



APPEAL PANEL DECISION FORM

I. CLAIMANT AND CLAIM INFORMATION

Claimant Name	Last/Name of Business [REDACTED]	First	Middle
Claimant ID	[REDACTED]	Claim ID	[REDACTED]
Claim Type	Business Economic Loss		
Law Firm	[REDACTED]		

II. DECISION

Select the Compensation Amount set forth in either BP's Final Proposal or the Claimant's Final Proposal as the final outcome on the claim and check the appropriate box to signify your decision.

<input type="checkbox"/> BP's Final Proposal	Compensation Amount	\$36,057
	Risk Transfer Premium	.25
	Prior Payment Offset	\$0
<input checked="" type="checkbox"/> Claimant's Final Proposal	Compensation Amount	\$48,395.33
	Risk Transfer Premium	.25
	Prior Payment Offset	\$0

III. PRIMARY BASIS FOR PANELIST DECISION

Please select the primary basis for your decision. You may also write a comment describing the basis for your decision.

- Error in documentation review.**
- Error in calculation.**
- Error in RTP multiplier.**
- Error in Prior Spill-Related Payment Amount.**
- No error.**

Comment (optional):

See reasons uploaded

CLAIMANT: [REDACTED]

Claim ID: [REDACTED]

The claimant, a [REDACTED] Florida Chiropractic Clinic filed a BEL claim and was awarded \$48,395.33 (pre 0.25 RTP). BP appeals.

In this case, the Settlement Program accountants determined that claimant's benchmark financials did not trigger any of the 7 tests under Policy 495. Thus, claimant's financials were deemed "sufficiently matched" and the Settlement Program calculated the award without having to apply any of the Policy 495 methodologies. BP asserts that some of claimant's financials outside of the benchmark period triggered one of the 7 Policy 495 tests.

After a review of the record in this matter, the determination by the Settlement Program accountants that claimant's financials were sufficiently matched is supportable. Having determined that, BP's second issue that the claim should have been determined under the Professional Services Methodology is moot.