

**IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

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IN RE: DIET DRUGS (PHENTERMINE/FENFLURAMINE/  
DEXFENFLURAMINE) PRODUCTS LIABILITY  
LITIGATION

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MDL NO. 1203

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THIS DOCUMENT RELATES TO: SHEILA BROWN, ET  
AL. V. AMERICAN HOME PRODUCTS CORPORATION

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CIVIL ACTION  
No. 99-20593

**COURT APPROVED PROCEDURE NO. 15**

(PROCEDURE FOR THE RESOLUTION OF CERTAIN MATRIX CLAIMS IN SHOW CAUSE)

AND NOW, in accordance with the Nationwide Class Action Settlement Agreement and the agreement of Class Counsel and Wyeth, it is hereby ORDERED as follows:

1. ***Incorporation of Settlement Agreement Definitions.*** The capitalized terms used in this Procedure shall have the same meaning as those terms have in the Settlement Agreement and/or the Seventh Amendment to the Settlement Agreement. Additional capitalized terms defined in this Procedure shall have the meanings given to them in this Procedure. References in this Procedure to a Paragraph number, unless otherwise specified, refer to paragraphs in this Procedure.
2. ***Compromise of Claims Subject to Show Cause Proceedings.*** This Procedure implements an agreement among Wyeth, Class Counsel and the Class Members who participate in this Procedure to settle and compromise the claims described in Paragraph 3 pursuant to the terms of this Procedure.
3. ***Scope of this Procedure.*** This Procedure applies to the claims for Matrix Compensation Benefits pending in the Show Cause process of those Class Members identified in Exhibit 1 to this Procedure who do not timely and properly opt out of this Procedure under Paragraph 14 ("CAP15 Claims").
4. ***Reviewable Echocardiograms.***
  - (a) For purposes of this Procedure, the "Reviewable Echocardiogram" for a CAP15 Claim is the echocardiogram that was the subject of the Audit that is at issue in the Show Cause proceedings for each such CAP15 Claim.
  - (b) Where there is more than one echocardiogram that was the subject of the Audit that is at issue in the Show Cause proceedings for a CAP15 Claim, then the Class Member shall, pursuant to Paragraph 7(a), designate which of those multiple echocardiograms shall be the subject of Medical Review under this Procedure and the echocardiogram thus designated shall be the "Reviewable Echocardiogram." If the Class Member fails timely and properly to designate a "Reviewable

**EXHIBIT A**

Echocardiogram” pursuant to Paragraph 7(a), then the Trust shall select one of the multiple echocardiograms that was the subject of the Audit at issue in the show cause proceedings for Medical Review hereunder and that echocardiogram shall be the “Reviewable Echocardiogram.” In the limited instance where a CAP15 Claim rested upon one echocardiogram conducted during the Screening Period as the basis for the Class Member’s assertion of FDA Positive or Mild Mitral regurgitation but no Matrix-Level condition during the Screening Period and another echocardiogram conducted after the end of the Screening Period as the basis for the Class Member’s assertion of a Matrix-Level condition, the Class Member shall designate both such echocardiograms as the two “Reviewable Echocardiograms” on such CAP15 Claim and the Reviewable Echocardiogram conducted during the Screening Period shall determine regurgitation levels during the Screening Period for all purposes under this Procedure.

5. ***Notice to Affected Class Members.*** Within ten days after the Effective Date of this Procedure, Class Counsel and Wyeth shall cause a copy of this Procedure to be mailed by first class mail, postage prepaid, to the primary counsel of record for each Class Member identified on Exhibit 1 and to each Class Member identified on Exhibit 1 at the last known address of such counsel and such Class Members as reflected in the claims database of the Trust made available to Wyeth by the Trust, along with a Notice explaining the terms of this Procedure, including the action required of a Class Member either to take advantage of this Procedure or to opt out of this Procedure.

6. ***Medical Review by a Participating Physician.***

- (a) For each Class Member with a CAP15 claim who has not timely and properly opted-out of this Procedure and who has either paid the Medical Review Fee required under Paragraph 7(b) or who is not required to pay a Medical Review Fee under Paragraph 7(b), the Fund Administrator shall, within 170 days after the Effective Date of this Procedure, cause the Reviewable Echocardiogram(s) to be reviewed by a Participating Physician under the terms of Section XV.I of the Seventh Amendment to determine, pursuant to the methodology for Medical Review of claims under Section XV.M of the Seventh Amendment, the medical conditions shown on the Reviewable Echocardiogram(s).
- (b) The Participating Physician shall record the results of such review in a report (“Medical Review Report”) substantially in the form of a QCC Report under Section XV.I of the Seventh Amendment. The Fund Administrator shall furnish a copy of the Medical Review Report to the affected Class Member (or Class Member’s counsel, if represented), the Trust, Class Counsel and (in electronic and hard copy form) Wyeth. The findings of the Participating Physician in the Medical Review Report shall be final and binding on the Class Member, Wyeth and the Trust for all purposes relating to the CAP15 Claim, with no further rights of contest or appeal. The Trust shall not conduct any further Medical review of the CAP15 Claim and the underlying medical condition of the Class Member or otherwise seek to contest the accuracy or reliability of the Medical Review

Report in any fashion or for any purpose relating to the CAP15 Claim. The Trust shall presume that any condition necessary to qualify for Matrix Compensation Benefits does not exist where the Medical Review Report states that such a condition is not evaluable based on Medical Review of the Reviewable Echocardiogram(s). The Trust shall presume that any reduction factor that places a Matrix claim on Matrix B does exist where the Medical Review Report states that such a condition is not evaluable based on Medical Review of the Reviewable Echocardiogram(s).

- (c) The Fund Administrator shall process each CAP15 Claim in accordance with the standards and practices observed in the Medical Review of the claims of Category One Class Members under the Seventh Amendment, including the standards for review of echocardiograms that are found to be unevaluable, in whole or in part, and the standards that require that the Participating Physician review the claim without awareness of whether the Class Member is represented by counsel, the identity of the counsel for any represented Class Member, or the Attesting Physician on the claim. The Fund Administrator shall assign CAP15 Claims to Participating Physicians for review in a manner that allocates all CAP15 Claims substantially equally among all the Participating Physicians who are available and eligible to conduct Medical Reviews.

**7. *Medical Review Fee and Designation of the Reviewable Echocardiogram(s).***

Within 60 days after the date of mailing of Notice to a Class Member of this Procedure under Paragraph 5 each Class Member with a CAP15 Claim who has not opted-out of this Procedure shall:

- (a) Provide the Fund Administrator and the Trust with written designation of the echocardiogram(s) to be the Reviewable Echocardiogram(s) in accordance with Paragraph 4;
- (b) Pay to the Fund Administrator a Medical Review Fee as follows:
  - (1) If the Class Member has not paid to the Special Master a fee for the costs of a Technical Advisor in the Show Cause process, ("Technical Advisor Fee"), the Class Member shall pay a Medical Review Fee of \$1,000.
  - (2) If the Class Member has paid a Technical Advisor Fee to the Special Master and the Technical Advisor has not issued a Technical Advisor Report on the claim, the Class Member shall not be required to pay an additional Medical Review Fee. Instead, the Special Master and the Fund Administrator shall arrange for the transfer to the Fund Administrator of \$1,000 of the paid Technical Advisor Fee and the Special Master shall refund \$500 to the Class Member.
  - (3) If the Class Member has paid a Technical Advisor Fee to the Special Master and the Technical Advisor has issued a Technical Advisor Report on the

claim, the Class Member shall pay a Medical Review Fee of \$500.

- (4) If, on or before October 31, 2007, the Special Master granted the Class Member a TA Fee waiver on the ground of hardship, the Class Member shall not be required to pay a Medical Review Fee.
  - (c) Subject to Paragraph 16, any Medical Review Fee paid by a Class Member is non-refundable, regardless of the outcome of the Class Member's CAP15 Claim.
  - (d) Within 30 days after the Class Member's designation of the Reviewable Echocardiogram(s) under Paragraph 7(a), the Trust shall deliver to the Fund Administrator a copy of the Reviewable Echocardiogram(s) for each Class Member with a CAP15 Claim who has not opted out of this Procedure and who has timely paid any Medical Review Fee required of the Class Member under Paragraph 7(b). If requested by the Trust, the Special Master shall return to the Trust the copies of the Reviewable Echocardiogram(s) previously provided to the Special Master in the Show Cause process on any claim for which the Trust is required to deliver echocardiogram copies to the Fund Administrator under this Procedure.
  - (e) The Trust shall deny the CAP15 Claim of any Class Member who fails to pay timely a Medical Review Fee required of the Class Member under Paragraph 7(b). Such denial shall be final with no further rights of contest or appeal and the Class Member may not pursue any other proceedings of any kind relating to the CAP15 Claim. The Trust shall notify the Class Member of any such denial.
- 8. *Eligibility for Matrix Compensation Benefits on a CAP15 Claim.***
- (a) The Trust shall determine a Class Member's eligibility for Matrix Compensation Benefits on a CAP15 Claim solely on the basis of: (i) the findings of the Participating Physician in the Medical Review Report; (ii) the answers contained in Section E of Part II of the Green Form submitted in connection with the claim; and (iii) the proof of Diet Drug use submitted by the Class Member. The Trust shall not apply Court Approved Procedure No. 4 to a CAP15 Claim.
  - (b) A Class Member who is found eligible under Paragraph 8(a) for Matrix Compensation Benefits on a CAP15 Claim shall be paid an amount equal to 70% of the amount of the Matrix Compensation Benefits that otherwise would be payable on the claim. If any such Class Member previously has received Matrix Compensation Benefits on Matrix B and is found eligible under Paragraph 8(a) for Matrix Compensation Benefits on Matrix A, such Class Member shall be paid 70% of the difference between the Matrix B benefit amount previously paid to the Class Member and the Matrix A benefit amount payable on the claim under Paragraph 8(a). The Medical Review Report shall not affect any Matrix Compensation Benefits previously paid to such Class Member.

**9. *Additional Medical Services or Cash Benefit.***

- (a) A Class Member found eligible for Matrix Compensation Benefits under Paragraph 8(a) shall not be eligible for the Additional Medical Services or Cash Benefit under Section IV.A.1.c or Section IV.A.2.c of the Settlement Agreement (“Cash/Med Benefit”). This shall not affect any Cash/Med Benefits paid to the Class Member before the Effective Date of this Procedure.
- (b) A Class Member found in the Medical Review Report to be ineligible for Matrix Compensation Benefits under Paragraph 8(a) but to have FDA Positive levels of regurgitation on the Class Member's Reviewable Echocardiogram shall be eligible for the Cash/Med Benefit, if the Class Member is otherwise eligible for such benefit under the Settlement Agreement and has not been paid such benefit previously.
- (c) A Class Member found in the Medical Review Report not to have FDA Positive levels of regurgitation on the Reviewable Echocardiogram or who otherwise is ineligible for the Cash/Med Benefit shall not be eligible for the Cash/Med Benefit.
- (d) A Class Member whose CAP15 Claim is denied under Paragraph 7(e) for failure to pay a Medical Review Fee shall be eligible for the Cash/Med Benefit if the Auditing Cardiologist in the Audit of the Class Member's CAP15 Claim found the Class Member to have FDA Positive levels of regurgitation and if the Class Member is otherwise eligible for such benefit under the Settlement Agreement and has not been paid such benefit previously. A Class Member whose CAP15 Claim is denied under Paragraph 8(a) who was found by the Auditing Cardiologist not to have FDA Positive levels of regurgitation shall not be eligible for the Cash/Med Benefit.

**10. *Category Two Payment.***

- (a) A Class Member found eligible for Matrix Compensation Benefits under Paragraph 8(a) shall not be eligible for a Category Two Payment.
- (b) A Class Member found in the Medical Review Report to be ineligible for Matrix Compensation Benefits under Paragraph 8(a) but to have FDA Positive levels of regurgitation or Mild Mitral Regurgitation on the Reviewable Echocardiogram shall be eligible for a Category Two Payment, if the Class Member is otherwise eligible for such benefit under the Settlement Agreement and has not been paid such benefit previously.
- (c) A Class Member whose CAP15 Claim is denied under Paragraph 7(e) for failure to pay a Medical Review Fee shall be eligible for a Category Two Payment if the Class Member is otherwise eligible for such benefit under the Settlement Agreement and has not been paid such benefit previously.

- (d) A Class Member who (i) is found in the Medical Review Report not to have FDA Positive levels of regurgitation or Mild Mitral Regurgitation; (ii) previously has been paid any Matrix Compensation Benefits; or (iii) otherwise is ineligible for the Category Two Payment, shall not be eligible for a Category Two Payment.

**11. *Final Post-Audit Determination and Payment on a CAP15 Claim.***

- (a) Within 20 days after its receipt of the Medical Review Report from the Fund Administrator on a CAP15 Claim, the Trust shall issue a Final Post-Audit Determination to the Class Member, including the determinations required by Section VI.C.4.g of the Settlement Agreement.
- (b) Within 30 days after the date of the Final Post-Audit Determination, the Trust shall pay the Matrix Compensation Benefits payable on a CAP15 Claim found eligible for payment hereunder.
- (c) If the Class Member is found ineligible under Paragraph 8(a) for any Matrix Compensation Benefits, the Final Post-Audit Determination to the Class Member shall state the denial of the CAP15 Claim and shall specify any benefits to which the Class Member is entitled under Paragraph 9 (Cash/Med Benefit) and/or Paragraph 10 (Category Two Payment). The Trust shall record the CAP15 Claim in its claims database as denied. Such denial shall be final with no further rights of contest or appeal and the Class Member may not pursue any other proceedings of any kind relating to the claim. Nothing in this Procedure shall affect any Matrix Compensation Benefits paid to the Class Member before the Effective Date of this Procedure.

**12. *Seventh Amendment Matrix Compensation Benefits.*** A Class Member with a CAP15 Claim shall be a Category Two Class Member pursuant to the Seventh Amendment, regardless of the outcome of the Class Member's CAP15 Claim under this Procedure. A Class Member with a CAP15 Claim shall not be eligible to seek or receive Matrix Compensation Benefits on Matrix Level I or II (except with respect to the CAP15 Claim subject to this Procedure), and shall be eligible to seek or receive Matrix Compensation Benefits on Matrix Levels III, IV, or V only as Seventh Amendment Matrix Compensation Benefits under Section IX.A of the Seventh Amendment.

**13. *Revocation of Opt-Outs.*** Any Initial Opt-Out, Intermediate Opt-Out, Back-End Opt-Out, and/or Seventh Amendment Opt-Out submitted at any time by a Class Member with a CAP15 Claim who has not timely and properly opted out of this Procedure shall be deemed revoked pursuant to this Procedure.

**14. *Opting Out of this Procedure.*** This Procedure shall apply to each Class Member identified in Exhibit 1 and the Matrix claim of each such Class Member shall be a CAP15 Claim under this Procedure unless the Class Member mails written notice to the Trust, Class Counsel and Wyeth, postmarked no later than 30 days after the date of mailing of the Notice under Paragraph 5 to that Class Member (or the Class Member's counsel, if represented), clearly stating

the Class Member's election to opt out of this Procedure. The Matrix claim of a Class Member who timely and properly opts out of this Procedure shall continue through the Show Cause process and that Matrix claim and any other claims of the Class Member shall be processed by the Trust in accordance with the Settlement Agreement and all applicable Orders of the Court.

15. **Stay of Show Cause Proceedings.** As of the Effective Date of this Procedure, all Trust processing and Show Cause proceedings of any kind relating to the claims of each Class Member identified on Exhibit 1, including the review of claims by a Technical Advisor and the issuance of Technical Advisor Reports, shall be stayed, except as permitted by this Order. Upon the last day of the period described in Paragraph 14, such stay shall expire as to the claim of any Class Member who timely and properly opts out of this Procedure under Paragraph 14.

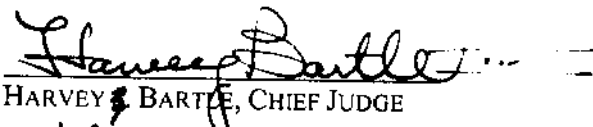
16. **Termination of this Procedure by Wyeth.** At any time within 30 days after the expiration of the period described in Paragraph 14, Wyeth shall have the right, in its sole discretion and for any reason, to terminate this Procedure by written notice to the Trust and Class Counsel. If Wyeth timely exercises this right of termination:

- (a) All terms of this Procedure shall be null and void;
- (b) Any stay entered pursuant to Paragraph 15 shall immediately terminate; and
- (c) The Fund Administrator shall, within 15 days after receipt of a notice of termination from Wyeth, refund to the Class Member any Medical Review Fee received by the Fund Administrator from that Class Member.

17. **Application of this Procedure to Other Matrix Claims.** If Wyeth, Class Counsel, and a Class Member agree in writing, this Procedure shall apply to a claim for Matrix Compensation Benefits that is not a CAP15 Claim. Any such agreement shall specify the deadlines required to implement this Procedure as to such claim.

18. **Effective Date of this Procedure.** This Procedure shall become effective upon the entry of an Order of approval by the Court.

BY THE COURT

  
HARVEY BARTLE, CHIEF JUDGE  
February 8, 2008

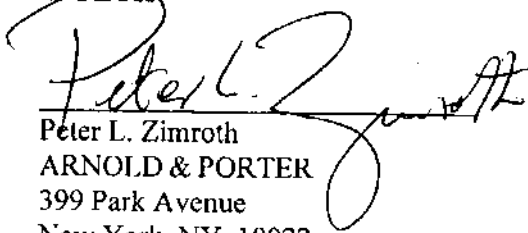
**AGREED:**

**CLASS COUNSEL:**

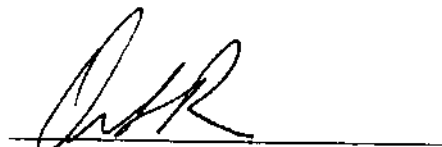


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**WYETH**



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115 S. 15th Street, Suite 400  
Richmond, Virginia 23219

**CONSENTED AND AGREED TO:**

**AHP SETTLEMENT TRUST**



Martin Rudolph  
Trustee  
AHP Settlement Trust  
1818 Market Street  
Philadelphia, Pennsylvania 19103



**Class Members with CAP 15 Claims**

**(As of 12/17/07)**

**Group A: \$1,000 Medical Fee Required**

Row	DDR	Row	DDR	Row	DDR	Row	DDR	Row	DDR	Row	DDR
1.	63156	42.	2154334	83.	3613346	124.	8030823	165.	8080276	206.	8172102
2.	154054	43.	2215036	84.	3613510	125.	8033086	166.	8082419	207.	8172321
3.	202846	44.	2293702	85.	3613650	126.	8035588	167.	8083923	208.	8172343
4.	215475	45.	2314805	86.	3613791	127.	8035672	168.	8085428	209.	8172453
5.	223636	46.	2373520	87.	3613908	128.	8036552	169.	8085773	210.	8173408
6.	316273	47.	2443182	88.	3615002	129.	8037457	170.	8086590	211.	8173529
7.	394577	48.	2443992	89.	3616596	130.	8037553	171.	8089975	212.	8174612
8.	495838	49.	2479392	90.	3616620	131.	8038329	172.	8090974	213.	8175960
9.	498105	50.	2499036	91.	3642121	132.	8038703	173.	8092382	214.	8176876
10.	567883	51.	2552891	92.	3655818	133.	8040188	174.	8094023	215.	8177069
11.	573222	52.	2672301	93.	3666310	134.	8040318	175.	8096146	216.	8177272
12.	637447	53.	2675668	94.	3667029	135.	8042803	176.	8108002	217.	8177600
13.	710236	54.	2704070	95.	8000170	136.	8042841	177.	8108543	218.	8178271
14.	884049	55.	2748069	96.	8000459	137.	8043382	178.	8109559	219.	8178284
15.	900225	56.	2771962	97.	8000527	138.	8043395	179.	8121665	220.	8178361
16.	968628	57.	2774776	98.	8001211	139.	8043418	180.	8125014	221.	8178374
17.	1222496	58.	2786598	99.	8001263	140.	8043490	181.	8128124	222.	8178414
18.	1231812	59.	2797595	100.	8002800	141.	8044530	182.	8129832	223.	8178417
19.	1238617	60.	2834497	101.	8005167	142.	8045838	183.	8138255	224.	8178434
20.	1259159	61.	2892156	102.	8005411	143.	8045952	184.	8145886	225.	8178444
21.	1322882	62.	2909638	103.	8005434	144.	8046863	185.	8146005	226.	8178520
22.	1374511	63.	2947067	104.	8006448	145.	8046973	186.	8147212	227.	8179345
23.	1497171	64.	3021607	105.	8007093	146.	8047055	187.	8150957	228.	8179387
24.	1512813	65.	3194404	106.	8007372	147.	8047125	188.	8152603	229.	8180086
25.	1536457	66.	3196474	107.	8008245	148.	8049514	189.	8152979	230.	8180440
26.	1650340	67.	3199320	108.	8012044	149.	8050649	190.	8155118	231.	8180887
27.	1692599	68.	3223427	109.	8012994	150.	8052230	191.	8159764	232.	8182112
28.	1717685	69.	3259363	110.	8014586	151.	8052240	192.	8160365	233.	8182927
29.	1743798	70.	3300696	111.	8016385	152.	8052930	193.	8162960	234.	8182994
30.	1771005	71.	3370640	112.	8016758	153.	8056669	194.	8163157	235.	8183259
31.	1778000	72.	3383205	113.	8017609	154.	8057487	195.	8165572	236.	8183522
32.	1783745	73.	3386604	114.	8018497	155.	8058815	196.	8166253	237.	8183712
33.	1796184	74.	3399300	115.	8019070	156.	8059510	197.	8166297	238.	8183721
34.	1813096	75.	3405446	116.	8019993	157.	8062328	198.	8167827	239.	8183754
35.	1826288	76.	3442019	117.	8020202	158.	8062657	199.	8168445	240.	8184129
36.	1881036	77.	3461134	118.	8022047	159.	8063690	200.	8168634	241.	8184336
37.	1899087	78.	3491321	119.	8024530	160.	8065363	201.	8170585	242.	8184611
38.	1963735	79.	3491776	120.	8024541	161.	8065510	202.	8170628	243.	8184837
39.	1969849	80.	3538568	121.	8024737	162.	8070317	203.	8170821	244.	8185498
40.	2031359	81.	3549698	122.	8024759	163.	8073359	204.	8171159	245.	8185513
41.	2084903	82.	3613080	123.	8027714	164.	8075428	205.	8171907	246.	8185516

**Class Members with CAP 15 Claims****(As of 12/17/07)****Group A: \$1,000 Medical Fee Required**

<b>247.</b>	8185573	<b>260.</b>	8191168	<b>273.</b>	8200512	<b>286.</b>	8212010	<b>299.</b>	8248458	<b>312.</b>	8276126
<b>248.</b>	8186065	<b>261.</b>	8191395	<b>274.</b>	8201631	<b>287.</b>	8213777	<b>300.</b>	8250430	<b>313.</b>	8276967
<b>249.</b>	8186450	<b>262.</b>	8192752	<b>275.</b>	8203497	<b>288.</b>	8215263	<b>301.</b>	8256298	<b>314.</b>	8278644
<b>250.</b>	8186644	<b>263.</b>	8195452	<b>276.</b>	8203504	<b>289.</b>	8217801	<b>302.</b>	8257198	<b>315.</b>	8280609
<b>251.</b>	8186649	<b>264.</b>	8195482	<b>277.</b>	8203573	<b>290.</b>	8218603	<b>303.</b>	8258017	<b>316.</b>	8281825
<b>252.</b>	8186746	<b>265.</b>	8195938	<b>278.</b>	8204552	<b>291.</b>	8221349	<b>304.</b>	8258069	<b>317.</b>	8282106
<b>253.</b>	8186930	<b>266.</b>	8196488	<b>279.</b>	8204565	<b>292.</b>	8223822	<b>305.</b>	8259603	<b>318.</b>	9888992
<b>254.</b>	8187409	<b>267.</b>	8196660	<b>280.</b>	8205526	<b>293.</b>	8227308	<b>306.</b>	8261550	<b>319.</b>	9890903
<b>255.</b>	8188127	<b>268.</b>	8197184	<b>281.</b>	8205691	<b>294.</b>	8230013	<b>307.</b>	8262206	<b>320.</b>	9892244
<b>256.</b>	8188276	<b>269.</b>	8199336	<b>282.</b>	8206711	<b>295.</b>	8232675	<b>308.</b>	8262902		
<b>257.</b>	8188336	<b>270.</b>	8199404	<b>283.</b>	8210178	<b>296.</b>	8234564	<b>309.</b>	8266240		
<b>258.</b>	8189781	<b>271.</b>	8199893	<b>284.</b>	8211273	<b>297.</b>	8235871	<b>310.</b>	8273617		
<b>259.</b>	8190122	<b>272.</b>	8200420	<b>285.</b>	8211274	<b>298.</b>	8245723	<b>311.</b>	8275942		

**Class Members with CAP 15 Claims****(As of 12/17/07)****Group B: No Additional Medical Fee Required**

Row	DDR	Row	DDR	Row	DDR	Row	DDR	Row	DDR	Row	DDR
1.	54528	27.	2576015	53.	8017429	79.	8127132	105.	8181337	131.	8233617
2.	79913	28.	2605228	54.	8018169	80.	8129434	106.	8181901	132.	8237570
3.	97048	29.	2641678	55.	8019723	81.	8130515	107.	8183400	133.	8241515
4.	161257	30.	2876258	56.	8020206	82.	8133633	108.	8183633	134.	8247939
5.	301317	31.	2926137	57.	8020472	83.	8138380	109.	8183728	135.	8248963
6.	452029	32.	2977775	58.	8021081	84.	8143158	110.	8183899	136.	8249778
7.	599258	33.	3093952	59.	8023100	85.	8143651	111.	8185549	137.	8249934
8.	643981	34.	3177920	60.	8024508	86.	8143830	112.	8186723	138.	8250403
9.	652826	35.	3210416	61.	8025337	87.	8160764	113.	8186831	139.	8254569
10.	783365	36.	3273729	62.	8027294	88.	8161458	114.	8188621	140.	8257291
11.	854984	37.	3397692	63.	8033045	89.	8163153	115.	8189452	141.	8261560
12.	990846	38.	3439023	64.	8038321	90.	8165757	116.	8189862	142.	8271824
13.	1001593	39.	3452299	65.	8041347	91.	8169120	117.	8190016	143.	8272776
14.	1232182	40.	3541513	66.	8054124	92.	8170353	118.	8193632	144.	8278334
15.	1252154	41.	3547460	67.	8066605	93.	8172695	119.	8193677		
16.	1328848	42.	3612520	68.	8067247	94.	8174318	120.	8194050		
17.	1516863	43.	3612918	69.	8068536	95.	8177422	121.	8197353		
18.	1638972	44.	3629953	70.	8068834	96.	8177451	122.	8199882		
19.	1707785	45.	3645561	71.	8070970	97.	8177631	123.	8201660		
20.	1779586	46.	3671237	72.	8091466	98.	8177657	124.	8202436		
21.	1832880	47.	8000180	73.	8095917	99.	8178075	125.	8203567		
22.	1879543	48.	8000255	74.	8096691	100.	8179067	126.	8203953		
23.	2000271	49.	8006983	75.	8103557	101.	8180104	127.	8204544		
24.	2238988	50.	8012837	76.	8106191	102.	8180267	128.	8215466		
25.	2413706	51.	8014685	77.	8106781	103.	8180668	129.	8215865		
26.	2424802	52.	8016665	78.	8122446	104.	8180770	130.	8223292		

**Class Members with CAP 15 Claims****(As of 12/17/07)****Group C: \$500 Medical Fee Required**

Row	DDR	Row	DDR	Row	DDR	Row	DDR	Row	DDR	Row	DDR
1.	92171	28.	2257715	55.	3572542	82.	8010097	109.	8043141	136.	8180371
2.	112771	29.	2305050	56.	3602208	83.	8010356	110.	8043249	137.	8180439
3.	162182	30.	2407062	57.	3611241	84.	8010972	111.	8044369	138.	8182162
4.	228007	31.	2428274	58.	3613809	85.	8011812	112.	8044406	139.	8188551
5.	421578	32.	2505451	59.	3621901	86.	8013015	113.	8049960	140.	8188618
6.	591693	33.	2545812	60.	3625613	87.	8015205	114.	8050751	141.	8190566
7.	607202	34.	2556421	61.	3641040	88.	8015562	115.	8054161	142.	8191453
8.	690479	35.	2573384	62.	3668456	89.	8016705	116.	8060519	143.	8194232
9.	737544	36.	2583474	63.	3673035	90.	8017009	117.	8068373	144.	8199401
10.	1191519	37.	2624195	64.	3675154	91.	8019812	118.	8068462	145.	8199417
11.	1244302	38.	2630903	65.	3678927	92.	8021052	119.	8068754	146.	8200729
12.	1317767	39.	2643328	66.	3686789	93.	8021101	120.	8073563	147.	8202887
13.	1392109	40.	2690014	67.	8000184	94.	8021149	121.	8087707	148.	8205119
14.	1394584	41.	2791010	68.	8003674	95.	8021343	122.	8092510	149.	8209748
15.	1411388	42.	2932366	69.	8004339	96.	8021451	123.	8095772	150.	8220215
16.	1419555	43.	2963510	70.	8004341	97.	8021466	124.	8108183	151.	8229952
17.	1505882	44.	2989796	71.	8005089	98.	8021697	125.	8120756	152.	8231353
18.	1519164	45.	3004546	72.	8005390	99.	8021999	126.	8122088	153.	8257502
19.	1647874	46.	3269727	73.	8005391	100.	8024269	127.	8122437	154.	8279926
20.	1785740	47.	3335486	74.	8005995	101.	8033078	128.	8125989	155.	9890192
21.	1812502	48.	3347358	75.	8006114	102.	8033748	129.	8126483	156.	9890219
22.	1836444	49.	3415395	76.	8006715	103.	8036616	130.	8145602	157.	9890673
23.	1951730	50.	3461084	77.	8007426	104.	8038541	131.	8162707		
24.	1960327	51.	3477429	78.	8007535	105.	8040015	132.	8173320		
25.	2004356	52.	3491941	79.	8008511	106.	8040861	133.	8175110		
26.	2114452	53.	3562436	80.	8008837	107.	8041223	134.	8175896		
27.	2204683	54.	3565363	81.	8009887	108.	8042877	135.	8178130		

**Class Members with CAP 15 Claims**

**(As of 12/17/07)**

**Group D: Special Master Hardship Waivers--No Medical Fee Required**

<b>Row</b>	<b>DDR</b>
1.	95679
2.	826232
3.	3245255
4.	3407400
5.	3614757
6.	8003278
7.	8015629
8.	8038684
9.	8043342
10.	8119009
11.	8127186
12.	8145916
13.	8183558
14.	8196542
15.	8205258
16.	8273423