

Chicago Law Firm Exposes Hidden Tactics Insurers Use to Deny Legitimate Disability Claims

Partner Reveals Third-Party Doctors, Surveillance, and Legal Loopholes Cost Americans Billions in Rightful Benefits

CHICAGO, IL, UNITED STATES,
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-- Most Americans assume their
disability insurance will be there when
they need it. According to Matt
Maloney, a partner at DeBofsky Law
specializing in <u>ERISA</u> and disability



insurance litigation, that assumption is dangerously wrong.

"I've seen insurers tell a woman who lost complete use of her arm that she could still work, just use the other one," said Maloney, who has spent nearly a decade fighting insurance denials.

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Matt Maloney, partner at DeBofsky Law In a candid interview, Maloney exposed tactics most claimants never see coming, strategies that help insurers deny claims worth hundreds of thousands, even millions, of dollars.

Insurers routinely hire third-party physicians who never examine patients but whose opinions determine whether benefits are approved or denied. Some use in-house doctors on their own payroll to make denial decisions, a conflict most claimants don't realize exists. Private

investigators surveil claimants at home for days, twisting routine activities like carrying groceries into supposed proof of work capacity.

Mental health limitation clauses cap benefits at just 24 months, even when conditions persist for years. Once exhausted, coverage ends for life. DeBofsky Law is working with Illinois state

senators to ban these medically baseless restrictions.

The biggest barrier may be <u>discretionary clauses</u>—fine print giving insurers final say on benefit decisions. Courts can only overturn denials deemed "unreasonable," heavily tilting the playing field. While Illinois and roughly half of U.S. states have banned these clauses, Maloney argues for nationwide elimination.

When insurers wrongfully deny claims, federal law bars punitive damages. Companies face no real consequences beyond paying what they already owed. Meanwhile, claimants battle their disability while racing against a 180-day appeal deadline.

Maloney warns that paying premiums doesn't guarantee benefits. Claimants must prove entitlement based on how insurers define total disability, often a deliberately vague standard working in the insurer's favor.

"Contact an attorney within 48 hours of receiving a denial letter," Maloney urges. "The clock starts immediately. We've seen all the tricks and we know what to look for so you can focus on getting better."

Matt Maloney is available for interviews to discuss additional insurer tactics, insider insights into the disability insurance industry, and legislative efforts to protect claimants.

About DeBofsky Law:

A nationally recognized firm specializing exclusively in ERISA, disability, and life insurance claims litigation, with a proven track record of precedent-setting federal appellate victories.

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