

LEGAL PROCESS FOR HIGH-BALANCE DENIALS

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\$400K in Revenue

With Professional's help, the nonprofit faith-based health system was able to win a settlement of \$400,000 in revenue.

ERISA CASE RETURNS \$400,000 IN REVENUE

In the first example, our client is a large nonprofit, faith-based health system which serves patients across six states. We were contacted to contribute legal assistance when they had exhausted the appeals process on a very special claim. Their patient, a nine year old girl, had suffered from an acute respiratory disease since birth. The circumstances of the disease necessitated travel to see specialists across three states, an expense that her insurance company was no longer willing to cover.

To complicate matters further, due to the nature of the patient's coverage, the claim would be brought to litigation as an Employee Retirement Income Security Act (ERISA) case. Despite the fact that ERISA cases are notoriously laborious, as new decisions regularly impact judicial opinion, we were able to win settlement and return \$400,000 in revenue to our client.

REASONABLE COURSE OF ACTION FOR MENTAL HEALTH CLAIM

Our next example involves a mental health claim with extenuating circumstances in Washington State. This client is also a large nonprofit health system comprised of nearly 30 hospitals and numerous non-acute facilities. Their patient, a diagnosed schizophrenic, was experiencing violent episodes which required hospitalization due to the danger he may present to himself or others. After two weeks of care, the doctor determined that he could be released from the hospital only if placed in a care facility that would provide him 24-hour supervision. The hospital could not discharge the patient while

placement in a care facility was being arranged and circumstances were such, as it was near to a major holiday, that all nearby mental health facilities were full. Despite the fact that the hospital had not administered new care during this period and could not release the patient for the danger posed to society, the insurance company denied coverage for the patient's stay beyond the point he could have been discharged. Arguing that our client had taken the only reasonable course of action for the safety of the patient and others, our legal team was able to win \$65,000 in arbitration.

A large nonprofit health system won \$65,000 in arbitration through legal actions performed by Professional.

Awarded \$65k

Professional can act as an extension of your organization when it comes to recovering critical revenue from high-balance denied claims. Utilizing the policies and contracts unique to each claim, our legal team's experienced negotiators can take the burden off of in-house efforts. From the first demand letter to the final judgment, we handle every step of the process – even collection and garnishment.

