North Carolina Department of Insurance INVESTIGATIONS DIVISION

Insurance Policy Information Theodore Mead Kimble

Insured:

Ted M. Kimble

Insurer:

Blue Cross & Blue Shield of NC

Policy # 240479614

Insurer:

The Maryland Group Policy # TFO-11479442

Policy data:

Auto insurance policy. Ted Kimble was involved in an auto accident on 4/17/94. Kimble was a passenger in the vehicle operated by James Day, and insured by Integon. Ted Kimble retained attorney Steve Bowden and filed a claim with Integon. The claim was denied because Day's coverage was canceled 4/15/94. Kimble subsequently filed a claim

with BC&BS for payment of his medical bills.

Ted Kimble also filed a claim with his auto insurance carrier, The Maryland Group. A medical pay claim was filed in the amount of \$3,144.48. That amount included payments

for medical bills, medications, and lost wages.

Insured:

James Day

Insurer:

Integon

Policy # SAN 5514215

Policy data:

see above

Kimble File

Insurer

Integon Insurance Blue Cross Blue Shield The Maryland Group

Insured

James Day Ted Kimble Ted Kimble Patricia Kimble

Information

Ted Kimble was involved in an automobile accident on 4/17/94 as a passenger in a vehicle operated by James Day and insured by Integon.. Ted Kimble, through attorney Steve Bowden, filed a claim with Integon which was denied as Day's policy was cancelled effective 4/15/94.

Kimble filed medical bills with Blue Cross Blue Shield who paid claim

Kimble, through attorney Steve Bowden, filed claims with Maryland Casualty under the medical pay portion of their auto policy.

Jed Linkle Has semolved in an accident as a passenger in a vehile aperatel by James Day - Some Covered by Integer Policy SAN 55/42/5 - which cancelled. eff: 4-15-94-Limble filed claim of fategon- denied Limble "I" w/ BCBS - Bail Limble gled " w/ Maryland Cas under Med gay of and policy win letter of attorned Here Banden



integon General Insurance Corporation Integon Indemnity Corporation New South Insurance Company Integon Specially Company P O Box 1623 Whiston-Salem, NC 27102-1623

November 16, 1994

R. Steve Bowden Attorney At Law Post Office Box 20185 Greensboro, NC 27420

Re:

Policy Number - SAN 5514215

Insured - James Day

Date of Accident - April 17, 1994 Your Client - Theodore Kimble

Dear Mr. Bowden:

I am in receipt of your letter dated November 14, 1994.

lelle Hippin

Please be advised that our policy cancelled effective April 15, 1994. Therefore, we will not be able to become involved in any claims arising out of the accident on April 17, 1994.

I'm sorry I cannot help you in this matter. If you have any questions, please call me at 1-800-642-0506, extension 2564.

Sincerely,

Michelle Flippin

Claims Representative

PCC33mcf/

R. STEVE BOWDEN & ASSOCIATES

ATTORNEYS AND COUNSELLORS AT LAW

MARKET STREET EAST PROFESSIONAL BLDG.

BOI EAST MARKET STREET

GREENSBORO, NORTH CAROLINA 27401

MAILING ADDRESS: P.O. BOX 20185 GREENSBORO, N.C. 27420

R. STEVE BOWDEN

BRUCE A LEE

TELEPHONE (910) 373-0981
WATS (800) 523-4645 • FAX (910) 370-4172

December 9, 1994

Ms. Stacie Holden Maryland Insurance Group P.O. Box 4068 Timonium, MD 21094-4068

RE: MEDICAL PAY CLAIM

Our Client:

Your Insured:
Date of Injury:

Policy Number: Our File Number: Mr. Theodore Kimble

Theodore Kimble

04/17/94

TFO-11479442

ber: 204230

Dear Ms. Holden:

Our office represents Mr. Kimble with regard to injuries sustained in an automobile accident. We are advised that Medical Coverage is provided pursuant to the above policy. We have enclosed copies of the medical bills related to this case and we would appreciate your forwarding a check to cover these expenses to our office with the check made payable to R. Steve Bowden & Associates and our client.

Thank you for your prompt attention to this request and with best wishes, we are

Very truly yours,

R. Steve Bowden

RSB/ilf

Enclosures

Kimble, CLASS: C		E: TSC	DOI: 04/17/94 TYPE/MATTER: AUTOTORT LI PARTY: 855 CASE: 204230 OPE	M: 04/16/97 N: 04/19/94
09/29/94			R. STEVE BOWDEN & ASSOCIATES	Page 1
			VALUE CODE REPORT Sorted By Date Of Service	
VALUE CODE	DATES OF SERVICE		PROVIDER OF SERVICE REFERENCE ITEM	AMOUNT
MED		04/17/94 04/17/94	Guilford Radiology Associates	\$62.80
MED		04/18/94 04/18/94	Medication	\$38.28
MED		04/18/94 04/18/94	Wesley Long Community Hospital 00977277-3	\$349.20
MED		04/20/94 05/02/94	Dye, David	\$470.00
LWG		04/27/94 05/31/94	Lost Wages Wages Paid to Temp While Out of Work	\$2,224.20

\$3,144.48

SUBTOTALS:

TOTALS

MED

LWG

\$920.28 \$2,224.20

EPRE6-7864 WESLEY LONG COMMUNIT, HOSPITAL

04/17/94 10:53 PH (QBCISE)

FINANCIAL PECCRO - ER

#IMBLE, TED MEAD M 24 278459-4027E 9772079 998 MS: 5

OP SERV:

PATIENT DATA

REGISTRATION DATA

ADDRESS: P O BOX 160

PHOME: 910-674-1148 RACE: W fast track DOB: 12/08/69 F/C: B ARRIVAL: 2

240-47-9619 RELG: NO D PREV HOSP:

APEA: 041

SAD DEST:

SQURCE:

ALLERGY: .

CARDIAC:

\ 1. 1. 1. 1.

REG DATE: 04/17/94 TIME: 10:55PM PLEASANT GARDEN NC 27813 ACC/GNSET CODE: 02 HOUR:

11.50

TYPE:

ADH DATE:

AMT REC:

CLERK: PAP COURTESY:

COL: VETERAN:

TIME: 2255

SR HEM:

REACTION:

PREV ER:

XRAY:

D/8:

SPOUSE DATA

HAME: SINGLE EMP:

ADDRESS:

PHONE:

EMERGENCY CONTACT

MAME: BLAKLEY, FATRICIA

ADDRESS:

PHONE: 910-674-1148 RL: FI PHONE: 910-294-0789

MAME: - MIMBLE, TEO MEAO

ADDRESS: P O SOX 160

PLEASANT GARDE NO 17313

GUARANTOR DATA

PHONE: 910-674-1148 PL: 01

584: 240-47-9619

GUARANTOR EMPLOYER

NAME: LYLES BUILDING MATERI

- ADDRESS: 1700 N LSE ST

CHEENSBORD NO 27403

SUBGR EHP #1: LYLES BUILDING MA

ADDRESS:

PRE-CERT#:

GRE NAME: LYLES BLDG MAT

INS NAME: BLUE CROSS(OUTFT) N

SUBSR EHP #2:

ADDRESS:

. .

GRP NAME: ID #:

INS NAME

SUBSR EMF #3:

ADDRESS: _

GRP NAME:

ID、共t

INSURED: KIMBLE, TED M
PLCY #: 240479819 RL: 01

CARRIER CODE: 031 EMP CODE: 1

IMS ADDRESS:

INSURED:

PLCY #:

CARRIER CODE:

EMP CODE:

FL:

PL:

ING ADDRESS:

INSURED:

PLCY #1

. CHERIER CODE:

THE ADDRESS:

ar record