PERRINE DUPONT SETTLEMENT CLAIMS OFFICE ATTN: EDGAR C. GENTLE, CLAIMS ADMINISTRATOR C/O SPELTER VOLUNTEER FIRE DEPARTMENT OFFICE

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PERRINE MEDICAL MONITORING PLAN (THE "PLAN") CLAIMANT FREQUENTLY ASKED QUESTIONS AND ANSWERS

Q1. HOW DO I KNOW IF I AM A CLAIMANT IN THE PERRINE MEDICAL MONITORING PLAN?

A. You are a claimant in the Perrine Medical Monitoring Program if you selected yes for medical monitoring when you completed your Medical Monitoring Registration Form between March 1 and August 31, 2011, and your form was approved by the Claims Administrator. To check on your status, you can call the Perrine DuPont Claims Office at (304) 622-7443, or use our toll free number at 1-800-345-0837. If your Medical Monitoring Registration form was approved by the Claims Administrator (meaning that you provided sufficient verification that you lived in Zone 1 for one year, in Zone 2 for three years, or Zone 3 for five years since 1966), you became a claimant. You were then mailed a <u>Perrine Medical Monitoring Plan</u> card.

Q2. CAN I ELECT NOT TO BE TESTED?

A. YES. It is your decision on whether or not you want to be tested. If you are a registered Medical Monitoring claimant, you will receive correspondence and phone calls to set up a Medical Monitoring appointment, but you can decide whether you want to participate.

Q3. WHAT IS INCLUDED IN THE PLAN?

A. The Plan has the following 3 components:

1. **Testing.** If you are younger than age 15, you will receive a blood test.

If you are age 15 to 35, you will receive blood and urine tests. A stool sample will be taken for those claimants age 18 to 35.

If you are over 35 years of age, you will receive blood and urine tests, a stool sample will be taken, and you may receive a CT scan if a Perrine Medical Monitoring approved medical provider finds that it is medically necessary. You will not receive a CT scan if you are pregnant.

- 2. Physician's Visit. After your test results come in, you will visit with a Plan approved physician who will discuss your results with you, and perform a general check up. If you are over 35 years of age and you are not pregnant, the Plan approved physician will assess whether or not you should have a CT scan. If you are to have a CT scan provided, you will be directed to an approved Plan CT scan facility.
- 3. Specialist Visit. You may also be eligible for a visit with one of the following specialists based on the recommendation of a Plan medical provider: anesthesiologist, dermatologist, gastroenterologist, nephrologist, psychologist, pulmonary disease specialist, radiologist, cardio-thoracic specialist, urologist, or toxicologist.

Q4. WHAT ARE THE DOCTORS LOOKING FOR?

A. The doctors are looking to see for a positive finding of disease <u>possibly</u> associated with exposure to zinc, cadmium, arsenic or lead.

Q5. WHAT IF THE DOCTOR FINDS I HAVE A DISEASE?

A. The doctor will refer you to a medical specialist for treatment. The treatment <u>is not</u> covered by the Plan.

Q6. WILL THE PLAN COVER MY FOLLOW UP DOCTORS APPOINTMENTS AND CARE IF I AM SICK?

A. NO. The Plan <u>only</u> provides for medical monitoring (which is testing only) and property remediation (clean-up).

Q7. HOW LONG AM I ELIGIBLE TO RECEIVE THESE TESTS UNDER THE PLAN?

A. You are eligible to receive these tests for 30 years.

Q8. HOW OFTEN WILL I BE TESTED?

A. Once every 2 years.

Q9. WILL I RECEIVE A REMINDER WHEN I AM TO BE TESTED?

A. Yes. You will receive a reminder letter from the Plan every 2 years and you will receive a call from CTIA, the Plan Administrator, to schedule your Medical Monitoring appointment. CTIA is the third party administrator of the Plan and will assist you in scheduling your appointment.

Q10. IF I DON'T GO TO MY APPOINTMENT FOR A FEW YEARS, WILL I LOSE MY RIGHT TO PARTICIPATE IN THE PLAN?

A. NO. Your right to participate in medical monitoring will last for 30 years, whether or not you miss an appointment.

Q11. CAN I GO TO MY OWN DOCTOR?

A. Only if your doctor is one of the approved Medical Monitoring providers. Otherwise, **NO.**

Q12. I LIVE WITHIN 50 MILES OF SPELTER, WEST VIRGINIA ("IN-AREA"). WHO ARE THE PHYSICIANS WHO ARE PROVIDING THE MEDICAL MONITORING SERVICES?

A. <u>United Physician Services</u>, <u>MedExpress</u>, <u>Bridgeport Express</u> and <u>Monongahela Valley Association of Health Centers</u>, <u>Inc. ("MVA")</u>, are our 4 approved Plan providers if you live within 50 miles of Spelter, West Virginia.

United Physician Services has one location in Shinnston, called Shinnston Healthcare, and one location in Bridgeport known as Bridgeport Physicians Care. MedExpress and Bridgeport Express both operate in Bridgeport. MVA has facilities in Shinnston and in Fairmont.

In total, there are six locations which are available for your convenience if you live within 50 miles of Spelter, West Virginia.

Q13. WHO ARE THE PHYSICIANS WHO ARE PROVIDING THE MEDICAL MONITORING SERVICES IF I LIVE MORE THAN 50 MILES FROM SPELTER, WEST VIRGINIA ("OUT-OF-AREA")?

A. Medical Providers who participate in the following three networks: (1) Multiplan; (2) Healthsmart HPO; and (3) Coalition America's Preferred Provider Network ("NPPN") are Plan out-of-area providers. Please note that you are not prevented from using the Plan providers who are within the 50 mile area if you choose to do so. The Plan is providing out-of-area providers merely for your convenience.

Q14. WHO MAKES MY INITIAL APPOINTMENT?

A. You will be contacted by CTIA, the Plan's Administrator. CTIA will provide you with a choice of times and locations for your convenience, to set up your initial appointment.

If you would like to contact CTIA to schedule your appointment immediately, please call 1-800-245-8813.

Q15. WHAT FORMS WILL I FILL OUT DURING MY FIRST MEDICAL MONITORING VISIT?

- A. On your first Medical Monitoring visit, you will have to fill out two forms:
 - 1. **Required** Medicare Form: This form will be provided by your medical provider and must be completed and signed by you. We may be required to report to Medicare those individuals who are Medicare eligible, and therefore, you must complete a Medicare Ouestionnaire.
 - 2. Optional Claimant-Patient Data Sharing Consent Form: This is an optional form. You do not have to fill it out unless you want to. This form allows the Perrine Medical Monitoring Plan to maintain your health information for research. None of your personal information will be used. Only your medical history may be used for possible scientific and health research, and only after your individual identification information is removed. Third parties outside of the Plan may have access to your medical history and health information for research purposes only. If you have any additional questions regarding how your medical history data will be maintained, please feel free to contact the Perrine Settlement Administration Office toll free at 1-800-345-0837.

Q16. DO I HAVE TO BRING ANYTHING TO THE DOCTOR WITH ME?

A. YES. You must bring (i) your Plan Card; and (ii) photo identification.

Q17. WHO DO I CALL IF I'VE LOST MY PLAN CARD?

A. If you have misplaced your Plan card, please call CTIA at 1-800-245-8813. A new one will be promptly mailed to you.

Q18. IS MY MEDICAL INFORMATION PROTECTED?

A. YES. We have entered into agreements with our Plan Administrator, CTIA, and the Medical Monitoring physicians, to ensure that your private health information is protected and that their procedures are Health Insurance Portability and Accountability Act ("HIPAA") compliant to make sure of this.

Q19. DO I HAVE TO PAY ANYTHING TO PARTICIPATE IN THE PLAN?

A. NO.

Q20. WILL MY MEDICAL INSURANCE BE USED BY THE PLAN?

A. NO.

Q21. WHO IS PAYING FOR THE PLAN?

A. DuPont is paying for the Plan as part of a Settlement in the matter of <u>Perrine</u>, et al., v. E. I. <u>DuPont DeNemours</u> and <u>Company</u>, Inc.

Q22. I RECEIVE MEDICARE, MEDICAID, OR SOCIAL SECURITY BENEFITS. WILL MY PARTICIPATION IN THE MEDICAL MONITORING PLAN JEOPARDIZE MY BENEFITS?

A. Medical Monitoring should not affect your benefits, such as Medicaid or Social Security Benefits, because you are not receiving any cash or assets that would increase your income to the point that you no longer qualify for need-based benefits. Medical Monitoring should not affect Medicare benefits, but because we are reporting to Medicare, we cannot promise what Medicare will or will not do.

Q23. IS MY INFORMATION CONFIDENTIAL?

A. YES. All of your health information is considered protected health information ("PHI") and is protected the Health Insurance Portability and Accountability Act ("HIPAA"), as well as by numerous other State and Federal laws and regulations. All of your health information is CONFIDENTIAL.

Q24. DOES DUPONT HAVE ACCESS TO MY PRIVATE MEDICAL INFORMATION?

A. NO. All of your health information is CONFIDENTIAL and is to be used by your provider and other third parties only for the provision of health services for your benefit. DuPont is not involved in any of the decisions regarding your medical testing and the medical opinions which are rendered during the administration of the Plan. Please note, that as indicated in the answer to Q14, if you elect to allow your health information to be maintained for possible future research initiatives, that health information may be shared and utilized by third parties outside of the Plan. The information shared and utilized by third parties outside of the Plan for research purposes only will not have your personal identifying information, such as name or social security number.

Q25. YOU HAVE NOT ANSWERED ALL MY QUESTIONS. WHAT DO I DO?

A. Call us at (304) 622-7443, or toll free at 1-800-345-0837. You can also visit our website at www.perrinedupont.com or e-mail us at perrinedupont@gtandslaw.com.