

MASTER YOUR ERISA CLAIM

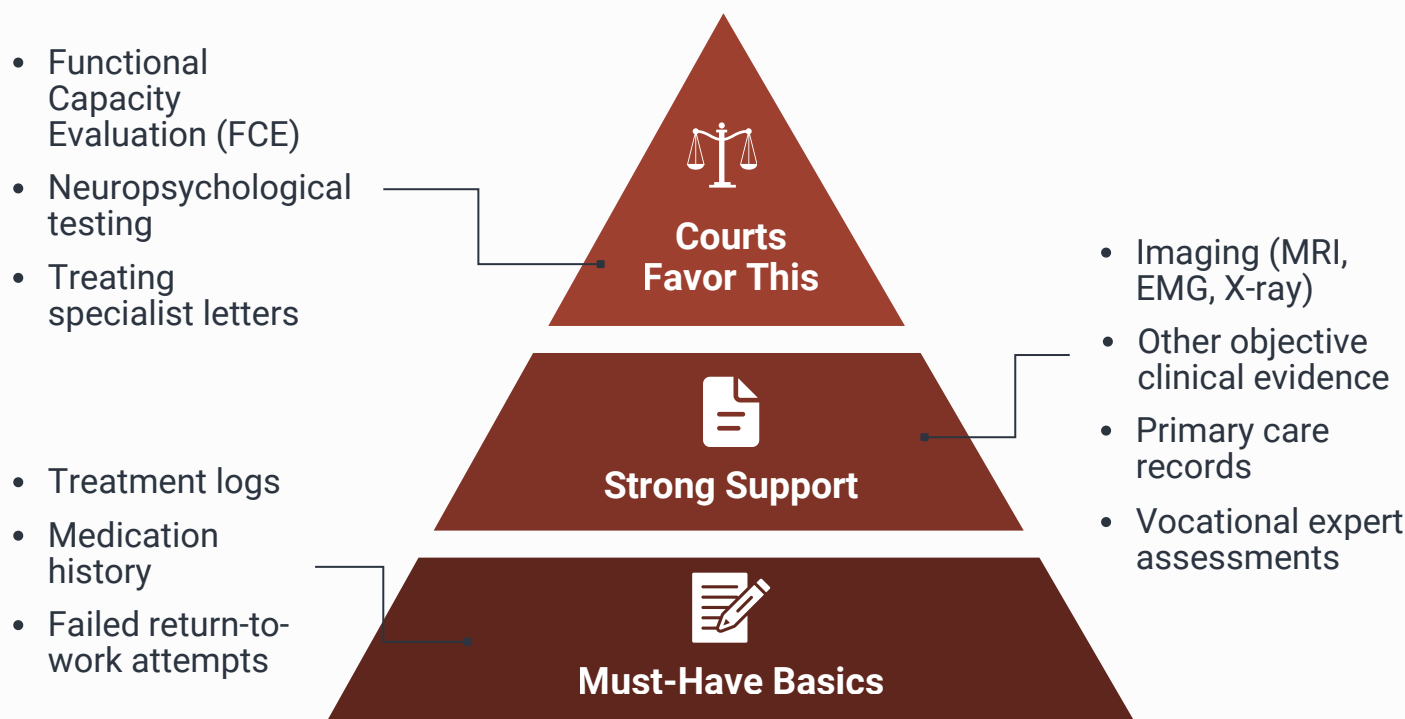
YOUR ERISA DENIAL AND APPEAL GUIDE

✔ Essential information for protecting your benefits.

Common Denial Reasons & Solutions

 <p>Not Enough Medical Proof Your records don't clearly show how limited you are.</p>	➤	 <p>What to Do If you are physically limited, submit a Functional Capacity Evaluation (FCE) or get a clear statement from your doctor. If the issue is cognitive, obtain a neuropsychological evaluation.</p>
 <p>"Not Disabled" by Their Rules They may change the definition from "your job" to "any job" (usually after 24 months).</p>	➤	 <p>What to Do Provide a detailed job description and obtain a report from a vocational expert to explain why your condition precludes working.</p>
 <p>Pre-Existing Condition Rule They may look back 3–12 months to deny claims.</p>	➤	 <p>What to Do Show that any condition diagnosed or treated during the "lookback" period is separate from the disabling impairment.</p>
 <p>"You're Not Following Doctor's Orders" Missed appointments can count as not cooperating.</p>	➤	 <p>What to Do Keep a record of all treatments and explain any gaps (like medication side effects, cost, or access issues).</p>
 <p>Surveillance or Social Media Evidence A good day on camera can be used against you.</p>	➤	 <p>What to Do Keep a daily symptom log and explain the full context of those moments.</p>




The Evidence Pyramid



ERISA Claim Timeline (for Disability Claims)



Build Your Appeal File

 Gather This	 Add New Evidence	 Make Arguments
<ul style="list-style-type: none"> ✔ Complete claim file ✔ Denial letter ✔ Summary Plan Description (SPD) ✔ Policy and rider pages ✔ Updated medical records 	<ul style="list-style-type: none"> ✔ Functional Capacity Evaluation ✔ Treating physician rebuttal ✔ Neuropsychological testing (if cognitive) ✔ Vocational report ✔ Imaging or lab tests 	<ul style="list-style-type: none"> ✔ Address each denial reason ✔ Highlight procedural errors ✔ Explain why insurer's decision was unreasonable ✔ Cite relevant medical literature

What Court Looks At (If Your Appeal Fails)



Court Only Sees your appeal file—make it count.

What You Don't Get in Court:

- ✘ Jury trial
- ✘ Depositions, if any, are limited
- ✘ The right to present new evidence
- ✘ Emotional distress or financial loss damages
- ✘ Punitive damages

What You Must Prove:

- ✔ The insurer acted "arbitrarily and capriciously"
- ✔ The decision had no reasonable basis
- ✔ The denial ignored key medical or legal evidence

Success Roadmap

Before Filing	After Denial	Building the Appeal	If Appeal Denied
<ul style="list-style-type: none"> ✔ Know your policy terms ✔ Confirm doctor support ✔ Clean up social media ✔ Track symptoms + treatment 	<ul style="list-style-type: none"> ✔ Request full claim file ✔ Calendar 180-day appeal deadline ✔ Consult ERISA attorney early 	<ul style="list-style-type: none"> ✔ Add objective tests ✔ Address denial reasons point-by-point ✔ Submit before deadline (even 1 day late = lost claim) 	<ul style="list-style-type: none"> ✔ File timely lawsuit in federal court ✔ Timeline often 12–18 months ✔ You likely cannot add evidence—only legal briefs allowed

Appeal Smarter, Not Later

ERISA appeals are won—or lost—before you ever see a judge. Download our free ERISA Appeal Guide to build the strongest file possible.