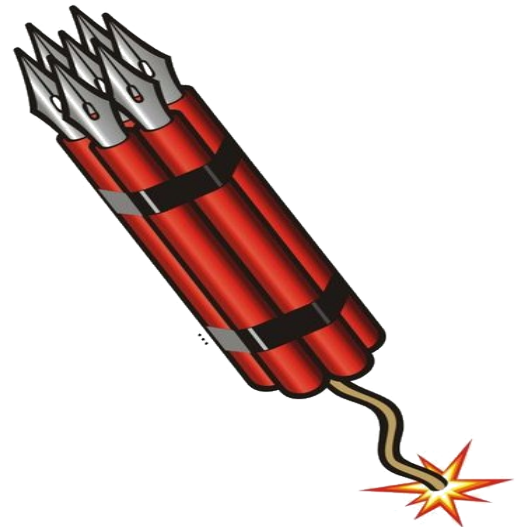




How to Survive Hospital Costs Without Insurance

by Gregory Allan

**EVALUATION
COPY**



Distributed by:
The Lawful Path
<http://www.lawfulpath.com>

Version 3.0

Notice:

This is an evaluation copy of How to Survive Hospital Costs Without Insurance, by Gregory Allan. As such, it contains only the Introduction, and the thirteen chapters, but neither of the two Appendices. The complete version contains the Appendices. The Table of Contents lists everything included in the complete version. This is so you will know what you're missing.

Obviously, this is a ploy designed to help the author sell more books. The idea is to give you a lot of valuable knowledge for free. You will have an opportunity to see for yourself that my methods are built on sound legal strategy. Then, once you've read the book, you'll realize why you *need* the material in the Appendices, and you'll be happy to buy the complete book.

As I write this, the cost for the complete version in PDF format, delivered via Internet, is \$49.95 (prices may change without notice). Most people are already facing a big hospital bill when they learn of my book and buy it. Using my procedure they save hundreds, or even thousands of dollars that very first time, and then continue to save for the rest of their lives.

Please feel free to redistribute this EVALUATION COPY, provided you do so without modification. If you are ready to buy the full version and start saving money, you'll find it at <http://www.lawfulpath.com>

Thanks for reading.

– Gregory Allan

How to Survive Hospital Costs Without Insurance, by Gregory Allan

=====

This report is the property of Gregory Allan, copyright A.D. 2000, 2005, and 2014. All rights are reserved.

The Author is not an attorney, and nothing contained herein may be construed as legal advice. Everything contained herein is the opinion of the Author, and the Author makes no warranty with regard to the use or misuse of this work. The reader acknowledges and accepts all liability resulting from the reader's own actions.

Please do not reproduce this work without the express written permission of the Author. If you find value in this work, and wish to share it with others, please encourage them to support the author by buying their own copy.

The author offers ongoing support via the Forum at <http://www.lawfulpath.com>. Only through the continued patronage of readers, is the author able to keep the website running, and maintain this ministry. Thank you for respecting the Author's copyright.

For the labourer is worthy of his hire. (Luke 10:7)

Behold, the hire of the labourers who have reaped down your fields, which is of you kept back by fraud, crieth: and the cries of them which have reaped are entered into the ears of the Lord. (James 5:4)

Blessed are they which do hunger and thirst after righteousness: for they shall be filled. (Matthew 5:6)

Thou shalt not steal. (Exodus 20:15)

*This book is dedicated
to my wife and children,
for whom it was written,
Without their love and patience,
I never could have finished it.*

Table of Contents

Introduction5
Chapter One	The Basics.....11
Chapter Two	The Reception Desk.....17
Chapter Three	Contracts Make the Law.....27
Chapter Four	Understanding Admission Forms.....35
Chapter Five	Contracts You Can Live With.....42
Chapter Six	Discounting Existing Bills.....51
Chapter Seven	Stopping the Phone Calls.....54
Chapter Eight	Records.....59
Chapter Nine	Responding to the Bill.....65
Chapter Ten	Hospital Responses.....71
Chapter Eleven	Tightening the Noose.....79
Chapter Twelve	Collection Agencies Run Like Frightened Puppies.....84
Chapter Thirteen	Summary.....93
Appendix A	Hospital Flow Chart.....98
	1. Notice of UAC.....99
	2. Notice of Void Contract.....101
	3. Durable Grant of Limited Powers of Attorney, Medical.....103
	4. Certificate of True-Copy.....104
	5. Phone Script.....105
	6. Notice of Good Faith Presumption.....106
	7. Fast Settlement.....107
	8. Conditional Draft.....110
	9. Reasonable Delay.....111
	10. Overcome Misdirection.....113
	11. Non-responsive Bill (reply).....115
	12. Counteroffer.....116
	13. Satisfaction.....118
	14. Notice of Fault.....119
	15. Notice of Default.....122
Appendix B	Collection Agent Flow Chart.....124
	1. Capacity.....125
	2. Fault Without Capacity.....127
	3. Notice of Invalid Claim.....128
	4. Notice of Duty to Perform.....130
	5. Default Without Capacity.....132
Final Note	New Letters.....133
	Opportunity.....133

default. The hospital is the only actual creditor. If the hospital is never defaulted, the matter is never closed.

Unless a CA produces the demanded evidence, NEVER acknowledge they may have a right to collect a bill, or even to speak with you. Follow the series of letters laid out in Appendix B.

At the same time, always follow through with all the Appendix A letters which are intended for the hospital. Once the hospital has been defaulted, any claim based on the admission contract ceases to exist.

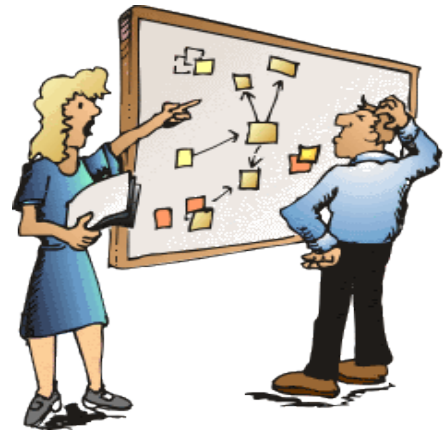
That's where your records come in handy again. If, by chance, a collection agency ever takes you to court over a defaulted bill, your records will show that the CA has no contract underlying the claim. If you did everything right, their claim should fail.

Flowchart

Each Appendix begins with a flowchart.

Once you understand the underlying principles of my methods, the flowcharts should serve as a quick and easy reference as to which letter should be sent in any given circumstance.

Please study these flowcharts. You may find it very helpful to re-read this report, and follow along the flowchart as each of the letters are referenced in the report.



Most of the questions I get from readers are along the lines of... “I’ve sent Letter A-1, should I follow up with A-2?” I don’t mind answering good questions, but anyone who would ask something like this has obviously not studied the flowchart.

All the diamond shaped boxes are decision boxes. You can tell because they have a “Yes” arrow coming out of one side, and a “No” arrow coming from the other.

The chart for Appendix A begins with the “Qualified Contract” decision box. This is asking, “Did you modify this contract, or not?” If you did, then you branch right. If you did not, then you branch left.

Let’s say you branched left. You arrive at the decision box “Attempt.” It is asking, “Did you attempt to modify the contract?” If yes, you branch right. If no (if, for example you are working with a hospital bill you incurred before reading this report), you branch left. Either way, you arrive at a square answer box.

All the square boxes are answer boxes. They contain the number of the letter you will send in that given situation. The square boxes all have an exit point, and the arrow leads to the next step you must take.

I spent a lot of time on this flowchart to make sure it is easy to follow, and won’t lead anyone down the wrong road.

Notice, for example, that the only way to get to the “Hospital Counteroffer” circle, is if the hospital has made a “responsive answer.” I made that item a circle to separate it from the other shapes. This is the only figure which is beyond your control, and relies on the actions of the hospital. It exits in only one place-- directly to a decision box. You either accept their counteroffer, or you don't.

The two hexagons at the bottom show the only two logical conclusions. Either you and the hospital make a mutually agreeable settlement, or you default them.

The flowchart for Appendix B uses identical standards for its shapes, and the chart is even simpler than the one for Appendix A. After you understand the first chart, this one should be self-explanatory.

Visiting Defaulted Hospitals

Will you ever be able to go back to a hospital, once you've defaulted them on a bill? Probably. Legally speaking, the answer should be “Yes, always.” But remember, I prefer to live in reality.

Any hospital which settles voluntarily, will be likely to give you service the next time you visit. Defaulted hospitals may show you as a non-payer in their records.

Before I talk about things you might do or say to challenge this, I must ask the obvious question-- are you sure you want to visit a hospital that is hostile to reason and good sense?



I live in a rural area which is about equal distance from two cities, both of which have hospitals. One is willing to settle. The other has been defaulted. Given the choice, I prefer to give the agreeable hospital my business.

In the event you are ever in an accident, and are taken to the hospital in critical condition, they must treat you regardless of what their records say about your payment history. Private businesses have the right to refuse service to anyone under most conditions. But hospitals often have less choice than ordinary private businesses, depending on the reason for your visit.

If you must go back to the same hospital, then attempt to go through admissions as though nothing is out of the ordinary. They may admit you without a word.

If the receptionist says you have an unpaid bill, tell her emphatically that you do not. Ask to speak to her supervisor. The receptionist has no power to make adjustments. You'll have to go over her head.

When you meet the supervisor, be nice. Remember, as you learned in Chapter 2, that the supervisor is a human being who will respond to a smile. Explain to her that you have an important medical reason for being there, and that their computer record is in error.

Ask her if she will please take a moment to pull your actual file, and go through it with you.

You may get her to agree to change the computer record. If not, then don't be afraid to keep climbing up the ladder of authority. Always be polite, but confident. Remember that you are in the right. It was the hospital who acted badly, not you.

Each time you talk with someone higher up, insist that they review your file, in your presence. Point out the modifications to the contract, and the numerous notices, and opportunities the hospital had to settle.

Ask the administrator to read your Notice of Default (Appendix A-15). When he is finished, ask him to read this definition of "bad faith" from Black's Law Dictionary, 6th Edition:

Bad faith. The opposite of "good faith," generally implying or involving actual or constructive fraud, or a design to mislead or deceive another, or a neglect or refusal to fulfill some duty or some contractual obligation, not prompted by an honest mistake as to one's rights or duties, but by some interested or sinister motive. Term "bad faith" is not simply bad judgment or negligence, but rather it implies the conscious doing of a wrong because of dishonest purpose or moral obliquity; it is different from the negative idea of negligence in that it contemplates a state of mind affirmatively operating with furtive design or ill will. An intentional tort which results from breach of duty imposed as consequence of relationship established by contract.

The fact that the hospital ignored your contract, ignored all your notices, allowed themselves to be defaulted, and now denies you service-- shows monumental bad faith. The two notices at Appendix A-14 (Notice of Fault) and A-15 (Notice of Default) emphasize bad faith, and implicitly point out the hospital's duty to respond.

It will be painfully obvious to anyone who reads those documents, that it is the hospital who is at fault, and not you.

Hold your trump card in reserve until you absolutely need it. Don't use it until if and when you're talking to a top hospital administrator. What is your trump card? Publicity.

Remind the administrator that you have a complete copy of the record, including proofs of service. Tell him you are prepared to go to the media, and that the record will speak for itself. Be prepared to really do it. Most newspapers and television stations have at least one hotshot reporter who would see your plight as an opportunity to make a name for himself. Odds are very good the administrator will see reason at this point.

Finally, if you have no other choice of hospitals, you might try suing to force them to correct their records. You are not a non-paying customer. According to the terms of commercial law, your account was properly discharged.

This won't work as well with a small doctor's office, as with a large bureaucratic hospital. A doctor in private practice may refuse patients for any reason. But hospitals, even when privately owned, have an obligation to serve a community.

I've had mostly success with visiting hospitals I've defaulted, as have most people I know.

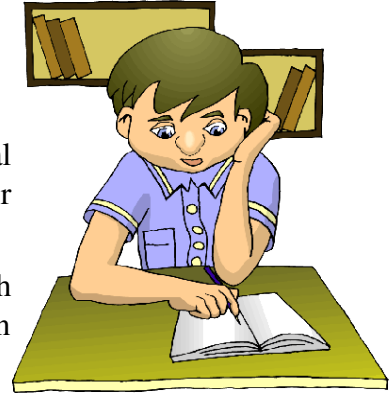


The Letters

One last word about the letters.

The letters in the two Appendices, A and B, are taken from actual letters which I have either used myself, or written over the years for family, friends, and readers.

They are intended to be useful for the types of situations in which most people will find themselves. Obviously, there is no way I can foresee every possible situation and write a letter in advance.



In most cases you should be able to use these letters as-is, changing only the names, dates, and account numbers. Other times, you may have to do a little editing on your own, to make the letter fit your specific situation.

It seems obvious, but I will say it anyway: Each letter has an identifying heading at the top, such as “A-1: Notice of UAC”. This is for your information, and should **not** be included in the letter you send to the hospital. Likewise, the name of the book and page numbers, are not a part of the letter. In places, you will find variables and conditional statements inside of brackets, like this: [Hospital Name], and this: [If you didn't get a copy, include: “I didn't get a copy of the contract.”]

Please scan the letters carefully for such statements, and be sure your final letter makes sense. Insert your hospital's name in the field, and remove the brackets. Resolve the conditional statement, and remove the brackets. In the immortal words of my late great-grandmother, “If you're going to do a thing, don't do it half-assed. Use your whole ass.”

My goal is to teach you to fish, rather than hand you fish for a day. That means you're going to have to actually read these letters and, although they are written in “lawyer-speak”, try to understand what they mean, and what they accomplish. It's not as though you're having to spend years researching this stuff like I did. Here, in this book, I've put everything together for you in one place. The degree to which you read these over and over until you understand them, will roughly match the degree of your success in using them.

Help and Support

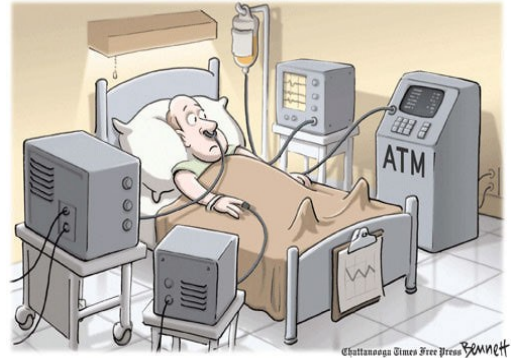
Ever since the first version of this book, back in A.D. 2000, I've made myself available to answer questions, and help readers through rough spots.

This has worked to my benefit too. I receive tons of feedback; questions and comments, situations I hadn't even thought of, and new information. My readers are my spies, my eyes in the field.

Up until a few months ago, all my support was done through private email (let's forget for the moment that Edward Snowden proved to us there is no such thing as private email).

I kept a folder, into which I dropped questions and responses which might be candidates for future updates. The problem with email was that in spite of my best efforts, I managed to lose a significant mass of archived emails, on several different occasions. Of course, this included my precious updates.

My solution, at least for now, is the addition of a private section in the Forum on lawfulpath.com. This seems to be working out better in several ways.



I make a backup of the Forum, at least once every couple months, so I'm unlikely to lose much, if anything. Also, readers get the opportunity to see the questions other readers have asked, and the answers they've received, both from me, and from other readers. I know it's hard to believe, but sometimes a reader might actually have an idea that hasn't occurred to me :-)

The Forum has proven to be a confidence booster, in that new readers log on and see where other readers have written just to say, "Hey, this worked. Thank you."

Finally, the Forum is good because I can't always be there to help, and sometimes it's good to have a way to bend the ear of other people who have "been there." We have a good bunch of members at lawfulpath.com, and whether in the private Forum or the public, it's usually not too long before someone responds.

If you haven't joined the Forum already, go to lawfulpath.com, and click Forum. You'll need to go through the registration steps. Then, if you bought the paid version, send an email to editor@lawfulpath.com, with a copy of your email receipt, and someone will see to it that you are added to the private Forum. That's all there is to it.

The End

Now you're an expert, or at least you'll look like one.

I'd like to thank you for reading this report, and helping to support my work. Your support is what enables me to continue updating the materials, and keeping them available on our website.

If you found this information valuable, please consider purchasing additional copies for your family and friends. Or let them buy their own copy. Just send them to <http://lawfulpath.com>, and they can get theirs the same way you did. Please spread the word, and help everyone you know to be healthier and richer.

-- Gregory Allan. May, A.D. 2014.

The Lawful Path



www.lawfulpath.com