

American Arbitration Association
New York No-Fault Arbitration Tribunal

In the Matter of the Arbitration between:

Empress Ambulance
(Applicant)

- and -

National General Insurance Company f/k/a
GMAC
(Respondent)

AAA Case No. 17-25-1434-9774

Applicant's File No. SSA25-120316

Insurer's Claim File No. 185638654002

NAIC No.

ARBITRATION AWARD

I, Anne Malone, 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 09/21/2026
Declared closed by the arbitrator on 10/10/2026

Steven Super, Esq. from Super Associates P.C. participated virtually for the Applicant

No appearance from Law Offices of Eric Fendt participated by written submission for the Respondent

2. The amount claimed in the Arbitration Request, **\$959.75**, 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

The 22 year old EIP reported involvement in a motor vehicle accident on October 5, 2018; claimed related injury and received ambulance services provided by the applicant on October 5, 2018.

The applicant submitted a claim for these medical services, payment of which was denied by the respondent on the grounds that the six year statute of limitations is a bar to this claim.

In addition, the respondent contends that the EIP did not appear for two scheduled EUOs and IMEs.

The applicant contends that the claim was not timely denied.

The issues to be determined at the hearing are:

Whether the respondent established that the six year statute of limitations is a bar to this claim.

Whether the respondent established that the EIP did not appear for two scheduled EUOs and IMEs.

Whether the respondent establish that the claim was timely denied.

4. Findings, Conclusions, and Basis Therefor

This hearing was held on Zoom and the decision is based upon the documents reviewed in the Modria File as well as the arguments made by counsel and/or representative at the arbitration hearing. Only the arguments presented at the hearing are preserved in this decision; all other arguments not presented at the hearing are considered waived.

The date of the subject accident and the ambulance services at issue is October 5, 2018. The date of filing for arbitration is December 24, 2025, more than 7 years from the date of the subject accident.

Based on the proof presented the respondent has established that the six year statute of limitations is a bar to this claim.

Under these circumstances, the issues of no show EUOs and IMEs and lack of denial are moot.

Accordingly, the claim is dismissed with prejudice.

Any further issues submitted in the record are held to be moot and/or waived insofar as they were not raised at the time of this hearing. This decision is in full disposition of all claims for no-fault benefits presently before this Arbitrator.

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 CT

SS :

County of Fairfield

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

10/10/2026
(Dated)

Anne Malone

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:
0084a3c71d87525059950364b26d810f

Electronically Signed

Your name: Anne Malone
Signed on: 10/10/2026