

THE SOUTHERN DISTRICT OF FLORIDA
Miami Division
MDL NO. 1334
MASTER FILE NO.: 00-1334-MD-MORENO

IN RE:
MANAGED CARE LITIGATION

THIS DOCUMENT RELATES TO
THE FOLLOWING PROVIDER TRACK CASES:

Shane, et al. v. Humana Inc., et al. (Shane I)

Shane, et al. v. Humana Inc., et al, Case No. 04-21589-CIVMORENO
(Shane II)

HUMANA PHYSICIAN, PHYSICIAN GROUP AND PHYSICIAN
ORGANIZATION SETTLEMENT COMPLIANCE DISPUTE CLAIM FORM

The undersigned hereby declares that he, she or it is a Class Member and did not Opt Out of the Humana Physician, Physician Group and Physician Organization Settlement Agreement.

Name: _____

Address: _____

Tax Identification Number: _____

Humana Provider Number (if applicable): _____

Email Address: _____

Telephone Number: _____

Physician Signature: _____

Signature (Print): _____ Date: _____

Check one of the following:

I am bringing this Compliance Dispute on my own behalf

I hereby authorize the following Signatory Medical Society to bring this

Compliance Dispute on my behalf: _____

