Carrier has no patience to wait for test results

Region 3 Hospital

The member was diagnosed with Postural Orthostatic Tachycardia Syndrome (POTS). The insurer denied long-term disability (LTD) benefits due to the allegation that the member was not totally disabled and could perform her duties as a RN. The carrier’s internal review physician was not willing to accept the opinion of the family doctor. Opining that symptoms were self-determined was unjustified.

The insurer was not willing to accept the POTS diagnosis without a tilt table test. A specialist performed this test and confirmed the diagnosis; however, the results were not released for more than a month, which took the member past the end of the qualifying period. Had she been able to submit those test results before the qualifying period ended, an appeal may not have been necessary.

The member’s condition was well documented by her physician, who described her as having to use a cane for stability, barely being able to stand even for short periods of time, and being chronically fatigued. Despite this, the insurer stated that her symptoms were self-determined and there was no medical evidence to support them.

The insurer specifically asked for a tilt table test, but was not willing to wait for the results to be released before denying benefits.

With the confirmation of POTS and the long history of medical evidence that ONA was able to provide to the insurer, the decision was reversed and benefits were reinstated retroactively. The member was suffering significant financial hardship, which will be alleviated by this win.

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