

American Arbitration Association
New York No-Fault Arbitration Tribunal

In the Matter of the Arbitration between:

Hollis Novel Comprehensive Medical, P.C.
(Applicant)

- and -

Allstate Insurance Company
(Respondent)

AAA Case No.

17-16-1043-3203

Applicant's File No.

Insurer's Claim File No.

0340917236
AJC

NAIC No.

19232

ARBITRATION AWARD

I, Keith Tola, the undersigned arbitrator, designated by the American Arbitration Association pursuant to the Rules for New York State No-Fault Arbitration, adopted pursuant to regulations promulgated by the Superintendent of Insurance, having been duly sworn, and having heard the proofs and allegations of the parties make the following **AWARD**:

Injured Person(s) hereinafter referred to as: EIP

1. Hearing(s) held on 05/31/2017, 06/05/2017
Declared closed by the arbitrator on 05/31/2017

Melissa Pirillo, Esq. from Hanford, Cooke & Associates, P.C. participated in person for the Applicant

John Palatianos, Esq. from Allstate Insurance Company participated by telephone for the Respondent

2. The amount claimed in the Arbitration Request, **\$ 286.89**, was NOT AMENDED at the oral hearing.
Stipulations WERE NOT made by the parties regarding the issues to be determined.
3. Summary of Issues in Dispute

This case stems from a New York motor vehicle accident which occurred on September 12, 2014 wherein the EIP, a 40 year old female, allegedly sustained injuries. Applicant commenced this New York No-Fault insurance arbitration, seeking compensation for an office visit on March 13, 2015 and three (3) physical therapy sessions from March 13, 2015 through March 27, 2015. Respondent denied the claim on the ground the EIP failed to appear for scheduled Independent Medical Examinations.

4. Findings, Conclusions, and Basis Therefor

This Award was issued upon consideration of the parties' arguments and upon review of the relevant evidence contained within the ADR Center files.

Respondent submitted the IME scheduling letters, dated January 22, 2015 and February 24, 2015. The IMEs were scheduled to go forward on February 12, 2015 and March 11, 2015, respectively. Respondent submitted acceptable proof of mailing, in the form of an affidavit from Jean Rony Pressoir, employee of the third-party vendor retained by respondent for the purpose of scheduling IMEs. Ms. Pressoir described mailing custom and practice and affirmed the IME scheduling letters were mailed in accordance therewith. Respondent also provided sufficient evidence to confirm the EIP failed to appear for the IMEs as scheduled, in the form of executed letters from the doctors who were to examine the EIP at the request of respondent.

Sufficient evidence having been provided to substantiate the IME "no-show" defense, respondent's denial is affirmed and this claim is denied in its entirety.

5. Optional imposition of administrative costs on Applicant.
Applicable for arbitration requests filed on and after March 1, 2002.

I do NOT impose the administrative costs of arbitration to the applicant, in the amount established for the current calendar year by the Designated Organization.

6. I find as follows with regard to the policy issues before me:

- ☐ The policy was not in force on the date of the accident
- ☐ The applicant was excluded under policy conditions or exclusions
- ☐ The applicant violated policy conditions, resulting in exclusion from coverage
- ☐ The applicant was not an "eligible injured person"
- ☐ The conditions for MVAIC eligibility were not met
- ☐ The injured person was not a "qualified person" (under the MVAIC)
- ☐ The applicant's injuries didn't arise out of the "use or operation" of a motor vehicle
- ☐ The respondent is not subject to the jurisdiction of the New York No-Fault arbitration forum

Accordingly, the claim is DENIED in its entirety

This award is in full settlement of all no-fault benefit claims submitted to this arbitrator.

State of New York
SS :
County of Nassau

I, Keith Tola, do hereby affirm upon my oath as arbitrator that I am the individual described in and who executed this instrument, which is my award.

05/31/2017
(Dated)

Keith Tola

IMPORTANT NOTICE

This award is payable within 30 calendar days of the date of transmittal of award to parties.

This award is final and binding unless modified or vacated by a master arbitrator. Insurance Department Regulation No. 68 (11 NYCRR 65-4.10) contains time limits and grounds upon which this award may be appealed to a master arbitrator. An appeal to a master arbitrator must be made within 21 days after the mailing of this award. All insurers have copies of the regulation. Applicants may obtain a copy from the Insurance Department.

ELECTRONIC SIGNATURE

Document Name: Final Award Form
Unique Modria Document ID:
0548b62264639677e3b1c70cf8a4a167

Electronically Signed

Your name: Keith Tola
Signed on: 05/31/2017