Blue Cross Blue Shield Provider Nationwide — Settlement Summary

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Blue Cross Blue Shield Provider Settlement (Nationwide)

Summary

This settlement resolves antitrust claims brought by healthcare providers against Blue Cross Blue Shield entities, alleging that the defendants illegally divided the United States into exclusive "Service Areas," agreed not to compete within those areas, and fixed reimbursement prices for provider services. The case, *In re: Blue Cross Blue Shield Antitrust Litigation*, was litigated in the U.S. District Court for the Northern District of Alabama, Southern Division. Final approval was granted on August 19, 2025, and the settlement became effective on September 19, 2025. **Note: This is a separate settlement from the Blue Cross Blue Shield Subscribers Settlement (www.BCBSSettlement.com).**

Announcements

- **Claim Filing Deadline Has Passed:** The claim submission deadline was July 29, 2025. The Settlement Administrator is no longer accepting new claims or changes to existing claims absent a showing of good cause. Any new claims submitted are untimely and may not be honored or reviewed.
- **Claim Notices Issuing (as of February 16, 2026):** The Settlement Claims Administrator began issuing claim notices on February 16, 2026, acknowledging receipt of submitted claims. Notices are being issued on a rolling basis. Claimants should monitor the email address associated with their portal account and log in frequently to check for new notices.
- **Email Whitelisting Recommended:** To ensure claim notices are not blocked by spam filters, claimants should whitelist *NoReply@bcbsprovidersettlement.com* and *Administrator@bcbsprovidersettlement.com*.
- **Settlement Effective:** The settlement became effective on September 19, 2025, following final approval on August 19, 2025.
- **Settlement Claims Administrator Appointed:** On October 1, 2025, the Court appointed BrownGreer PLC as the Settlement Claims Administrator.
- **Case Reassigned:** A Notice of Reassignment was filed on January 6, 2026. The presiding judge remains U.S. District Judge Ann M. Manasco.

Settlement Amount

The specific total settlement fund dollar amount is not published on the settlement website pages reviewed. Class members with approved claims ("Authorized Claimants") will receive a payment from the "Net Settlement Fund." Per-claimant payment amounts are not yet available; distributions are subject to claims analysis and evaluation currently ongoing by the Settlement Claims Administrator.

Class Period

July 24, 2008 to October 4, 2024. A provider does not need to have met the Settlement Class definition for the entirety of this period — any provider who qualifies for even a portion of the class period may be eligible to recover.

Filing Deadline

The filing deadline has passed. The claims submission deadline was **July 29, 2025**. The Settlement Administrator is no longer accepting new claims or edits to existing claims without a showing of good cause. Claimants with existing portal accounts may log in to view their claim form and update contact information only. For changes to other sections, claimants must contact the Administrator at *Administrator@BCBSProviderSettlement.com* or **(888) 452-3095**.

Who Qualifies

The Settlement Class includes all **Providers** in the United States (except Excluded Providers) who currently provide or provided healthcare services, equipment, or supplies to any patient who was insured by, was a member of, or was a beneficiary of any plan administered by any Settling Individual Blue Plan from July 24, 2008 to October 4, 2024. Qualifying providers fall into two main categories:

- **Professional Claimants:**
  - **Medical Professionals:** Individual providers who provide or provided healthcare services in the U.S.
  - **Medical Groups:** Two or more Medical Professionals (and those claiming by or through them) practicing under a single taxpayer identification number (TIN).
  - **Medical Organizations:** Associations, partnerships, corporations, or other organizations — including independent practice associations and physician hospital organizations — that arrange or arranged for care to be provided to Blue Plan members by Medical Professionals organized under multiple TINs.
- **Facility Claimants:**
  - **Health Care Facilities:** Any facility (e.g., hospital, ambulatory surgical center, dialysis center, imaging center) in which healthcare services were delivered to Blue Plan Members and that charges or charged facility fees.
  - **Health Care Systems:** Any association, partnership, corporation, or other organization that arranges or arranged for care to be provided to Blue Plan Members by two or more Health Care Facilities.

Who Is Excluded

"Excluded Providers" are not part of the Settlement Class and are not eligible to file claims. The settlement website references FAQ 5 for the full definition of Excluded Providers, but does not reproduce the full list on the pages reviewed. FRS should consult the Settlement Agreement (filed October 14, 2024) or the FAQ page for a complete enumeration of excluded parties.

How to File

The filing deadline has passed (July 29, 2025). The instructions below are preserved for reference.

- **Step 1 — Determine claim type:** Identify whether you are filing as a Professional Claimant (Medical Professional, Medical Group, or Medical Organization) or a Facility Claimant (Health Care Facility or Health Care System).
- **Step 2 — Access the portal:** Log in or register at the official settlement website portal (link in banner at *BCBSProviderSettlement.com*).
- **Step 3 — Complete the appropriate claim form:**
  - Professional Claimants: Complete the Professional Claim Form (see *Professional Claim Form Instructions* in the Important Documents section).
  - Facility Claimants: Complete the Facilities Claim Form. Facilities must choose between two methods for reporting Allowed Amounts:
    - **Option A:** Allow the Settlement to determine the facility's estimated Allowed Amounts. Note: this choice is binding and cannot be changed after submission. However, facilities choosing Option A will have an opportunity to review estimated Allowed Amounts before distribution.
    - **Option B (Alternative Method):** Submit your own estimated Allowed Amounts. Required for

facilities not open before January 1, 2015, and for facilities in Arizona, Iowa, Louisiana, Maryland, New Jersey, South Dakota, CareFirst's Virginia service area, the District of Columbia, and Puerto Rico. Data for missing years can be supplemented using CPI-based calculations. Bulk submission is available for Health Care Systems.

- **Step 4 — Submit TIN information:** Provide a current Tax ID for payment/tax reporting. Inactive TINs used during the class period may be listed in the rider section if the claimant owns the right to file for those TINs.
- **Step 5 — Submit and monitor:** After submission, monitor the portal and associated email for claim notices from the Settlement Claims Administrator. Notices began issuing on a rolling basis starting February 16, 2026.
- **Appeals:** A Common Appeals Form is available in the Important Documents section of the settlement website.

For questions about an existing claim, contact the Settlement Claims Administrator at **Administrator@BCBSProviderSettlement.com** or **(888) 452-3095**. General inquiries may also be directed to **+1 (833) 458-2700**.

Defendants

The defendants are the **Blue Cross Blue Shield Association (BCBSA)** and the **Settling Individual Blue Plans** (collectively, "Settling Defendants"). The alleged conduct includes:

- Illegally dividing the United States into exclusive geographic "Service Areas" and agreeing not to compete with one another in those areas, in violation of federal antitrust laws.
- Fixing prices (reimbursement rates) for services provided by healthcare providers to Blue Plan members.

Case History

- **August 20, 2013:** Court grants Defendants' Motion to Dismiss (later reversed or otherwise resolved, as litigation continued).
- **October 14, 2024:** Settlement Agreement filed; Motion for Preliminary Approval filed.
- **October 23, 2024:** Provider Plaintiffs file supplement to memoranda in support of preliminary approval.
- **November 13, 2024:** Provider Plaintiffs file notice of amended documents in support of preliminary approval.
- **December 2, 2024:** Provider Plaintiffs file second notice of amended documents.
- **December 3, 2024:** Court issues Order Overruling Objections.
- **December 4, 2024:** Preliminary Approval granted.
- **January 31, 2025:** Provider Plaintiffs file expert declarations (Slottje & Rogers; Katz).
- **February 2, 2025:** Motion for Attorneys' Fees and Expenses filed.
- **March 4, 2025:** Opt-Out / Objection Deadline.
- **April 23, 2025:** Motion for Final Approval filed; Valid Opt-Out List published.
- **April 24, 2025:** Provider Plaintiffs file corrected documents in support of Final Approval.
- **July 29, 2025:** Claims Submission Deadline (9:30 a.m.); Final Approval Hearing held.
- **August 7, 2025:** Revised Final Facially Valid Opt-Out List published.
- **August 19, 2025:** Final Approval granted by the Court; Final Approval Order, Order Granting Attorneys' Fees, Order Regarding Material Loss Contingency Reserve, Show Cause Order Regarding Untimely Exclusion Requests, and Final Order of Dismissal with Prejudice all entered.
- **September 19, 2025:** Settlement Effective Date.
- **October 1, 2025:** Court appoints BrownGreer PLC as Settlement Claims Administrator.
- **January 6, 2026:** Notice of Reassignment filed.
- **February 16, 2026:** Settlement Claims Administrator begins issuing claim notices on a rolling basis.

The case is captioned *In re: Blue Cross Blue Shield Antitrust Litigation*, U.S. District Court for the Northern District of Alabama, Southern Division. Presiding judge: **U.S. District Judge Ann M. Manasco**.

Source

- **Home page:** BCBSProviderSettlement.com (home)
- **Important Dates page:** BCBSProviderSettlement.com/important-dates
- **Important Documents page:** BCBSProviderSettlement.com/important-documents

Last Updated

2026-11-13

Reviewer Flags

- **What Changed from Previous Version:** No substantive content changes. All source page content is consistent with the previously published article. The only change is the Last Updated date (updated from 2026-09-22 to 2026-11-13). Three Court Status Reports are now listed on the Documents page (Status Reports No. 1, 2, and 3), which were not present in the prior version's document list — however, their content was not published on the monitored pages, so no article content was updated. FRS may wish to review these reports for distribution timeline updates or fund amount disclosures.
- **Settlement Amount:** Still not published on any of the three source pages. The total settlement fund dollar amount remains unknown from these sources. FRS should consult the Settlement Agreement (Doc. 8) or the attorneys' fees motion for this figure. Flag for follow-up.
- **Excluded Providers Definition:** The Home page continues to reference "Excluded Providers FAQ 5" but the FAQ page remains outside the monitored pages. The full exclusion list is still not available from these sources.
- **Per-Claimant Recovery Estimate:** Not available on any source page. Claims are still being analyzed as of the article date.
- **Court Status Reports:** The Documents page now lists Settlement Claims Administrator Status Reports No. 1, 2, and 3. These reports may contain important updates on claims processing, distribution timelines, or fund amounts. Recommend pulling these documents for review.
- **Ongoing Contradiction:** The filing deadline (July 29, 2025) has passed and the settlement is effective, yet the settlement amount available to claimants is still not published on the website. This remains unusual at this stage of administration. Reviewer should confirm whether a settlement amount was ever publicly disclosed.
- **August 20, 2013 Dismissal Order:** The Documents page lists an "Order Granting Defendants' Motion to Dismiss (8/20/2013)" — this predates the settlement agreement by over a decade, suggesting earlier litigation was dismissed before being revived or appealed. Noted in Case History for accuracy.
- **Source page attribution:**
  - Home page: Summary, Announcements, Who Qualifies, How to File, Defendants, partial Case History, Settlement Administrator contact info.
  - Dates page: All key dates in Case History and Filing Deadline sections.
  - Documents page: Full Case History document timeline, appeals form reference, claim form references, Court Status Reports listing.