

## Bulk Data Import Template Instructions

Download the Excel **Endo PI Import Template** or the **Endo NAS PI Import Template** to import data for the applicable claim form type. The Excel spreadsheet is formatted to provide predefined columns for all the fields included in each of the claim forms. The data fields can be populated manually, or data can be copied and pasted from other reports or databases if the information matches the format referenced in row 2 - Ex. varchar(50), char(2), datetime, etc.

Please review the information that follows closely and in its entirety before utilizing the templates. If you have questions regarding the use of the import templates, please send your questions via email to [endopitrust@endopitrust.com](mailto:endopitrust@endopitrust.com) (preferred) or call 855-637-5538, and we will be glad to assist.

**IMPORTANT NOTE:** If you are filing NAS PI Claims that were previously filed under the MNK PI Trust, please see the *Endo NAS PI Claim List for those with Claims Filed Under MNK* section at the end of this document.

### Template Types

- Endo PI Import Template
- Endo NAS PI Import Template

### Header Rows

- Row 1 = Claim Form Part/Section
- Row 2 = Required Data Format and Field Length
  - Ex. varchar(120) = letters, numbers and special characters up to 120 characters and spaces
- Row 3 = Field Content/Description

### Required Fields

**DUE TO THE SHORT CLAIM SUBMITTAL/PROCESSING WINDOW THE TRUST WILL NOT RECEIVE DOCUMENT UPLOADS WITHOUT COMPLETED IMPORT TABLES** (i.e. The Trust will not key the import tables for the firm). If the firm fails to submit the corresponding bulk upload spreadsheet, the Endo PI Trust will flag the submission as deficient, and we will not process the claims until we are in receipt of the spreadsheet. This will delay the processing of your claims.

## General Notes

***Please do not modify the spreadsheet fields in any way. The spreadsheet is built to match with the fields in the portal. Changing the spreadsheet will result in a failed portal upload attempt, ultimately delaying the processing of your submitted claims.***

For sections that include “tinyint (0 or 1)” please do not enter text beyond 0 or 1. Please note that on the spreadsheet, 0 = No and 1 = Yes

BP	BQ
Part 4 - Section 4.A	
tinyint (0 or 1)	tinyint (0 or 1)
bInsuranceCompanyPaidForTreatment_4A	bMedicare_4B

If your claimant does not recall or know information, for example in Part Four: Medical Liens, please do not enter text such as “do not recall” or “does not know”. If the claimant does not know, please enter 0 in the required field if it includes the “tinyint (0 or 1)” text in the column.

Below are guidelines for specific fields:

- Firm Client ID
  - Endo PI Import Template and Endo NAS Import Template
    - Firm\_ClaimantsID (column A)
      - If your firm does not have a unique client ID number, then use the SSN *without* dashes.
- **Injured Party** First Name, **Injured Party** Last Name, and **Injured Party** SSN/SIN
  - Endo PI Import Template
    - If the PI **Injured Party is Living**
      - ClaimantFirstName\_1A (column C)
      - ClaimantLastName\_1A (column D)
      - ClaimantSSN\_1A (column L)
    - OR -
    - If the PI **Injured Party is Deceased**
      - OpioidUserFirstName\_1B (column Q)
      - OpioidUserLastName\_1B (column R)
      - OpioidUserSSN\_1B (column W)

- Endo NAS Import Template
  - If the NAS **Injured Party is Living or Deceased**
    - NASChildFirstName\_1A (column C)
    - NASChildLastName\_1A (column D)
    - NASChildSSN\_1A (column L)

### **Content/Use Options**

**DUE TO THE SHORT CLAIM SUBMITTAL/PROCESSING WINDOW THE TRUST WILL NOT RECEIVE DOCUMENT UPLOADS WITHOUT COMPLETED IMPORT TABLES** (i.e. The Trust will not key the import tables for the firm). The Bulk Data Import can be submitted for any one of the following purposes:

- **Full data upload** to complete the claim forms for your clients to then log in and review the data uploaded and submit/sign the claim form.
- **Personal Information (Part 1) and claim related data upload** for your clients to then log in and review the data uploaded, complete the insurance (Medical Lien Part) and medical provider/birth facility (for NAS) information, and submit/sign the claim form.
- **Personal Information (Part 1) upload** for your clients to then log in and review the data uploaded, complete the remainder of the information, and submit/sign the claim form.

### **Submittal Options**

- New Claimant Data – Data for claimants that **have not** been previously uploaded or completed a claim form independently.
- Claimant Data Updates – Data updates for claimants that have been previously uploaded or completed a claim form independently. The data provided in the update must be the full data for the claimant and not just the updated portion (ex. address change, add/remove injury, etc.) as all data on the claim form will be updated to reflect the import table.

### **File Naming Format**

- New Claimant Data
  - Endo PI YYYY.MM.DD – New
  - Endo NAS YYYY.MM.DD – New
- Claimant Data Updates
  - Endo PI YYYY.MM.DD – Update
  - Endo NAS YYYY.MM.DD – Update

## Submittal Process

Due to the sensitivity and regulations around the data being passed, files must be submitted securely; therefore, will be:

- A Dropbox folder provided by our firm
  - Setup Requirements – Email the following to [endopitrust@endopitrust.com](mailto:endopitrust@endopitrust.com)
    - Firm Name
    - Email of those that should have access to the Dropbox
      - Access can be removed/added as needed

If the data file will be accompanied by supporting documentation (see Document Submittal Instructions), the file and related documents will need to be separated into folders by submittal date using the following format for the folder name - YYYY.MM.DD.

## Access to Records Within the Portal

As a reminder, all claims, data, documentation, etc. related to a submittal is based off of the **Injured Party** (PI = the opioid user and NAS = the child).

**Individual access to the portal**, whether by the Injured Party or the Claimant/Representative, utilizes the Injured Party's last name as the User ID and the 9-digit SSN/SIN without dashes, for the password.

The first time the individual goes into the portal, they will log in as a New User using the Injured Party's last name and SSN/SIN. If data has been imported by a firm for them, upon entry, they will verify the firm and proceed into the applicable claim form. When returning to the portal at any time after the initial New User log in/entry, they will log in as a Returning User using the same Injured Party's last name and SSN/SIN information.

## Additional Notes

- Injured Party's **full** SSN or SIN is **required** for import as the unique SSN/SIN is used in multiple validation steps. If you have a claimant that does not have a SSN/SIN, please email [endopitrust@endopitrust.com](mailto:endopitrust@endopitrust.com) to set up a time to discuss the situation and determine next steps.
- The SSN/SIN related columns are formatted as text to ensure that the leading zeros are picked up. If you are copying/pasting from another table, please ensure that the columns are formatted as text and reflect the leading zeros where applicable.
- Please only submit **one** PI and/or NAS import file per day to ensure that files are not overridden at submittal/upload.

## Endo NAS PI Claim List for those with Claims Filed Under MNK

For law firms wishing to submit all or a portion of their NAS Claims previously filed under the MNK PI Trust, we have created a table to be completed and submitted by the firm providing a list of Endo NAS PI Claims for those with Claims previously filed under MNK - ***Endo NAS PI Claim List for those with Claims Filed Under MNK Table***. See the description below as well as the Bulk Data Import Instructions for more information.

The ***Endo NAS PI Claim List for those with Claims Filed Under MNK Table*** is available under the Law Firm Import Instructions page on the endopitrust.com website and includes the following information. The information must be completed in its entirety with the exception of the Middle Name for both the Child/Injured Party and the Claimant/Proxy:

- A. Firm Client or Claimant ID (the full SSN without dashes if no client or claimant ID is used by the firm)
- B. Child/Injured Party First Name
- C. Child/Injured Party Middle Name
- D. Child/Injured Party Last Name
- E. Child/Injured Party SSN (full SSN without dashes)
- F. Claimant/Proxy First Name\*
- G. Claimant/Proxy Middle Name
- H. Claimant/Proxy Last Name\*
- I. Claimant/Proxy Relationship to Child/Injured Party\*
- J. Was a **Proof of Claim** Filed Under the Endo Bankruptcy?
  - a. If no, enter "N."
  - b. If yes, provide Claim #.
- K. Was the **Non-GUC Release** Deemed to Have Been Granted?
  - a. Provide a Y or N

- \* As noted, the Claimant/Proxy name and Relationship to the Child/Injured Party are required fields; however:
  - o If the Claimant/Proxy name and/or Relationship to the Child/Injured Party **HAS NOT** changed since the MNK Claim submittal, no form or documentation is needed in relation to the Proxy.
  - o If the Claimant/Proxy name and/or Relationship to the Child/Injured Party **HAS** changed since the MNK Claim submittal, a new Proxy form is required along with supporting documentation, if applicable (see the Endo NAS PI Trust FAQs' section on FILING FOR A MINOR CLAIMANT).