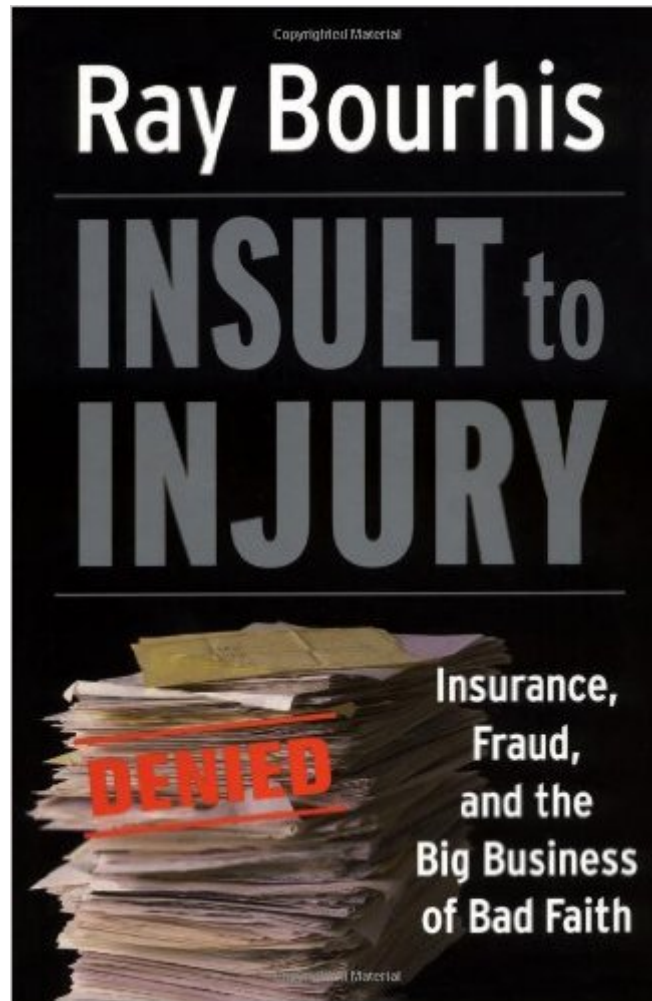


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# Insult To Injury: Insurance, Fraud, And The Big Business Of Bad Faith



## Synopsis

Joan Hangarter bought a disability policy in 1990 to protect her in case of serious illness. When she did become disabled a decade later, she ended up homeless and on welfare when the company refused to pay. With the help of her attorney, Ray Bourhis, she fought back, winning a \$7.7 million verdict against the company. In *Insult to Injury*, Bourhis walks readers through this case study in bad faith double-dealing by insurance providers. Bourhis, a national champion of policy-holder rights, uses an engaging narrative style to reveal the back-room strategic mind-set that drives these illegal practices, how low-level employees are duped into unethical conduct, and how insurers manipulate data and witnesses in the few cases that do go to trial. He also explains the key regulatory oversights that encourage such corruption, and how the American legal system actually facilitates insurer fraud. *Insult to Injury* closes with a roadmap to reform -- advice no one who holds a policy can afford to ignore.

## Book Information

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## Customer Reviews

*Insult to Injury* focuses on a disabled chiropractor driven to the brink by an insurance company (UnumProvident) that unjustly denied her claim for benefits; the "good news" is that Bourhis and his associates were eventually able to right the wrong after a long legal battle made incredibly difficult by the company's calculated mendacity and the industry's success in prior lobbying of Congress and state legislatures. When Dr. Hangarter first purchased her disability policy from Paul Revere Insurance, companies made their profits primarily on double-digit investment profits. However, the market changed and the companies found themselves under increasing pressure. In the meantime,

Dr. Hangarter was injured providing treatment to a patient, and despite significant efforts at treatment, had to give up her practice and rely on disability payments from Paul Revere. Eventually Revere was sold and then became part of UnumProvident, and Dr. Hangarter's world was turned upside down. New corporate leadership was brought in and began a deliberate policy of searching for ways to deny benefits - goals were set, customers were lied to regarding whether they could appeal and what was covered, expert testimony was slanted through incomplete information, documents destroyed, and the disabled often forced to go through lengthy, risky, and expensive litigation to collect. Possibly most frustrating of all (to me) was the fact that even when the company lost, it simply continued the same practices with other customers, and made it as difficult as possible for those victims to learn of the firm's already uncovered pattern of deceit. Eventually because of all the resulting bad publicity UnumProvident's CEO was "forced out," given a \$17 million payment, and all his cronies were left behind.

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