



# Expect Insurance Claim Delays and Denials as a Result of Covid-19

---

*Every professional and business is facing challenges adjusting to COVID-19. This shift will understandably result in a surge of insurance claim denials.*

LOS ANGELOS, CA, USA, April 2, 2020 /EINPresswire.com/ -- Every business, regardless of

“

Unfortunately, insurance claim denials will rise, but that does not mean that you should not fight for your insurance benefits.”

*Donahue Horrow*

industry, is facing challenges adjusting to COVID-19. Everyone is being encouraged to self-isolate or practice social distancing. The result, a loss of business across the board, bringing with it, immediate, and in some cases irreparable, hardship on the part of individuals and business owners. In the short term, adjustments are being made across all industries, but insurance companies, in particular, are being forced to shift their focus towards COVID-19 coverage. This shift will understandably result in a surge of insurance claim denials.

COVID-19 testing and treatment are the main priorities in the U.S. and across the globe, with many States encouraging health insurance companies to help subscribers through this crisis. The federal Families First Coronavirus Response Act was passed on March 18, 2020, to require health insurance companies to waive particular costs for FDA-approved COVID-19 testing, extend unemployment benefits, and provide paid sick leave from coronavirus.

With both the legislation and insurance companies focusing on COVID-19, how will this shift in attention affect claim denials for private disability, health, and long-term care policies?

Statistics vary depending on the source, but all report that over 50% of initial private disability claims are denied each year and that number is likely to increase as insurance companies turn their focus to ensure coronavirus patients are covered.

Many leading insurance companies are making statements about how their insurance coverage is changing to accommodate the coronavirus, but how that influences non-coronavirus insurance claims is not yet clear.

Insurers have been trying to get ahead of this by making statements on their websites committing to maintaining continuous operations and emphasizing they have professionals available to process new claims. While that is ideal, there is no certainty that their attention will not have to turn to COVID-19 claims as more arise.

There is also no certainty that patients will be able to contact their doctors to get the medical records necessary to file a claim or the medical reports to support the claim, thus making it hard for them to file in a timely manner. At the same time, it is likely that insurance companies will spend less time reviewing new claims and place non-COVID-19 cases at a lower priority, resulting in further delays and increased denials.

This is not a valid excuse for delaying the processing of new insurance claims. Insurance companies have a duty to communicate in a timely manner and to grant payments to those deserving of compensation under their policies.

Doctors are encouraging their patients to cancel their routine and non-critical appointments as coronavirus spreads. Their offices are not likely to reopen to non-coronavirus patients again until April 30th, at the earliest. As such, the possibility of patients not being able to access their medical records or their physician during this time is heightened because doctor's offices will not be operating as usual. When they finally do reopen for normal operation, there is likely to be an influx in the number of patients seeking appointments and medical records, making it even more difficult to be seen by a doctor and begin your insurance claim process. Submitting an insurance claim is an extensive process in and of itself, nevermind a global pandemic delaying the process.

Some doctor's offices are employing telephone and video appointments which will get your process started, but for most claims, an in-person visit will be required. While it is important to call your doctor, telephone lines are extremely busy at this time. Be persistent. Do not let long hold times delay the start of filing your claim.

While in the immediate term, insurance companies may be only slightly slower to process new claims and manage current claims, the deluge of claims related to COVID-19 is sure to come and will certainly create a backlog. With governmental and other political pressure being applied, insurance companies may be rearranging their priorities internally and unfortunately for claimants, wrongfully denying claims for private disability, health insurance, and long-term care. Valid insurance claims are likely to be overlooked and denied.

Currently, 1 in 6 American families has at least one adult who is disabled and unable to work. That number does not change because of the current health crisis. What changes is that the resources available to assist disabled or injured individuals will become increasingly limited by the day.

Unfortunately, incidence of [insurance claim denial](#) will rise, but that does not mean that you should not fight for your insurance benefits. While these times are unprecedented and uncharted, there is never a time in which insurance companies should be allowed to act in bad faith. The attorneys of Donahue & Horrow, LLP have 50 years of experience and have recovered over \$190 million for clients. We will always be and remain here to fight for you.

Michael Horrow  
Donahue Horrow  
+1 877-664-5407  
[email us here](#)  
Visit us on social media:  
[Facebook](#)

---

This press release can be viewed online at: <http://www.einpresswire.com>

Disclaimer: If you have any questions regarding information in this press release please contact the company listed in the press release. Please do not contact EIN Presswire. We will be unable to assist you with your inquiry. EIN Presswire disclaims any content contained in these releases. © 1995-2020 IPD Group, Inc. All Right Reserved.