Exhibit B

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UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

ROBERTA LANCIONE, et al	)	
	)	
	)	
Plaintiffs	)	
	)	
v.	)	**DOCKET NO. 1:21-cv-11686**
	)	
MASS GENERAL BRIGHAM INCORPORATED	)	
	)	
Defendant	)	

PLAINTIFFS' EXEMPTION PROCESS QUESTIONNAIRE FOR DEFENDANT, MASS GENERAL BRIGHAM INCORPORATED

The Federal Rules of Civil Procedure, including Fed. R. Civ. P. 33 and 34 and the corresponding Local Rules, apply with full force to this Questionnaire. Answers and production to the questions within are under oath and must answers to every question must be provided that are true and correct to the best of your knowledge. If needed, please attach additional sheets so that all answers are complete, indicating the question number to which the additional information is responsive. You must supplement your responses if you learn they are incomplete or incorrect, or if new information becomes available.

MGB'S COVID-19 VACCINE POLICY EXEMPTION AND ACCOMMODATION QUESTIONS

1. Please describe the selection process that was used to determine who would participate in reviewing religious and/or medical exemption

requests, including who had authority to appoint reviewers and committee members and include the organizational structure of each committee.

2. Please identify any individuals who participated in any fashion with the review of religious exemption requests, stating that individual's:

    a. Name
    b. Date of birth
    c. Job Title and/or position
    d. Date that they started working at Mass General
    e. Specific qualifications to determine the sincerity of religious beliefs
    f. Specific qualifications to determine whether affording a religious accommodation would be an undue hardship for defendant

3. Please identify any individuals who participated in any fashion with the review of medical exemption requests, stating that individual's:

    a. Name
    b. Date of birth
    c. Job Title and/or position
    d. Date that they started working at Mass General
    e. Specific qualifications to determine whether an individual has a disability

f. Specific qualifications to determine whether affording a medical accommodation would be an undue hardship for defendant

4. Please identify any specific criteria, guidelines or rules (including any standard responses to emails) that were provided to individuals who participated in the review of medical and/or religious exemptions and provide responsive documents showing said criteria being communicated with the individuals involved in the review processes.

5. Please identify any training, guidance or procedures that were implemented in reviewing religious and medical exemptions to the COVID-19 vaccine policy that were not part of previous religious and medical exemption reviews.

6. Please identify who had authority to approve or deny a religious and/or medical exemption, and for those individuals please provide the number of approvals and number of denials by type (religious and medical).

7. Please provide the basis for and guidelines for review as to how the committee members/reviewers determined that a "religion publicly supports" vaccination, and how these guidelines were applied to individual applications.

8. **Medical Exemption Reviewers:** for each individual who participated in the review and/or decision-making with respect to plaintiff's medical exemptions/accommodations, please provide:

    a. Names of plaintiffs whose medical exemptions they reviewed
    b. Names of individuals who were granted an exemption by said reviewer
    c. Whether the determination was made individually and/or as a group or "committee"
    d. The email address used to communicate with other individuals involved in the review of medical exemptions
    e. Communications to the plaintiffs sent by said individual, whether using a committee email or his/her own
    f. Communications between said individual and any other individuals involved in the review of medical exemptions.

9. **Medical Exemptions/Accommodations:** Please list the conditions that resulted in medical exemptions and/or accommodations to the COVID-19 vaccine policy provided by defendant.

10. **Religious Exemption Reviewers:** for each individual who participated in the review and/or decision-making with respect to plaintiff's religious exemptions/accommodations, please provide:

    a. Names of plaintiffs whose religious exemptions they reviewed
    b. Names of individuals who were granted an exemption by said reviewer
    c. Whether the determination was made individually and/or as a group or "committee"
    d. The email address used to communicate with other individuals involved in the review of religious exemptions
    e. Communications to the plaintiffs sent by said individual, whether using a committee email or his/her own
    f. Communications between said individual and any other individuals involved in the review of religious exemptions.

11. **Religious Exemptions/Accommodations:** Please list the religious beliefs and/or practices that resulted in religious exemptions and/or accommodations to the COVID-19 vaccine policy provided by defendant.

12. Please list the names and job titles of each individual who has received an "exemption" or accommodation to your COVID-19 vaccine policy, and include:

    a. Job title
    b. Status (contractor and/or employee)
    c. Date they started at Mass General
    d. Whether the exemption was for the COVID vaccine, booster or both
    e. Accommodation provided
    f. Whether the individual requested the accommodation provided or whether it was directed by MGB

13. **Outside Information**: Please state what outside information was relied upon by individuals who reviewed medical and/or religious exemptions, such as outside research into religious beliefs, outside communications regarding plaintiffs who applied for exemptions, etc., and provide supporting documents.

14. **Social Media:** For any individual who participated in either 1) the decision to implement the COVID-19 vaccine policy, or 2) the review of any religious and/or medical exemptions or accommodations, identify any social media accounts (*e.g.* Facebook, Instagram, Twitter, YouTube, WhatsApp, TikTok, Linkedin) or online forums (including but not limited to the comments sections of online publications, websites or social media posts) on which they have discussed COVID-19 vaccines or vaccine mandates or religious and/or medical objections to the same.

Name of Social Media Platform Or Online Forum	**User Name**	**Date Began Using**

15. For any of the social media accounts or online forums listed above, identify in the space below any statuses, posts, comments, messages, or any other communications you have made in support of COVID-19 vaccines or vaccine mandates and/or religious or medical objections to said vaccines and/or mandates by stating: (i) the name of the social media platform or online forum, (ii) the date, and (iii) the substance of the status, post, comment, message, or communication. Please provide any copies of the communications you identify in your answer.

Note: to provide copies of any communications identified, you may use "screenshots." Any screenshots of communications should include enough of the status, post, comment, message, or other communication to show the context. For example, a screen shot of a comment should include the content to which the comment responded or related. Any screenshots should be marked with the date and time on which the screenshot was taken. If you provide screenshots in response to this question, you still have a duty to preserve any and all electronically-stored versions of the communications and you may be later asked to provide further information or documents about the communications.

16. **Internal Correspondence:** Please describe how each committee and reviewers individually communicated about plaintiffs, including the method of communication and/or meeting and include any notes taken

by reviewers and any recorded remote meeting files.

Name	Method of Communication	Notes/Recording?

17. Identify and provide any correspondence from defendant to plaintiffs' supervisory and management personnel regarding the exemption process and accommodations to the COVID-19 vaccine policy.

18. Identify and provide all correspondence containing guidance to exemption committee members and reviewers regarding an interactive process with respect to exemptions and/or accommodations for the COVID-19 vaccine policy.

19. State approximately how many hours each committee member/reviewer spent reviewing exemption applications, supporting documents and communicating with applicants for exemptions to the COVID-19 vaccine policy.

Plaintiffs, by their attorney,

/s/ Ryan P. McLane

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