



ACandS Asbestos Settlement Trust Claim Filing Checklist

1. **SELECT THE APPROPRIATE REVIEW TYPE.**

- a. Expedited Review
 - o An expeditious, efficient method for liquidating a claim at standard value (known as the "Scheduled Value") based on the Disease Level.
- b. Individual Review
 - o Liquidation of a claim is based on the specific facts and circumstances of the injured party's disease, exposure history, and other factors. Claimants elect Individual Review for any of the following reasons:
 - They believe their claim is worth more than Scheduled Value.
 - They do not meet the presumptive criteria necessary to receive Scheduled Value, but believe that their claim would be compensable in the tort system.
 - Individual Review is required for all Lung Cancer 2 (Level V) claims.

2. **GENERAL REMINDERS.**

- a. Make sure all documents are complete and scanned images are legible. Incomplete (i.e. missing pages or content cut off) or illegible (i.e. poor quality) documents may result in a deficiency.
- b. For documents not originally prepared in English, a certified translation is required.

3. **IS THE INJURED PARTY DECEASED?** If so, you must submit with the claim:

- a. A death certificate; and
- b. Documentation establishing who has authority to make the claim (i.e., court-issued appointment papers, heirship affidavits, or a will designating the individual(s) executor(s).)

4. **RECORD LITIGATION HISTORY AND CLAIMANT'S JURISDICTION.**

- a. Was a lawsuit filed in the tort system on behalf of the injured party? If so, you must provide the following regardless of whether ACandS was named as a party:
 - 1) Identify if ACandS was named as a defendant;
 - 2) Date of Filing;
 - 3) State of Filing;
 - 4) Name of Court; and
 - 5) Docket Number.
- b. If a lawsuit was not filed against ACandS prior to the Petition Date, you must elect the Claimant's Jurisdiction. This can be:
 - 1) The claimant's residence at the time of diagnosis;
 - 2) The claimant's residence at the time the claim is filed; or
 - 3) The jurisdiction where the claimant was exposed to an ACandS product.

5. **EXPOSURE HISTORY.** The claimant must answer all required fields and provide documents to establish the Injured Party's exposure history, including occupational exposure (if required).

- a. Is the work history consistent with the supporting documents?
 - o Record an accurate work history consistent with the supporting documents to avoid deficiencies (job sites, occupations, and time periods must align).
- b. Did the Injured Party work at an approved site? If so, make sure to:



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- 1) Use the site code from the approved site list on the Trust's website;
 - 2) Verify the site name and location matches the approved site listing; and
 - 3) Verify the work time period provided overlaps with the Trust's accepted dates for the approved job site. Record any additional exposure if the work period is shorter than the requisite exposure time for the applicable Disease Level or if the exposure is outside of the accepted dates for the approved job site.
- c. Make sure the supporting evidence such as affidavits, declarations, interrogatories, or depositions are properly executed (i.e., signed, dated, notarized (if required), etc.).
- d. For Secondary Exposure Claims, make sure to provide the exposure history for each occupationally exposed person to whom the Injured Party was exposed by creating a record for each person on the corresponding tab.

6. **OVERVIEW OF EXPOSURE REQUIREMENTS.**

a. ACandS Exposure

- The claimant must demonstrate meaningful and credible exposure to asbestos or asbestos-containing products resulting from the installation, distribution, supply and/or contracting activities of ACandS that occurred prior to December 31, 1982.
- Allegations of ACandS Exposure from claimants who worked in high temperature settings at industrial/commercial job sites (e.g. boiler worker, pipefitter, insulator) are presumed to be credible. Workers in other trades/industries (e.g. store keeper, teacher, auto mechanic) must describe occupational duties that required hands-on use of or close proximity to others using asbestos or asbestos-containing products for which ACandS has legal responsibility.
- Examples of acceptable ACandS Exposure evidence include:
 - 1) Affidavits, sworn statements, and declarations;
 - 2) Verified work history;
 - 3) Verified interrogatory responses;
 - 4) Sales records and invoices;
 - 5) Deposition testimony.
 - For deposition testimony, please attach a cover page indicating the line and page numbers with relevant testimony regarding the Injured Party's ACandS Exposure.

b. Significant Occupational Exposure

- Disease Levels I, II, III, IV, and VI must establish Significant Occupational Exposure ("SOE").
- SOE means employment for a cumulative period of at least five years, with a minimum of two years prior to December 31, 1982, in an industry and an occupation in which the claimant handled, fabricated, altered, repaired or otherwise worked with raw asbestos fibers or asbestos-containing products or worked on a regular basis in close proximity to workers engaged in such activities on a regular basis.
- SOE may be established as set forth in section 5 above.

7. **MEDICAL DOCUMENTATION.** Make sure to confirm:

- a. The report's date is clearly indicated and legible.
- b. The report is signed by the physician who prepared it.



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- c. PFT testing, if required, must be in compliance with quality standards established by the American Thoracic Society, otherwise the report will not be accepted.

8. DISEASE LEVEL CRITERIA. the medical and exposure requirements for each Disease Level are set forth below. Please make sure to complete all required sections and submit the necessary documents and evidence as discussed above for the Injured Party's applicable disease level.

I. Level I - Asbestosis/Pleural Disease (elements a-c must be supplied)

- a. Evidence of Bilateral Asbestos-Related Nonmalignant Disease (provide one of the following):
 - i. B-reading showing bilateral changes with profusion of 1/0 or greater;
 - ii. Radiological evidence (either an interpretive report based on an x-ray or CT scan) showing bilateral interstitial fibrosis, bilateral pleural plaques, bilateral pleural thickening, or bilateral pleural calcification; or
 - iii. A pathological diagnosis of asbestosis.
- b. 6 months of ACandS exposure prior to 12/31/1982.
- c. 5 years of cumulative occupational exposure to asbestos-containing products in general.

II. Level II – Asbestosis/Pleural Disease (elements a-d must be supplied)

- a. Evidence of Bilateral Asbestos-Related Nonmalignant Disease (provide one of the following):
 - i. B-reading showing bilateral changes with profusion of 1/0 or greater;
 - ii. Radiological evidence (either an interpretive report based on an x-ray or CT scan) showing bilateral interstitial fibrosis, bilateral pleural plaques, bilateral pleural thickening, or bilateral pleural calcification; or
 - iii. A pathological diagnosis of asbestosis.
- b. Pulmonary Function Test ("PFT") showing (FVC <80, FEV1/FVC \geq 65 OR TLC <80).
- c. 6 months of ACandS exposure prior to 12/31/1982.
- d. Significant Occupational Exposure.

III. Level III – Severe Asbestosis (elements a-d must be supplied)

- a. Diagnosis of asbestosis (provide one of the following):
 - i. B-reading showing bilateral changes with profusion of 2/1 or greater; or
 - ii. A pathological diagnosis of asbestosis.
- b. Pulmonary Function Test showing (FVC <65, FEV1/FVC >65 OR TLC < 65).
- c. 6 months of ACandS exposure prior to 12/31/1982.
- d. Significant Occupational Exposure.

IV. Level IV - Other Cancer (elements a-e must be supplied)

- a. Evidence of Bilateral Asbestos-Related Nonmalignant Disease (provide one of the following):
 - i. B-reading showing bilateral changes with profusion of 1/0 or greater;



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- ii. Radiological evidence (either an interpretive report based on an x-ray or CT scan) showing bilateral interstitial fibrosis, bilateral pleural plaques, bilateral pleural thickening, or bilateral pleural calcification; or
 - iii. A pathological diagnosis of asbestosis.
 - b. An unequivocal pathological diagnosis of a primary compensable Other Cancer (colorectal, laryngeal, esophageal, pharyngeal, or stomach cancer).
 - c. Supporting medical documentation establishing asbestos exposure as a contributing factor in causing the disease in question.
 - d. 6 months of ACandS exposure prior to 12/31/1982.
 - e. Significant Occupational Exposure.
- V. Level V – Lung Cancer 2 (elements a-d must be supplied)
 - a. An unequivocal pathological diagnosis of a primary lung cancer.
 - b. Supporting medical documentation establishing asbestos exposure as a contributing factor in causing the disease in question.
 - c. ACandS exposure prior to 12/31/1982.
 - d. If the injured party is a current or former smoker, a complete history of tobacco use is required.
- VI. Level VI – Lung Cancer (elements a-f must be supplied)
 - a. Evidence of Bilateral Asbestos-Related Nonmalignant Disease (provide one of the following):
 - i. B-reading showing bilateral changes with profusion of 1/0 or greater;
 - ii. Radiological evidence (either an interpretive report based on an x-ray or CT scan) showing bilateral interstitial fibrosis, bilateral pleural plaques, bilateral pleural thickening, or bilateral pleural calcification; or,
 - iii. A pathological diagnosis of asbestosis.
 - b. An unequivocal pathological diagnosis of a primary lung cancer.
 - c. Supporting medical documentation establishing asbestos exposure as a contributing factor in causing the disease in question.
 - d. 6 months of ACandS exposure prior to 12/31/1982.
 - e. Significant Occupational Exposure.
 - f. If the injured party is a current or former smoker and Individual Review is elected, a complete history of tobacco use is required.
- VII. Level VII – Mesothelioma (elements a-b must be supplied)
 - a. An unequivocal pathological diagnosis of malignant mesothelioma.
 - b. ACandS exposure prior to 12/31/1982.