

Insurance Fraud

Insurance fraud amounts to billions of dollars in false or exaggerated claims each year. These complex schemes and conspiracies often involve multiple individuals including medical doctors, chiropractors, physical therapy facilities, and transportation companies.

The attorneys at Zausmer have decades of experience investigating and prosecuting insurance fraud cases. We work with our insurance company clients' Special Investigative Units (SIUs) to tackle the overwhelming increase in fraud that affects first- and third-party claims. Our aggressive efforts pay off – we have successfully obtained dismissals of insurance claims after exposing fraud during discovery and even at trial.

We are involved in every aspect of insurance fraud investigation and litigation, including:

- Providing legal opinions on issues relating to coverage, priority, material misrepresentations, policy interpretation, and recoupment of monies paid before detecting fraud

- Conducting examinations under oath.

- Pursuing declaratory actions on issues of coverage, misrepresentation, rescission, and priority

- Defending insurance companies in first-party and third-party actions at trial and on appeal

- Presenting on fraud issues and investigations to insurance company clients, industry groups, and other organizations

Our commitment to our clients goes beyond business as usual. We are passionate about exposing the fraud, lies, and deceit that are perpetrated on insurance companies, policyholders, and the public.



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