

LIFE INSURANCE CLAIM DENIED FACT SHEET



Mark was a successful 40 year old dentist, happily married and father of 3 children. His wife was a stay at home Mother. Mark had a lucrative practice, and he knew that if anything happened to him it would be impossible for his family to maintain their lifestyle and for his children to attend college. On the advice of his financial advisor, he purchased a 2 million dollar whole-life policy and a 2 million dollar twenty year term life-policy. Mark underwent medical testing as part of the life insurance application process.

About 3 months after insurance policies had been delivered to Mark, he noticed numbness in his hands and that his speech was slurred. His physician diagnosed Mark with ALS, or amyotrophic lateral sclerosis, a progressive neurodegenerative disease that affects nerve cells in the brain and the spinal cord. He died 15 months later. This was less than 24 months after the life insurance policy had issued to Mark. When his wife filed a claim, the insurance company denied it. His wife was grief stricken and desperately needed the proceeds from the life insurance policies to support her family. She hired an attorney to appeal the claim denial

Life insurance policies provide a lump sum benefit when the insured individual dies



The death can be the result of age, illness, an accident, or a crime. Even death by suicide will be covered if the policy has been in force for several years.

Filing a life insurance death benefit claim when the unthinkable happens is a challenging task for survivors, however, it's important to file a claim quickly and accurately after a death occurs so that beneficiaries receive the financial security their loved one provided.

Some Life Insurance Claims are Denied



A claim for benefits filed within the first two years after taking-out a life insurance policy is subject to scrutiny. This is the contestability period. After this time, most life insurance policies become incontestable. The insurance company's grounds to deny your claim after this time period is usually limited to fraud ---such as using an imposter at an insurance conducted medical exam.

Our mission is to help you cut through the red-tape and fight for you so the insurance company pays the benefits your loved one purchased. We understand why claims are denied, and we know how to get them paid.

The Life Insurance Company Must Tell You Why Your Claim Was Denied



Life insurance companies that do not provide you with a valid reason why a benefit claim has been denied may be in violation of your state's laws. Most states govern insurance company behavior by statute, regulation or administrative directive. An insurance company who wrongfully denies a life insurance claim may be liable for damages, usually compensatory and sometimes punitive.

A Through Appeal Increases the Chances of Winning Your Claim



Explaining to your insurance company why it made a mistake in denying your claim is the preferred course to take. But when your insurance company will not listen, then filing suit becomes the only alternative.

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Life Insurance Companies Don't Always See Accidents The Way We Do



Single vehicle accidents, drug overdoses, whether from prescription medications or street drugs, gunshot wounds, or other self-inflicted injuries, and deaths overseas set-off alarm bells at life insurance companies.

We assist clients in gathering all of the important information, and correctly present it to the insurance company so our clients get paid and can move forward with their lives.

Insurance Company Must Prove Material Misrepresentation



It is the insurance company's responsibility to prove the insured made a misrepresentation and that the insurance company would have done something different with the policy had it been known. Examples of certain misrepresentations are: not disclosing medical treatments or diagnoses on insurance applications or failing to disclose, smoking or drug use, or partaking in dangerous hobbies such as deep sea diving, flying small planes, car racing etc.

You Have a Small 90 Day Window to File Your Appeal with the Insurance Company



Particularly with group life insurance you have a limited time to file a request for an appeal of your claim denial. Many appeal deadlines are as short as 60-days. Most insurance companies are reasonable and will grant you an extension if you ask during that 60-day time period.

Our law firm's goal is the same as yours – prompt payment of your claim



When your insurance company reviews a detailed death claim appeal supported with solid evidence substantiating a death benefit claim and why the insurer must pay, the likelihood that your claim will be approved is markedly increased. We guide you through the process and help you every step of the way.

If you feel your life insurance death benefit claim was unfairly denied Mr. Feigenbaum will examine your claim and provide you with the advice you need. In one telephone call, you will receive an analysis and action plan to get your claim paid.

To talk with a lawyer you can trust about your life insurance death benefit claim, appealing a denial or pursuing litigation in court, contact us at www.erisaattorneys.com, or call us at **617-357-9700** or toll-free at **866-396-9722**. Your initial consultation is free.