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| COURT\_NAME COURT\_VENUE |  | **Index No:  IndexOrAAA\_Number** |
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| |  |  |  | | --- | --- | --- | | **PROVIDER\_NAME**  A/A/O **INJUREDPARTY\_NAME** | | | |  | | PLAINTIFF, | |  | -AGAINST- |  | | **INSURANCECOMPANY\_NAME** | | | |  | | DEFENDANT | |  |  |  | |  | **AFFIDAVIT** |

STATE OF NEW YORK )

COUNTY OF ) ss.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly sworn, deposes and says:

I am the billing manager for PROVIDER\_NAME (hereinafter “Provider”), and I submit this affidavit in support of the attached motion. My duties as billing manager include ensuring that bills reflecting services rendered to Provider’s patients are mailed to the proper party in timely fashion, and tracking and responding to incoming payments are overdue. As billing manager, I implemented and am supervise adherence to the mailing protocol for proof of claim and responses to verification requests protocols that were in effect on the dates that the services were rendered for the above-captioned claim. I make this affidavit based upon my personal knowledge of the facts surrounding this case, personal knowledge of the business practices of Provider, including but not limited to the mailing procedures used by Provider to submit bills and other documents to insurance companies, a review of my notes and a review of Provider’s records kept in the ordinary course of business. Also, my position as a billing manager allows me determine with certainly whether or not bills and/or responses to verification requests were sent to insurance companies, the timeliness of such mailing, and whether payments and / or verification requests were received by Provider.

Provider has a well-defined and detailed process for maintaining and sending claim-related documents to insurance companies. Copies of bills, assignment of benefits forms and other documents that are created and maintained by Provider are kept in Provider’s records as a vital part of Provider’s general business practices. Provider’s ordinary and common business practice is to send proof of claim documents and assignment of benefits forms to insurers via the United States Postal Service. The bills are generated using a computer based program and printed to a networked or attached printer. The bills are placed in an envelope that has the address of the insurer on it. The address of the insurer as stated on the bills is checked against the address on the envelope to ensure that the mail will reach its destination. The bills are mailed on or about the same date that they are printed. Once mailed, Provider’s general business procedure is to retain copies of the proof of mailing in order to track the bills that were mailed out. These mailing records are made and kept in the ordinary course of business, and the records are made at or about the time the bills are mailed. It is also Provider’s normal business practice to retain any delay letters or denial of claim forms issued by insurance companies in response to Provider’s claim submissions. These denials may also serve additional proof of mailing since the often admit receipt of bills sent by Provider. In the event that Provider does not have copies of the mailing receipts or mailing logs for specific claim, Provider looks to the denial and other correspondences from the insurance companies as proof that the insurance company received the bills in a timely fashion.

After a thorough review of the files and notations pertaining to the bills attached hereto, I am certain that the mailing procedures described above were followed, and that the annexed documents responding to the verification request were mailed to INSURANCECOMPANY\_NAME pursuant to services rendered by Provider to INJUREDPARTY\_NAME as a result of injuries sustained from collision that occurred on ACCIDENT\_DATE. The documents attached to this submission as **Exhibit A** are documents created and maintained by Provider in the ordinary course of business and pertain to the verification documents that were mailed by Provider to Defendant. The bills were mailed on the following dates:

Bills for dates of service DateOfService\_START to DateOfService\_END were mailed by provider to the Defendant at the address listed on the annexed bills on 04/27/2007. The verification documents were mailed to the Defendant at the address listed on the accompanying letter on 06/20/2007. **Exhibit A**

To date, Defendant has not paid or issued valid denials for the above-stated claims. Based upon my understanding of the that Defendant facts and circumstances of this case and pursuant to communications with my attorney, I assert that Defendant does not have a defense to this action, and that the subject claims are overdue since they were neither paid or properly denied or tolled in a timely fashion. Therefore Provider is seeking judgment in its favor.

BY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sworn to before me this \_\_\_\_\_ Day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2012

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Notary Public, State of New York