



**J.T. Thorpe Settlement Trust**  
***Claims Filing Instructions***

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## **2 Introduction**

The J.T. Thorpe Settlement Trust (Trust) was established as a result of the bankruptcies of J.T. Thorpe, Inc., a California corporation; J.T. Thorpe, Inc., a dissolved California corporation; Thorpe Holding Company, Inc., a California corporation; and Thorpe Technologies, Inc., a California corporation (collectively "Thorpe"). It has been organized to evaluate, process, liquidate, and pay all valid asbestos personal injury claims as directed by the bankruptcy court.

The procedures outlined in these instructions provide guidance for the filing of those claims. These instructions provide information on each step of the claims filing process. The procedures included here are the result of continued efforts by the Trust staff to refine the claim submission process to streamline the filing and processing of claims.

## **3 Claim Material**

### **3.1 Instructions**

Detailed instructions for completing the claim form by section are as follows:

#### **Section 1: Representation**

The Firm Name and address should be the same for all claims submitted by the same firm. If a firm has multiple offices, either submit all claims using one address, or distinguish the offices in the Firm Name, e.g., "Sam's Law Firm, Oakland Office." In general, the Trust encourages law firms to use one address unless they have multiple Federal Tax ID codes, in which case, there should be one Law Firm Name per Tax ID.

Attorney information must be completed.

Law Firm Contact information is optional. However, if Contact information is provided, initial communication to resolve claim issues will be made with the Contact.

This information is not required for claimant's who are not represented by counsel.

#### **Section 2: Injured Party/Decedent Information**

Firm File # is optional. If provided, the firm can track claims by their internal tracking number.

Items 2-6 are required in all situations. Provide other names by which party has been know, especially maiden names.

Contact information for Injured Party is only required if Injured Party is living and not represented by counsel.

If Injured Party is deceased, items 9a-9c are required.

If the Injured Party has a Personal Representative, complete all of item 10 and include proof of the person's representative capacity as a supporting document.

Item 11 is required if "Married" is checked at the commencement of litigation or if deceased, at the time of death.

Item 12 is required when appropriate.

#### **Section 3: Injuries**

The claimant may check as many items in Section 3 as apply and there are valid diagnoses for. For each disease checked, a diagnosis date is required, and a copy of Section 4 must be completed. The appropriate places in the supporting documents should be bookmarked and highlighted for each alleged injury.

#### **Section 4: Diagnosis**

A copy of Section 4 must be completed for each disease checked in Section 3. This should be the primary diagnosis used to justify the disease alleged in Section 3. Typically, this section will refer to a physical exam where the physician personally examined the Injured Party and the alleged disease was the concluding diagnosis. There are other ways a diagnosis can be confirmed, e.g., pathologists report, X-Ray, etc., but the physician listed on Section 4 must have attested to the fact that the Injured Party suffered from the alleged disease.

#### **Section 5: Chest X-Ray**

All chest x-rays must be read by a certified B-Reader as listed on the NIOSH website ([www.cdc.gov/niosh/](http://www.cdc.gov/niosh/)). Complete contact information for the physician is required. The ILO Profusion Score is required. The actual X-Ray report must be attached as a supporting document. If more than one chest x-ray is available, multiple Section 5's should be completed, and the associated supporting documents should be included, bookmarked and highlighted.

#### **Section 6: CT Scan**

All CT Scans must be read by a Pulmonologist, Internist or Occupational Medicine Physician. The actual CT Scan report must be attached as a supporting document. If more than one CT Scan is available, multiple Section 6's should be completed, and the associated supporting documents should be included, bookmarked and highlighted.

#### **Section 7: Pulmonary Function Test**

All PFTs must be evaluated by a board certified Internist, Pulmonologist or Internal Medicine Physician. The actual PFT report must be attached as a supporting document with relevant information bookmarked and highlighted. If more than one regimen of PFTs is available, multiple Section 7's should be completed, and the associated supporting documents should be attached.

#### **Section 8: Pathology Report**

All Pathology reports must be prepared by a board certified Pathologists. The actual Pathology report must be attached as a supporting document. If more than one Pathology reports is available, multiple Section 8's should be completed, and the associated supporting documents should be attached, bookmarked and highlighted.

#### **Section 9: Dependent & Beneficiary**

One copy of Section 9 should be completed for each individual who may have rights associated with this claim. Include the Injured Party's spouse and if the Injured Party has minor children, adult disabled dependant children or dependant minor grandchildren

living with the Injured Party at the time of diagnosis. Social Security Number is requested but not required. The financial dependence at diagnosis date is required.

### **Section 10: Land Exposure**

One copy of Section 10 must be completed for each land exposure site. *All fields are required.*

**Employer** – This is the actual company the Injured Party worked for. It should be supported by documentation.

**Job Title/Occupation** – This should be an industry standard title or occupation name that accurately describes the Injured Party's occupation.

**Name of Site** – This should be the place that the Injured Party worked while being exposed to asbestos. It should be from the Site List. If not, sufficient detail must be provided to support the alleged exposure. The Site List is available on the Trust website at [www.JTTSTrust.com](http://www.JTTSTrust.com).

**First Date at Site** – This is when the Injured Party first was exposed to asbestos at that site. If the exact date is unknown, provide an estimate.

**Last Date at Site** – This is when the Injured Party was last exposed to asbestos at the site. If the exact date is unknown, provide an estimate.

**Item 7 (Secondary Exposure)** – If the Injured Party is claiming exposure to asbestos through contact with an occupationally exposed person (Section 12), copies of Section 10 must be filled out for the occupationally exposed person.

### **Section 11: Shipboard Exposure**

One copy of Section 11 must be completed for each ship exposure. *All fields are required.*

**Employer** – This is the actual company the Injured Party worked for. It should be supported by documentation.

**Job Title/Occupation** – This should be an industry standard title or occupation name that accurately describes the Injured Party's occupation.

**Name of Ship** – This should be the place that the Injured Party worked while being exposed to asbestos. It should be from the Ship List. If not, sufficient detail must be provided to support the alleged exposure. The Ship List is available on the Trust website at [www.JTTSTrust.com](http://www.JTTSTrust.com).

**Name of Shipyard** – This must be the shipyard that corresponds to the shipyard on the Ship List.

**First Date on-board Ship** – This is when the Injured Party was first exposed to asbestos on-board the ship. If the exact date is unknown, provide an estimate.

**Last Date on-board Ship** – This is when the Injured Party was last exposed to asbestos on-board the ship. If the exact date is unknown, provide an estimate.

**Item 8 (Secondary Exposure)** – If the Injured Party is claiming exposure to asbestos through contact with an occupationally exposed person (Section 12), copies of Section 11 must be filled out for the occupationally exposed person.

### **Section 12: Secondary Exposure**

If the Injured Party was exposed to asbestos through contact with a person who was exposed to asbestos on the job (e.g., a child being exposed to asbestos brought home on father's clothes), the Injured Party can claim exposure to that person. The only exposure that will be considered is exposure that occurred during the time the occupationally exposed person was being exposed. So if the child lived with the parent for 18 years, but the parent only worked around asbestos for one year, only one year of asbestos exposure will be considered. Copies of Sections 10 or 11 must be included for all sites where the occupationally exposed person had exposure. The Injured Party can also complete copies of Sections 10 or 11 if they were also exposed to asbestos on the job. The total amount of asbestos exposure will be accumulated.

### **Section 13: Smoking History**

The total number of years smoked must be entered. Decimals should be used for partial years. The average number of packs per day must be entered. Decimals should be used for partial packs, and estimates are sufficient for packs per day over the smoking history. The year that the Injured Party last smoked should be entered as "Year Quit."

### **Section 14: Economic Loss/Medical Expense**

If the Injured Party incurred economic losses or medical expenses in excess of \$200,000, enter the total loss here and attach the associated Economic Report or Affidavit of Medical Expenses as a supporting document. For living Injured Party's, the assumed future medical expenses are \$75,000, so in those cases, you may add \$75,000 to historical medical expenses in order to calculate total medical expense.

### **Section 15: Asbestos Litigation**

One copy of Section 15 should be completed for each case filed on behalf of the Injured Party. All information is required. If no litigation was filed, the Injured Party must sign a declaration stating that litigation could have been filed against Thorpe and the appropriate jurisdiction must be included. The declaration is available on the Trust website at [www.JTTSTrust.com/litigationdec.pdf](http://www.JTTSTrust.com/litigationdec.pdf).

### **Section 16: Signature**

In addition to the signature itself, the name, date and relationship to injure party fields must be completed. A signed copy of Section 16 must be included and bookmarked with the scanned supporting documents if the claim is submitted electronically.

### **3.2 Claim Package**

Each claim will be submitted to the Trust in the form of a Claim Package, either electronically or on paper. The Claim Package consists of a completed claim form and all the supporting documentation. In order to expedite processing and to minimize costs to the Trust, the format and content of the Claim Package must exactly follow the enclosed guidelines. Any deviations from these guidelines will result in a deficiency notification being sent back to the claimant.

The Claim Package may be submitted either electronically or on paper. Electronic submissions are encouraged since they will reduce the time and cost necessary to process claims. If claims are submitted on paper, the Trust will enter the data from the Claim Form into a database and scan the supporting documents to create a PDF file. A Processing FIFO Number will only be assigned once this intake process is completed. Once a Processing FIFO Number is assigned, all claims will be processed in FIFO order.

#### **Why Does the Trust Require Adherence to the Filing Procedures?**

In order to facilitate the review, valuation and payment of claims, the Trust has developed procedures that enable claimants to greatly speed the review of their claims while still ensuring only valid claims are paid. These procedures clearly put the onus on the claimant to file complete and correctly formatted claims per the Trust's requirements; however, the benefit to the claimants is the expeditious and accurate processing of claims.

The center of this process is the claim form itself. This form has been carefully designed to provide all the information necessary to value matrix claims without requiring laborious re-entry of data otherwise available in the supporting documentation. However, the Trust must verify that the claim form data is consistent with the supporting documentation. Accordingly, the review process is centered on validating information that has been pulled out and put on the claim form.

Rather than requiring the processor to read through many pages of interrogatories, medical reports, economic reports, and social security records, among other things, the process developed by the Trust requires the claimant to point out where in those documents the relevant information exists. All the information is required to be submitted with the claim in case the review is not straightforward and further research must be conducted to fully understand the situation, but in uncomplicated claims, the review can be very fast as long as the claim packet is properly prepared.

#### **3.2.1 Claim Form**

The first part of the Claim Package is the Claim Form. The Trust has two versions of its Claim Form, the Electronic Claim Template (ECT) and the Manual Claim Form. The Manual Claim

Form is provided as an Adobe PDF file on the Trust website that can be downloaded and either printed out and completed by hand, or filled out on a computer.

The Trust strongly encourages the submission of claims using the ECT whenever possible. This will both expedite the process for the claimant and minimize the cost to the Trust needed to review and pay claims. Reducing Trust expenses increases the funds available to pay valid claims.

### **3.2.1.1 Manual Form**

The manual Claim Form can be found on the Trust website at [www.JTTSTrust.com](http://www.JTTSTrust.com). Basic instructions to complete the claim form are included on the form itself and detailed instructions are included in Section 3.1 of this document.

The claim form is provided on the Trust website as a PDF file that can be accessed using a free program called Adobe Acrobat *Reader*, available on the web at [www.adobe.com](http://www.adobe.com). A claimant can open the claim form file using Acrobat Reader, fill in the necessary fields on the computer, print the result and mail the paper to the Trust.

*The free version of Acrobat does not allow saving or emailing the completed form. All data will be lost when the program is closed. In order to save your work, you must purchase the upgraded version of Acrobat called "Acrobat Standard."*

If the claim form is filled out using an upgraded version of Acrobat, the resulting file can be saved and emailed to the Trust or uploaded to the Trust FTP site. If the file is emailed to the Trust, it should be encrypted first to protect the privacy of the information. The encryption key should be given to the Trust via phone.

When a manual claim form is received by the Trust, it will have to be processed by hand and the data typed into the Trust's database.

The claim will not be considered complete and a Processing FIFO number will not be assigned until the claim is in a format that the Trust processor can process the claim, i.e., claim data entered into the database and supporting documents compiled into a single PDF, bookmarked and highlighted. Accordingly, claims submitted electronically will receive their FIFO numbers and be processed sooner than those submitted on paper.

### **3.2.1.2 Electronic Claim Template**

The Electronic Claim Template (ECT) version of the Trust claim form is available on the Trust website as a Microsoft Access template. There are several tables in the template, with associated forms available to enter, view and edit the data.

The data fields in the ECT are identical to the fields on the manual claim form. They are simply available in a tool that lends itself to being used by a law firm that has all its data available in its own computer system.

A law firm with claim data in its own systems will be able to export data from their system and load it into the ECT provided by the Trust. The resulting database can then be uploaded to the Trust FTP site where the records will be loaded into the JT-CPS very quickly and easily. This is the fastest and most efficient way to file large numbers of claims with the Trust.

In the interest of maximizing speed and minimizing cost, the Trust developed a template that is relatively simple, providing only the minimum amount of functionality necessary for law firms to load their data into it and transmit it to the Trust. However, as a result, the data must be carefully cleansed to ensure the template is loaded with accurate and correctly formatted data. The Trust will attempt to import the data, and if the file is incorrectly formatted, will return it to the law firm to be corrected.

For more detailed assistance filing claims using the ECT, please contact the Trust directly.

### **3.2.2 Supporting Documentation**

The supporting documents are an integral part of the claim packet. By tying the supporting documents to the claim through the use of bookmarks and highlighting, the Trust was able to reduce the amount of detailed information that a claimant had to copy from the documents onto the claim form.

However, in order for this process to work, the supporting documents must be compiled in a specific way that makes it efficient for the Trust processor to find the information in the supporting documents quickly.

What follows are detailed instructions for how to prepare the supporting document portion of the claim packet.

The list of possible required documents includes, but is not necessarily limited to the following.

- Exhibit 1: Completed and signed Claim Form (if filing on paper) or scanned image of signature page (if filing electronically)
  
- Exhibit 2: Answers to the San Francisco Court General order 129 form interrogatories or in substance all relevant information. A substitute version of interrogatory questions can be found on the Trust website at [www.JTTSTrust.com](http://www.JTTSTrust.com).
  
- Exhibit 3: Medical Records
  - 3a. Physical exams
  - 3b. X-ray Reports
  - 3c. CT scan Reports
  - 3d. Pulmonary Function Test Reports
  - 3e. Pathology Reports
  
- Exhibit 4: Official death certificate, if appropriate

- Exhibit 5: Economic report evidencing wage/pension/home service losses
- Exhibit 6: Affidavit and/or medical invoices evidencing medical expenses
- Exhibit 7: Litigation documentation
- 7a. Endorsed/filed copy of the face page of the complaint or equivalent proof of commencement of litigation
  - 7b. If a lawsuit has not been filed, a declaration of jurisdiction that claimant had personam jurisdiction as of July 1, 2002
  - 7c. If more than one lawsuit has been filed on behalf of the claimant, a statement electing the governing jurisdiction for purposes of processing the claim
- Exhibit 8: Social security records supporting stated work history
- Exhibit 9: Other Information

Each exhibit listed above *must* have an associated Exhibit in the supporting documentation. Exhibit's should be simply a sheet of paper inserted at the beginning of the document identifying the exhibit such as follows:

If no information is being submitted under a given Exhibit, that Exhibit cover sheet must still be included in the claim packet, and a sheet such as the following should be inserted to avoid the thought that something may have been left out.

Medical Expenses  
do not exceed  
\$ 200,000

In addition to the Exhibit dividers, the important pieces of information must be bookmarked and highlighted to facilitate the review process.

The claim form has a small bookmark icon, with a label underneath it, identifying each place supporting documentation is required.

The Trust will look at the bookmarked and highlighted information and will expect to find clear support for the information on the claim form.

The Trust prefers to receive the supporting documentation electronically, in Adobe PDF files with the bookmarks and highlights already applied electronically. This will be the fastest and most efficient way for a claim to be reviewed. However, if necessary, the Trust will accept supporting documents on paper, but the same bookmarks and highlights must be applied to the paper documents.

The following shorthand should be used to identify each piece of verifying information on the supporting documents. The bookmarks/highlights are listed in the order they appear on the claim form.

### ***Bookmark Table***

<b>Section</b>	<b>Highlight/Bookmark</b>	<b>Description</b>
2: Injured Party Information	Name	Name of Injured Party
	SSN	Social Security Number of Injured Party
	DOB	Date of Birth of Injured Party
	DOD	Date of death. Must show date on death certificate
	AsbRel	Asbestos-Related Death. Proof that death was asbestos-related
	PRName	Name of Personal Representative
	PRCap	Personal Representative capacity. Should point to appropriate document showing personal representation capacity such as Power of Attorney or Letter of Attestation.
	MarStat	Marital status at commencement of litigation or if deceased, at time of death.
3: Injury	Inj	Injury (can have multiple in which number them Inj1, Inj2, etc.)
4: Diagnosis	Diag	Diagnosis. Should point to the physical exam or death certificate showing a certified physician provided a diagnosis of the alleged disease. Processor will confirm diagnosis date, board certification of physician, and

		physician's signature. (Can have multiple in which number them Diag1, Diag2, etc.)
5: X-Ray	Xray	X-ray. Must reference all X-Ray information, including physician name, report date and results. (Can have multiple in which number them XRay1, XRay2, etc.)
6: CT Scan	CTScan	CT Scan. Must reference all Scan information, including physician name, report date and results. (Can have multiple in which number them CTScan1, CTScan2, etc.)
7: Pulmonary Function Test	PFT	PFT Results. Must reference all PFT information, including physician name, report date and results. (Can have multiple in which number them PFT1, PFT2, etc.)
8: Pathology Report	Path	Pathology Results. Must reference all Pathology information, including physician name, report date and results. (Can have multiple in which number them Path1, Path2, etc.)
9: Dependent/Beneficiary	Dep	Must reference all Dependent information, including name, social security number, relationship and date of birth. (Can have multiple in which number them Dep1, Dep2, etc.)
	DepNat	For dependents who are not a spouse or child of the Injured Party, show proof of the nature of their dependence on the Injured Party
10: Land Exposure	LExp	Must reference all Land Exposure information, including employer, job title/occupation, site name and dates. (Can have multiple in which case number them LExp1, LExp2, etc.)
11: Shipboard Exposure	SExp	Must reference all Shipboard Exposure information, including employer, job title/occupation, ship name, site name and dates. (Can have multiple in which case number them SExp1, SExp2, etc.)
12: Secondary Exposure	SEOEP	Must reference all Occupationally Exposed Person information including name, social security number and relationship to the Injured Party.
	SEDates	Must reference the dates the Injured Party was exposed to asbestos

		through the Occupationally Exposed Person.
	SEReason	If the reason for asbestos exposure was other than "living with the Occupationally Exposed Person, show how the exposure occurred.
13: Smoking History	Smoking	The processor will look for evidence that supports the smoking history data.
14: Economic Loss/Medical Expense	Econ	This bookmark should point to the conclusions section of the economic report.
	MedExp	This bookmark should point to the conclusions section of the medical expense affidavit.
15: Asbestos Litigation	Lit	This bookmark should point to the cover page of the suit or claim filed. If no suit has been filed, it should point to the declaration that a suit could have been filed. (Can have multiple in which case number them Lit1, Lit2, etc.)
16: Signature	Sig	This bookmark should point to the signature page of the claim form.

Within each exhibit, the information listed in the Bookmark Table must be outlined and identified. The following is an example of a diagnosis page with the conclusion outlined and identified in the margin.

EVALUATION SUMMARY

PAGE 3

D. Keratin 5/6 Malignant mesotheliomas are almost all positive and pseudomesotheliomatous adenocarcinomas are almost all negative for keratin 5/6 staining. This malignancy is reported to be positive for keratin 5/6 and typical for malignant mesothelioma.

E. Calretinin This antibody stains mesotheliomas with a cytoplasmic/nuclear pattern and is negative in non-mesothelial pseudomesotheliomatous carcinomas, although occasional weak focal cytoplasmic staining may occur. This malignancy is reported to be positive for calretinin.

References:

- 1) McCaughey, WTE, Colby, TV, Battifora, H, Churg, A, Corson, JM, Greenberg, SD, Grimes, MM, Hammar, S, Roggli, VL, and Unni, KK, Diagnosis of Diffuse Malignant Mesothelioma: Experience of a US/Canadian Mesothelioma Panel, Mod Pathol 1991;4:342-353.
- 2) JA Robb, personal observations.

V. FINAL DIAGNOSTIC SUMMARY TABLE SUPPORTING DIAGNOSIS OF MESOTHELIOMA IN THE RIGHT PLEURA


FINDING/RESULT	EXPECTED		
	PSEUDOMESO ADCA	MESOTHELIOMA	NIXON
1. CLINICAL FINDINGS	NODULAR/DIFFUSE	NODULAR/DIFFUSE	DIFFUSE
2. INCIDENCE	APPROX. 1/YR **	1000/YR **	
3. MORPHOLOGY	EPITHELIAL	EPITH/BIPHAS/SA	EPITHELIAL
4. DPAS	>96% POSITIVE	NEGATIVE/<1.0%+	NEGATIVE
5. CEA	91%+ (21/23)	NEGATIVE	FOCAL~POLY
6. CD15/Leu M1	76%+ (16/21)	NEGATIVE/FOCAL	NEGATIVE
7. BerEP4	>90% POSITIVE	NEGATIVE/FOCAL	NEGATIVE
8. KERATIN 5/6	NEGATIVE	POSITIVE	POSITIVE
9. CALRETININ	NEGATIVE	POSITIVE	POSITIVE
10. One+: 4,5,6,7	100% (23/23)	<5%	0%
11. Two+: 4,5,6,7	91% (20/22)	0%	0%

\*\* 1/1000 = < 0.10% chance of being a pseudomesotheliomatous carcinoma/sarcoma

**CONCLUSION:** THE ABOVE TOTAL PROFILE SUPPORTS THE DIAGNOSIS OF MALIGNANT MESOTHELIOMA. THE PROBABILITY OF A PSEUDOMESOTHELIOMATOUS ADENOCARCINOMA HAVING THIS PROFILE IS LESS THAN 1% \*\*.

Date Completed: 9/12/01

James A. Robb, M.D.



Diag