior to the medical evaluation. The Medical Science Committee anticipates that the entire evaluation will take 5 to 9 hours, performed either in a single day or two consecutive days.

WHAT MARKETS ARE INCLUDED?

The settlement calls for medical evaluations to be conducted in 33 markets, which were selected based on geographic distributions of the U.S. population. Those markets are:

Atlanta, GA	Kansas City, MO	Pittsburgh, PA
Boston, MA	Las Vegas, NV	Portland, OR
Charlotte, NC	Los Angeles, CA	Phoenix, AZ
Chicago, IL	Memphis, TN	St. Louis, MO
Cleveland, OH	Miami, FL	Salt Lake City, UT
Cincinnati, OH	Minneapolis, MN	San Antonio, TX
Dallas, TX	Nashville, TN	San Francisco, CA
Denver, CO	New Orleans, LA	Seattle, WA
Detroit, MI	New York, NY	Tampa, FL
Honolulu, HI	Philadelphia, PA	Virginia Beach, VA
Houston, TX	Oklahoma City, OK	Washington, D.C.

WHAT IS THE TIMING?

The deadline for providers to respond to this RFP with an expression of interest in participating in the program is **September 28, 2016**.

The settlement has already been preliminarily approved by the Court; however, the court must give final approval to the settlement before the settlement can take effect and the NCAA Medical Monitoring Program can begin. At this time, the final approval date is not known, although a final fairness hearing is currently scheduled for May 5, 2017. The settlement calls for the NCAA Medical Monitoring Program to begin 90 days after the court gives its final approval of the settlement and the appeals period has expired.

The settlement establishes a 50-year program. Once our network is established, there will be procedures in place to renew the relationship on a periodic basis throughout the lifetime of the program.

WHAT ARE FINANCIAL TERMS OF PARTICIPATION?

Medical evaluations will be reimbursed based on pre-established billing criteria, which will be revisited periodically throughout the lifetime of the settlement. Payments for covered services will be provided, in full, directly from the NCAA Medical Monitoring Fund. No claims will be submitted to commercial, government, or other third-party health care payers.

CAN PROVIDERS PUBLICIZE THEY ARE IN THE PROGRAM?

Participation in the network is not, and may not be construed as, an endorsement of any kind by the NCAA. Nor does it provide any license or

permission to use the NCAA's trademarks for any promotional or other purposes. However, providers may make factual statements concerning their participation in the NCAA Student-Athlete Concussion Injury Litigation Medical Monitoring Program.

MEDICAL SCIENCE COMMITTEE

Dr. Robert Cantu, M.D.

Dr. Robert Cantu is a Clinical Professor in the Department of Neurology and Neurosurgery, Clinical Diagnostics and Therapeutics Leader AD and CTE Center, at the Boston University School of Medicine, and Medical Director and Director of Clinical Research, Dr. Robert C. Cantu Concussion Center, Emerson Hospital. He has authored over 400 scientific publications, including 32 books on neurology and sports medicine, in addition to numerous book chapters, peer-reviewed papers, abstracts and free communications, and educational videos. He is section editor for World Neurosurgery, and he has served as associate editor of Medicine and Science in Sports and Exercise and Exercise and Sports Science Review and on the editorial board of The Physician and Sports Medicine, Clinical Journal of Sports Medicine, and Journal of Athletic Training.

Dr. Cantu serves as Senior Advisor to the NFL Head, Neck and Spine Committee; Section Co-Chair Mackey-White National Football League Players Association Traumatic Brain Injury Committee; Founder and Medical Director Concussion Legacy Foundation (previously SLI); International Rugby Board Concussion Advisory Group; Adjunct Professor Exercise and Sport Science and Medical Director National Center for Catastrophic Sports Injury Research, University of North Carolina, Chapel Hill, NC; Co-Director, Neurologic Sports Injury Center, Brigham and Women's Hospital, Boston, Senior Advisor Brain Injury Center and Adjunct Staff, Children's Hospital, Boston, Vice President Chair Scientific Advisory Committee National Operating Committee on Standards for Athletic Equipment (NOCSAE), Chief of Neurosurgery Service, Associate Chairman Department of Surgery, and Director of Sports Medicine at Emerson Hospital in Concord, Massachusetts. He also consults with numerous NFL, NHL and NBA teams.

Dr. Ruben Echemendia, Ph.D.

Dr. Ruben Echemendia has extensive clinical and research experience with sports-related concussions. He is currently in independent practice after having spent 18 years on the faculty of Clinical Psychology at Pennsylvania State University where he was Director of the Psychological Clinic. He is also the Director of the National Hockey League's Neuropsychological Testing Program, Co-Chair of the NHL/NHLPA Concussion Working Group, and Chair of Major League Soccer's concussion program. Dr. Echemendia now serves as a consultant to numerous recreational, high school, college and professional sports teams, including consulting as a clinical neuropsychologist to the US Soccer Federation and the U.S. Soccer National Teams.

Dr. Echemendia is the founder of the Penn State University Concussion Program and the consulting neuropsychologist to Princeton University's Department of Athletic Medicine. He has previously served as a consultant to the U.S. Defense Veteran's Brain Injury Center, the Centers for Disease Control, and other national organizations. He is a Past President of the National Academy of Neuropsychology and the Sports Neuropsychology Society, and a Fellow of both the National Academy of Neuropsychology and the American Psychological Association. Dr. Echemendia received his undergraduate degree from Hofstra University and his Masters and Ph.D. degrees in Clinical Psychology from Bowling Green State University.

Dr. Brian Hainline, M.D.

As the first Chief Medical Officer of the NCAA, Dr. Brian Hainline oversees the NCAA Sport Science Institute, a national center of excellence whose mission is to promote and develop safety, excellence, and wellness in college student-athletes. In addition to his duties at the NCAA, Dr. Hainline is a clinical professor of neurology at both the New York University School of Medicine and Indiana University School of Medicine and an adjunct faculty member of the Department of Health Policy and Management at Indiana University School of Public Health.

As a clinical and research neurologist, Dr. Hainline has been actively involved in sports medicine for over 25 years. He has also served on the New York State Medical Advisory Board, the United States Olympic Committee (USOC) Sports Medicine Committee, and was a founding

member of the Executive Committee of the American Academy of Neurology (AAN) Sports Neurology Section, where he continues to serve as councilor and chair of the strategic planning group. Dr. Hainline received his undergraduate degree from the University of Notre Dame and his medical degree from the University of Chicago, Pritzker School of Medicine.

Dr. Robert Stern, Ph.D.

Dr. Robert Stern is Professor of Neurology, Neurosurgery, and Anatomy and Neurobiology at Boston University (BU) School of Medicine, where he is also Director of the Clinical Core of the NIH-funded BU Alzheimer's Disease and CTE Center. Dr. Stern has received several NIH and other federal and foundation grants and is a Fellow of both the American Neuropsychiatric Association and the National Academy of Neuropsychology. A major focus of Dr. Stern's research involves the long-term effects of repetitive head impacts in athletes, including the neurodegenerative disease CTE. Dr. Stern has also published on various aspects of cognitive assessment and is the senior author of several neuropsychological tests, including the Neuropsychological Assessment Battery (NAB). He is a member of the Mackey-White Health and Safety Committee of the NFL Players Association, as well as the medical advisory boards of several biotech/pharma companies.

Dr. Stern received his undergraduate degree from Wesleyan University and his Masters and Ph.D. degrees in Clinical Psychology (with a specialty in Clinical Neuropsychology) from the University of Rhode Island. He completed his neuropsychology internship training at the Boston VA Medical Center, under the supervision of Dr. Edith Kaplan, and his postdoctoral fellowship training in both neuropsychology and psychoneuroendocrinology at the University of North Carolina (UNC) School of Medicine. Following training, he was Assistant Professor of Psychiatry at UNC School of Medicine, where he was Director of the Neurobehavioral Assessment Core of the NIH-funded Mental Health Clinical Research Center. In 2003, he joined the faculty at Brown Medical School, where he was Director of the Memory and Cognitive Assessment Program at Rhode Island Hospital, before moving to BU School of Medicine in 2004.

GARRETSON RESOLUTION GROUP

Founded in 1998, the Garretson Resolution Group provides consulting and process outsourcing services to parties in complex disputes. In each of these roles, we help parties facilitate their agreed-upon settlement objectives and processes. In addition, Garretson works closely with parties in large, complex matters to bring about creative, multi-threaded solutions that may include direct compensation, in-kind relief, or medical monitoring.

Garretson is staffed by more than 400 professionals, including attorneys, claims auditors, certified nurse reviewers, operations managers, IT professionals, content specialists, claims/class member service representatives, data analysts, accountants, and paralegals. We have been engaged in numerous nationally prominent matters at the request of courts and settling parties.

Our medical monitoring and consulting services are designed to address each program's unique requirements including notifying members, providing baseline consultations, and establishing provider networks for monitoring and evaluation related to specified medical conditions.

Garretson has successfully helped hospitals set up responses that provide medical monitoring to patients following safety protocol breaches. In addition, Garretson is currently involved in the following programs that have on-going, multi-year medical monitoring:

DEEPWATER HORIZON MEDICAL BENEFITS SETTLEMENT

Garretson is the claims administrator for the medical benefits settlement arising from the April 2010 Deepwater Horizon oil spill. In this role, we have been responsible for process development, class member intake, correspondence, claims processing, medical record validation, fund administration, and fraud detection. We designed and implemented an on-going 21-year periodic medical evaluation program that involves over 22,000 eligible class members who are entitled to services at 233 locations through 153 medical provider organizations.

NFL CONCUSSION LITIGATION

Upon joint recommendation of co-lead class counsel and counsel for the NFL, Garretson will serve as the baseline assessment program administrator for the NFL Concussion Settlement. That settlement calls the creation of a national network of medical service providers to perform baseline assessment and follow-up care for an estimated 17,000 players over the next 10 years.