Blue Cross Blue Shield Provider Settlement Claim Deadline is July 29, 2025



7/22/2025

The deadline to submit a claim for the Blue Cross Blue Shield Provider Settlement (Settlement) is **July 29, 2025**. Here is what you need to know:

1. *What is the Provider Settlement?*

In the class action, *In re: Blue Cross Blue Shield Antitrust Litigation*, plaintiffs allege that the Blue Cross Blue Shield Association and participating individual Blue Plans (Settling Defendants) violated federal antitrust laws by dividing the United States into exclusive "Service Areas" and agreed not to compete in those areas and conspired to fix prices for healthcare services. The parties reached a tentative $2.8 billion settlement (Settlement), subject to final court approval.

2. *Who is Eligible?*

All "Providers" in the United States who, between July 24, 2008 and October 4, 2024, provided healthcare services, equipment, or supplies to patients insured by any plan administered by any settling individual Blue Plan are eligible to participate in the Settlement, unless excluded. Providers who fall into an excluded category for only part of the relevant period may still be eligible to recover for the portion of time they qualified.

Provider means any person or entity that provides healthcare services in the United States, including but not limited to a physician, group practice, or facility.

Excluded Providers include those owned or employed by Settling Defendants, government-owned or employed providers, those who solely serve Medicare, Medicaid, or Federal Employee Health Benefits Program patients, providers that have otherwise fully released their claims against the Settling Defendants prior to the Settlement, and those exclusively offering prescription drugs, durable medical equipment, medical devices, lab services covered by standalone dental or vision insurance.

3. *How Much Will Be Distributed?*

If the court approves the Settlement, a $2.8 billion fund will be established. After deducting attorneys' fees, litigation expenses, and administration costs, the net settlement funds will be allocated and distributed among eligible Providers, based on certain pre-determined metrics, depending on the type of Provider.

4. *What Claims Are Released?*

In order to participate in the Settlement, Providers will be required to release the Settling Defendants from any and all claims arising from or relating to the allegations in the lawsuit. This includes claims based on alleged anticompetitive conduct, such as geographic market allocation and price-fixing, any issue raised in any of the Provider Actions (defined as lawsuits brought by persons or entities within the Settlement Class and consolidated in the antitrust litigation) by pleading or motion, and any claims related to the business practice changes the Settling Defendants agree to implement under certain monitoring provisions that are part of the Settlement.

The release does not apply to claims that arise in the ordinary course of business and are based solely on the Provider's role as a plan sponsor or subscriber, or on whether a Settling Individual Blue Plan properly paid or denied a claim for a specific product, service, or benefit under applicable benefit plan documents, provider contracts, or state or federal law (including prompt pay laws).

5. *Are All Providers Obligated to Participate?*

Providers may exclude themselves from the Settlement if they do not want the monetary and other benefits provided by the Settlement, or do not want to be legally bound by the terms of the Settlement. Providers who do not opt out are deemed to have released all covered claims regardless of whether they submit a claim or receive any payment from the Settlement.

6. *How to File a Claim?*

Providers are required to complete the appropriate claim form and submit it under one of the following categories: medical professional/medical group/medical organization or health care facility/health care system. Providers may submit a claim for payment and any required accompanying documentation through online claim submission (highly recommended) or by mail to Blue Cross Blue Shield Provider Settlement, Settlement Notice Administrator, P.O. Box 26443, Richmond, VA 23261. Claims must be submitted online, or mailed and postmarked, by **July 29, 2025**.

If you have any questions about filing a claim or the contents of this alert, please contact

Caroline J. Patterson, Esq., *Member and Vice Chair*, Healthcare Law, cpatterson@bracheichler.com, 973.364.5233

Carol Grelecki, Esq., *Member*, Healthcare Law, cgrelecki@bracheichler.com, 973.403.3140

Vanessa Coleman, Esq., *Associate*, Healthcare Law, vcoleman@bracheichler.com, 973.364.5208

Authors

The following attorneys contributed to this insight.



Caroline J. Patterson

Member
Healthcare Law

973-364-5233 · 973-618-5547 Fax

cpatterson@bracheichler.com



Carol Grelecki

Member
Healthcare Law

973.403.3140 · 973.618.5540 Fax

cgrelecki@bracheichler.com



Vanessa Coleman

Associate
Healthcare Law

973.364.5208 · 973.618.5566 Fax

vcoleman@bracheichler.com