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09/01/2020
Shirley Faust

Missoula County District Court STATE OF MONTANA

By: Emily Baze
DV-32-2016-0000521-BC
Halligan, Leslie
80.00

Leslie Halligan, District Court Judge Fourth Judicial District Missoula County Courthouse 200 West Broadway Street Missoula, MT 59802-4292 (406) 258-4771

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### MONTANA FOURTH JUDICIAL DISTRICT COURT, MISSOULA COUNTY

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THE DEPOT, INC., a Montana Corporation, UNION CLUB BAR, INC., a Montana Corporation, TRAIL HEAD, INC., a Montana Corporation, on behalf of themselves and all those similarly situated,

Plaintiffs,

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CARING FOR MONTANANS, INC. F/K/A BLUE CROSS AND BLUE SHIELD OF MONTANA, INC., HEALTH CARE SERVICE CORP., and JOHN DOES I-X.

Defendants.

Dept. No. 1 Cause No. DV-16-521

## RULE 23 CLASS CERTIFICATION ORDER

In accordance with Rule 23 of the Montana Rules of Civil Procedure and pursuant to the Court's opinion issued on June 29, 2020, the Court ORDERS:

1. Class Certification. Civil Action No. DV-16-521, Depot, et. al,

v. Caring for Montanans, Inc. et al., shall be maintained as a class action

under Rule 23(b)(3), Mont. R. Civ. Pro., on behalf of the following class of plaintiffs:

All Montana employers that purchased insurance under a "Montana Chamber Choices" group insurance arrangement and who made premium payments that included charges—that were set and/or communicated to Plaintiffs and the Class during negotiations and before each plan existed—where the charges were in excess of the medical premium (the charge for the health insurance itself) and were added into the billed premium to make payments to the Montana Chamber Choices Trust and/or the Montana Chamber of Commerce or its affiliates (including third party consultants and the Chamber Choices Trust), or to purchase other insurance products, within the applicable limitations periods.

The grounds for class certification, including analysis of all relevant Rule 23 factors, are set forth in the Court's June 29, 2020 Order Granting Plaintiffs' Motion for Class Clarification (Doc. 75) and are expressly incorporated herein.

- 2. Class Representative; Class Counsel. The Depot, Inc., Union Club Bar, and Trail Head, Inc. are designated as class representatives and attorneys John Morrison and John Heenan are designated as counsel for the class.
- 3. Class Claims, Issues, and Defenses. Plaintiffs claim that Caring for Montanans, Inc. (hereinafter "CFM") (formerly known as Blue Cross and Blue Shield of Montana, Inc.) and Health Care Service Corporation (hereinafter "HCSC") (doing business as Blue Cross and Blue

Shield of Montana), negligently and in bad faith, added amounts to the premiums charged to employers for Chamber Choices health insurance in order to pay illegal kickbacks to the Montana Chamber of Commerce in return for its cooperation and help marketing this health insurance product. Plaintiffs also claim that CFM and HCSC negligently misrepresented and concealed material facts about this practice and were unjustly enriched from it. Plaintiffs claim CFM and HCSC acted with actual malice, as defined in § 27-1- 221, MCA, entitling the class to reasonable punitive damages as well.

Plaintiffs further allege CFM and HCSC negotiated directly with individual Chamber Choices employer groups and their agents in the enrollment and renewal process; CFM and HCSC underwrote individual employer groups in the Chamber Choices program, placing them in rating tiers each year based on claims history and other factors; Chamber Choices financial documents expressly state that health insurance premiums were paid directly to CFM or HCSC based on the plans selected by the employer, that these premiums included administrative fees that were remitted by HCSC to third-party consultants, other service providers, and the Chamber Choices trust, and that CFM and HCSC added some of the excess premium revenue to its reserves; CFM and HCSC sent annual renewal packets and monthly premium bills directly to the employer subscribers to Chamber

Choices (except in 2008-09 when HealthServe sent the bills for them); CFM and HCSC chose to agree to include charges for the administrative fees paid to the Chamber and for other insurance products and whether and how to disclose those charges on the bill; individual employers were free to and did come and go from Chamber Choices based on their negotiations with CFM and HCSC; the Montana Chamber of Commerce negotiated overall annual rate increases for the program with CFM and HCSC, and the amounts that would be added to the premiums for the administrative fees and other products, but was not otherwise involved in the annual underwriting and negotiations between HCSC and the employers and their agents.

Defendants CFM and HCSC deny the allegations and claim: the individual employer groups who were the participants in the Montana Chamber Choices program had a trust relationship with the Montana Chamber Choices Trust, and not with either CFM or HCSC; the Trust and/or the Montana Chamber of Commerce established the requirements that Trust participants purchase insurance products in addition to health insurance and pay an association fee as conditions for participation in the Chamber Choices program; the Trust and/or Chamber negotiated the rates that CFM charged for its insurance products directly with CFM, which did not negotiate with any employers in the Chamber Choices Trust Group Insurance Arrangement; the

Trust and/or the Chamber negotiated the premiums for other insurance products and set the association fee to be paid by each employer group; the Trust solicited participation and renewal in the Chamber Choices program; CFM, and later HCSC, provided all benefits to the employees of Chamber Choices participants in accordance with the terms and conditions of their respective benefits purchased; Chamber Choices provided all benefits to employees of Chamber Choices participants in accordance with the terms and conditions of their respective benefits provided and purchased; Neither CFM nor HCSC retained any funds paid by the employers except for those monies which equaled the amount charged for the provided health insurance products; the Trust and/or Chamber was responsible for payment of fees and charges incurred by employers for products or services not provided by CFM, and, later, HCSC; until HealthServe took over as the billing, eligibility and renewal agent for the Trust, CFM itemized on its bill the amount charged for health insurance for each employer in the Chamber Choices GIA and the association fee, if any was charged; HCSC did not solicit participation or renewal by employer groups in the Chamber Choices program; the Trust and/or the Chamber disclosed the requirements that employer groups participating in the Chamber Choices program also had to purchase other insurance coverages and pay an association fee; beginning in January 2012,

CFM and later HCSC, after July 31, 2013, sent itemized invoices to employer participants which specifically set forth the cost of the health insurance premium, the premiums for each additional insurance coverage required by the Trust, and the association fee; numerosity cannot be established sufficiently as against HCSC since it did not set any rates for insurance products during the Chamber Choices program, as all rates for health insurance were set by CFM. CFM and HCSC incorporate their affirmative defenses from their respective Answers as if fully set forth here.

Issues affecting the class that will be decided in the class action include: (1) Whether Defendants embedded in the Chamber Choices premium, that was charged to Plaintiffs and members of the Class, surcharges in excess of the medical premium to generate revenue to make unlawful payments; (2) Whether this practice constituted negligence or bad faith and/or resulted in unjust enrichment to Defendants; (3) Whether Defendants misrepresented or concealed material facts about this practice in their communications with Plaintiffs and the class during the negotiations in the same material way for all members of the class such that it constituted negligent misrepresentation; (4) Whether HCSC is liable for any alleged wrongful acts which occurred prior to HCSC's acquisition of the insurance book of insurance business from CFM; (5) What amount of money will

RULE 23 CLASS CERTIFICATION ORDER

compensate Plaintiffs and the Class members for any overpayments; (6) Whether Defendants acted with malice as defined in Mont. Code Ann. § 27-1-221; and (7) If Defendants acted with malice, what amount of punitive damages is appropriate.

- 4. Identification of Class Members. CFM and HCSC have in their possession information pertinent to the identity of class members. Therefore, by September 18, 2020, CFM and HCSC must produce to the Court and class counsel the names, addresses, email addresses and other contact information they possess for all Montana employers that purchased insurance from either Defendant under a "Chamber Choices" insurance policy and who made premium payments that included charges—that were set and/or communicated to Plaintiffs and the Class during negotiations and before each plan existed—where the charges were in excess of the medical premium (the charge for the health insurance itself) and were added into the billed premium.
- **5. Notice**. The Court hereby approves the individual notice, appended below as Exhibit 1, and approves the publication notice, appended below as Exhibit 2. Class counsel, with CFM and HCSC cooperation, will accomplish having the individual notices mailed, and the publication notice reasonably published. Notice shall be mailed and published by October 15,

1	2020. Class members shall have 45 days from the mailing of the notice to
2	opt out as provided in the notice.
3	6. List of Class Members. By December 11, 2020, class counsel
4	must file with the Clerk a list of all class members and a list of the employers
5	who opted out of the Class.
6	DATED this 1 <sup>st</sup> day of September, 2020.
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8	Calle Sallean
9	Leşlie Halligan District Court Judge
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13	cc: John Morrison, Esq. John Heenan, Esq.
14	Stefan Wall, Esq. / Michael David McLean, Esq. Stanley Kaleczyc, Esq. / Kimberly Beatty, Esq. / M. Christy McCann, Esq.
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#### **POSTCARD, SIDE ONE**

#### MONTANA FOURTH JUDICIAL DISTRICT COURT, MISSOULA COUNTY

The Depot, Union Club Bar and Trail Head, Inc. v. Caring for Montanans, Inc. and Health Care Service Corp.,

Cause No. DV-16-521

#### NOTICE OF PENDENCY OF CLASS ACTION LAWSUIT

On June 29, 2020, the Montana Fourth Judicial District Court certified a class action against Caring for Montanans, Inc. (CFM), formerly known as Blue Cross and Blue Shield of Montana, Inc., and Health Care Service Corp. (HCSC), now doing business in Montana as Blue Cross Blue Shield of Montana.

What is the case about? The case, The Depot, Union Club Bar and Trail Head, Inc. v. Caring for Montanans, Inc. and Health Care Service Corp, alleges that CFM and HCSC Blue Cross and Blue Shield of Montana, negligently and in bad faith, added amounts to the premiums charged to employers for Chamber Choices health insurance in order to pay illegal kickbacks to the Montana Chamber of Commerce in return for its cooperation and help marketing this health insurance product. Plaintiffs seek to require CFM and HCSC to repay the overcharges to the Chamber Choices subscribers and also seek reasonable punitive damages. CFM and HCSC deny Plaintiffs' allegations and ask that Plaintiffs recover nothing. CFM and HCSC contend that the Montana Chamber of Commerce and the Montana Chamber Choices Trust disclosed to employers they were required to (a) purchase all coverages and services offered by the program and (b) pay an association fee as a condition to obtain Chamber Choices health insurance through the Chamber Choices program; CFM and HCSC also contend the Montana Chamber and/or the Trust — not CFM or HCSC — negotiated such additional coverages and premium amounts and determined the amount of the association fee; and, CFM and HCSC only invoiced, collected, and remitted these amounts at the direction of the Montana Chamber and the Trust to them.

**Who's included?** You may be a member of the Class if: (1) You purchased "Chamber Choices" insurance from the Montana Chamber Trust; (2) within the applicable statute of limitations; and (3) paid premiums for the Chamber Choices coverage.

What are my options? If you want to stay in the case, you do not need to do anything. If you do not want to participate in this case or want to file your own case, you must mail a letter to Depot v. CFM Case Administrator, c/o KCC, PO Box 43205, Providence, RI 02940-3205, stating that you want to be excluded from The Depot v. CFM and HCSC class action. Be sure to include your name and address and sign the letter. Your request to be excluded must be postmarked by [45 days from date of mailing.] If you do not exclude yourself from this case, you will be legally bound by the decisions of the Court and the final outcome of the lawsuit. If you exclude yourself, you will not participate in any favorable result from the litigation but will retain all rights relating to any claims you may have. Additional information concerning the lawsuit and an exclusion request form ('Opt-Out') are is available at <a href="https://www.DepotClassAction.com">www.DepotClassAction.com</a>.

**Do I need to hire a lawyer?** The Court has appointed attorneys John Morrison of Morrison Sherwood Wilson Deola, PLLP (Helena, MT) and John Heenan of Heenan & Cook (Billings, MT) to represent the Class. You may, but are not required to, enter an appearance through an attorney in this case at your own expense.

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# **LEGAL NOTICE**

If you purchased a Chamber Choices health insurance policy from Blue Cross and Blue Shield of Montana, a pending class action may affect your rights.

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