

HAWAI'I HEP-A CLASS ACTION CLAIM FORM

CLAIM DEADLINE EXTENDED TO **February 15, 2019**

If you are a person who:

1. As a result of the 2016 Hepatitis A outbreak infections linked to consuming food at thirteen Genki Sushi restaurants located on the islands of Oahu, Kauai, and Maui, were exposed to the Hepatitis A virus ("HAV") through one of three exposure-mechanisms (SEE page 2 of this form), but did not become infected, AND
2. As a result of such exposure, after learning of the requirement of treatment from an announcement of public health officials or a medical professional, obtained preventative medical treatment, such as receiving immune globulin ("IG"), HAV vaccine, or blood test within fourteen days of exposure, and you wish to participate in the settlement, please complete this form.

IMPORTANT – If you previously submitted a Hawai'i Hep-A Claim Form, you do not need to submit a second form.

>> YOUR SIGNATURE IS REQUIRED ON PAGE 2 <<

Fill out a separate claim form for each person who received immune globulin ("IG"), Hepatitis A virus ("HAV") vaccination or blood test. Parent or guardian should fill out a separate claim form for a minor child who obtained treatment.

CLAIMANT _____
FULL NAME

MAILING _____
ADDRESS STREET

_____ CITY STATE ZIP

CONTACT _____
PHONE EMAIL

WHICH SUBCLASS DO YOU BELONG TO?

I AM A MEMBER OF THE FOLLOWING EXPOSURE SUBCLASS (DEFINED ON PAGE 2) [SELECT ONE OF THE FOLLOWING SUBCLASSES]:

EXPOSURE SUBCLASS 1 (\$350): I WAS IN CONTACT WITH THE FOLLOWING PERSON(S) WHO WAS INFECTED WITH HAV AS PART OF THE 2016 HEPATITIS-A OUTBREAK (SEE PAGE 2 FOR DEFINITION OF A "CONTACT"): NAME(S): _____

EXPOSURE SUBCLASS 2 (\$250): I WAS EXPOSED TO HAV AS A RESULT OF CONSUMING FOOD AT ONE OF THE GENKI SUSHI RESTAURANTS ON OAHU, KAUAI, OR MAUI (LISTED ON PAGE 2) BETWEEN AUGUST 1 AND AUGUST 16, 2016.

APPROXIMATE DATE(S) OF VISIT _____

EXPOSURE SUBCLASS 3 (\$150): I WAS EXPOSED TO HAV AS A RESULT OF CONSUMING FOOD OR DRINK AT ONE OF THE SECONDARY ESTABLISHMENTS (LISTED ON PAGE 2) WHERE HAV EXPOSURE OCCURRED IN 2016.

NAME OF SECONDARY ESTABLISHMENT: _____ DATE(S) OF VISIT _____

TREATMENT INFORMATION

APPROXIMATE DATE(S) OF TREATMENT (IG, HAV VACCINE, OR BLOOD TEST): _____

DID YOU RECEIVE TREATMENT WITHIN 14 DAYS OF YOUR EXPOSURE TO THE HEPATITIS A VIRUS ("HAV")? YES NO

WHERE DID YOU OBTAIN TREATMENT? _____

WAS YOUR TREATMENT COVERED BY INSURANCE? YES NO

IF YES: NAME OF INSURANCE PLAN: HAWAII MEDICAL SERVICES ASSOCIATION (HMSA)
 HAWAII MEDICAL ASSURANCE ASSOCIATION (HMAA)
 KAISER FOUNDATION HEALTH PLAN
 UNIVERSITY HEALTH ALLIANCE (UHA)
 OTHER: _____

IF NO: You Must Provide Documentation that You Received IG, HAV Vaccine or Blood Test

YOUR INSURANCE ID #: _____

CLASS MEMBER'S DECLARATION

I declare under penalty of perjury that:

1. The information set forth in this Claim is true and correct to the best of my knowledge and belief.
2. In 2016, as a result of being exposed to HAV through one of the three exposure-mechanisms, I received IG, HAV vaccine or HAV blood test within 14 days of exposure to HAV.
3. Prior to my 2016 exposure to HAV, I did not previously have HAV and had not previously received a HAV vaccination.

CERTIFICATION

SIGNATURE OF CLAIMANT OR PARENT/GUARDIAN OF CLAIMANT

DATE

CHECK BOX IF YOU ARE SIGNING AS THE PARENT OR GUARDIAN OF THE CLAIMANT

THIS FORM WILL NOT BE ACCEPTED UNLESS ALL INFORMATION IS PROVIDED, SIGNED BY THE CLAIMANT AND SUBMITTED SO THAT IT IS RECEIVED NO LATER THAN FEBRUARY 15, 2019 TO:

HAWAII HEP-A, THE NOTICE COMPANY, PO BOX 455, HINGHAM, MA 02043

Fax: 808-748-0584 or Email: claims@HawaiiHepa.com

Persons who qualify as members of the Class (“Class Members”) will consist of three Subclasses based on the manner in which the Class Members were exposed to HAV:

Exposure Subclass 1: All Class Members who were in contact with one of the 292 persons who the Hawai'i Department of Health identified as infected with Hepatitis A virus (“HAV”) as part of the 2016 Hepatitis A Outbreak. A contact is defined as: (a) All household members of one of the 292 persons; (b) All sexual contacts with one of the 292 persons; (c) Anyone sharing illicit drugs with one of the 292 persons; (d) Anyone sharing food or eating or drinking utensils with one of the 292 persons; **and/or** (e) Anyone consuming ready-to-eat foods prepared by one of the 292 persons.

Exposure Subclass 2: All Class Members who as a result of consuming food on or between August 1 to August 16, 2016, were exposed to HAV at one of the following thirteen Genki Sushi restaurants located on the islands of Oahu, Kauai, and Maui, implicated in the summer 2016 outbreak of HAV:

- | | |
|---|---|
| 1) 3-2600 Kaunaulii Hwy, Kauai, HI 96766 | 7) 4450 Kapolei Parkway, Kapolei, HI 96707; |
| 2) 820 West Hind Drive, # 102, Honolulu, HI 96821 | 8) 98-1005 Moanalua Road, Ste.801, Aiea, HI 96701 |
| 3) 1450 Ala Moana Blvd #2096, Honolulu, HI 96814 | 9) 94-799 Lumiaina St., Waipahu, HI 96797 |
| 4) 91-1401 Fort Weaver Rd. D-102, Ewa Beach, HI 96706 | 10) 98-430 Kamehameha Hwy, Pearl City, HI 96782 |
| 5) 45-480 Kaneohe Bay Drive, Kaneohe, HI 96744 | 11) 1200 Ala Moana Blvd, Honolulu, HI 96814 |
| 6) 888 Kapahulu Ave, Honolulu, HI 96816 | 12) 70 E. Kaahumanu Ave, Kahului, HI 96732 |
| | 13) 435 Keawe St., Lahaina, HI 96761 |

Exposure Subclass 3: All Class Members who as a result of consumption of food or drink from one or more of the Secondary Establishments identified below, where an employee infected as part of the 2016 Hepatitis A Outbreak (one of the 292 persons) was found to have worked on the Identified Dates, were exposed as a result of consuming food or drink at the Secondary Establishment during one or more of the Identified Dates. The Secondary Establishments and Identified Dates are as follows:

- Baskin Robbins located at Waikele Center, HI 96797: June 30 and July 1, 2, 2016
- Taco Bell located at 94-790 Uke'e St., Waipahu, HI 96797: July 1, 3, 4, 6, 7, 11, 2016;
- Sushi Shiono located at 69-201 Waikoloa Beach Drive, Waikoloa, HI 96738: July 12, 13, 14, 15, 18, 19, 20, 21, 2016
- Chili's Grill & Bar located at 590 Farrington Hwy, Kapolei, HI 96707: July 20, 21, 22, 23, 25, 26, 27, 2016;
- Twelve Hawaiian Airlines flights: flight 118 on July 24; flight 117 on July 24; flight 382 on July 24; flight 383 on July 24; flight 396 on July 24; flight 365 on July 24; flight 273 on July 25; flight 68 on July 25; flight 65 on July 25; flight 147 on July 26; flight 18 on August 10; and flight 17 on August 12, 2016;
- Tamashiro Market located at 802 N. King St., Honolulu, HI 96817: July 23, 2016;
- Papa John's located at 94-1012 Waipahu St., Waipahu, HI 96797: August 2, 2016;
- New Lin Fong Bakery located at 1132 Maunakea St., Honolulu, HI 96817: July 27, 29, 30, and August 1, 3, 5, 6, 2016;
- Hokkaido Ramen Santouka, located at 801 Kaheka St., Honolulu, HI 96814: August 3, 4, 5, 6, 9, 10, 11, 2016;
- Kipapa Elementary School located at 95-76 Kipapa Dr., Mililani, HI 96789: August 10, 11, 12, 13, 14, 15, 16, 2016;
- Zippy's Restaurant located at 950 Kamokila Blvd., Kapolei, HI 96707: August 14, 18, 19, 21, 23, 25, 26, 2016;
- Harbor Restaurant at Pier 38 located at 1133 North Nimitz Hwy, Honolulu, HI 96817: August 30-31 and September 1- 12, 2016;
- Ohana Seafood at Sam's Club located at 1000 Kamehameha Hwy., Pearl City, HI 96782: September 1- 11, 2016;
- Chart House Restaurant located at 1765 Ala Moana Boulevard, Honolulu, HI 96815: September 4, 8, 9, 10, 11, 2016; and
- McDonald's Restaurant located at 4618 Kilauea Avenue, Honolulu, HI 96816; October 5, 7, 11, 2016.

DO YOU NEED TO ATTACH DOCUMENTATION?

- If your treatment was not covered by insurance or if you did not identify an insurer who covered your treatment, then you must show receipt of IG, HAV vaccine, or blood tests by providing documentation from a medical provider. Your receipt of IG, HAV vaccine, or blood tests is subject to verification.
- No documentation required if your treatment was covered by insurance as identified on your claim form.
- No receipts required from Genki Sushi or other locations where you consumed food.

QUESTIONS? Visit www.HawaiiHepA.com or call 1-800-532-9250.