

VICTOR G. RIEMER, et al	*	IN THE
	*	
Plaintiffs	*	CIRCUIT COURT
	*	
v.	*	FOR
	*	
COLUMBIA MEDICAL PLAN, INC.	*	HOWARD COUNTY
	*	
and	*	Case No. 13-C-96-31528
	*	
FREE STATE HEALTH PLAN, INC.	*	
	*	
Defendants	*	

* * * * *

ORDER

Upon full consideration of each of the following motions, the accompanying memoranda, and after hearing the arguments of counsel as to each motion, it is

ORDERED, this 27th day of May, 2003, by the Circuit Court for Howard County,

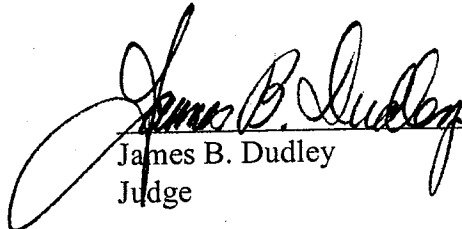
that:

1. Columbia Medical Plan's Motion for Summary Judgment as to Plaintiff Riemer and the proposed class are denied.
2. Columbia Medical Plan's Motion to Reconsider the Class Certification Order and to Decertify the Class is denied.
3. The Plaintiffs' Motion to Strike Affirmative Defenses is denied.
4. The Plaintiffs' Motion for Partial Summary Judgment on behalf of Plaintiffs Riemer and the class as defined in #8 hereof, is granted as to liability only and as to Count I only.
5. Plaintiffs' Motion to Appoint a Special Master is granted.
6. Columbia Medical Plan's Motion to enter a final judgment as to Plaintiff Riemer pursuant to Rule 2-602(b) is denied.

7. The Plaintiffs' Motion to add Free State Health Plan as a defendant is granted. Plaintiff shall arrange to promptly serve Free State Health Plan, Inc., with a copy of this Order. CMP and FSHP are both subsidiaries of Blue Cross and Blue Shield of Maryland, Inc.
8. The Plaintiffs Motion to Amend the Class Definition is granted. The Amended class definition is:

All persons who (1) are or have been members of the Columbia Medical Plan, Inc. ("CMP"); (2) have received medical or health care service or treatment from CMP; (3) between July 15, 1993 and June 1, 2000, were notified by CMP that it had a contractual lien or subrogation claim against any monies that the members or insureds had received or would receive from a third-party; (4) those members or insureds who actually paid any sums to CMP in response to the demand for reimbursement or subrogation; and (5) any member or insured of CMP who after March 29, 1998, paid any monies to Free State Health Plan, Inc., in response to any claim that Free State was contractually entitled to any lien or subrogation claim against any monies that the member or insured had or would receive from a third-party.

Excluded from that class are: (1) federal government employees who are insureds under federal employee health insurance contracts governed by the Federal Employees Health Benefits Act ("FEHBA"), 5 U.S.C. §8901, et al; those individuals who are or have ever been employees of CMP and/or FHP and the spouses, parents, siblings and children of all such individuals; (3) CMP and/or FHP members or insureds who are or have been members of CMP and/or FHP through ERISA benefit plans that are self-funded within the meaning of 28 U.S.C. §514(b)(2)(B); and (4) CMP and/or FHP members or insureds who received their insurance with CMP and/or FHP through Medicare.


James B. Dudley
Judge

Copies to: Kieron F. Quinn, Esquire
Martin E. Wolf, Esquire
Robert K. Jenner, Esquire
Bruce M. Plaxen, Esquire
F. Paul Bland, Esquire
Ralph S. Tyler, Esquire

(Mailed: 5/28/03)