

KIMBERLY P. GITLIN

ASSOCIATE



AREAS OF PRACTICE

Fraud/Special Investigation
Personal Injury Protection (PIP)
Litigation

CONTACT INFO

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175 Pinelawn Road
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Melville, NY 11747

ADMISSIONS

New York
2017

EDUCATION

Touro University Jacob D.
Fuchsberg Law Center
(J.D., 2016)

State University of New
York at Oswego (B.A.,
2011)

ASSOCIATIONS & MEMBERSHIPS

New York State Bar Association

Nassau County Women's Bar Association

YEAR JOINED

2024

OVERVIEW

Kim is an associate in our Casualty Department where she handles matters involving personal injury protection, SIU, bodily injury, and general liability on behalf of a several insurance carriers. Her case load involves both medical provider fraud and fraudulent claims on the part of the clients' insureds such as intentional/staged losses. She conducts Examinations Under Oath, depositions, mediations, and appears for bench trials and arbitration hearings.

Prior to joining the firm she gained valuable experience handling no-fault arbitration hearings, arguing motions on behalf of insurance carriers.

Kim attended the State University of New York at Oswego where she obtained her Bachelor of Arts in Public Justice and Public Relations. She received her *juris doctor* from Touro College Jacob D. Fuchsberg Law Center. During law school, she was an active member of the Alexander Hamilton, American Inns of Court.

Kim is admitted to practice in the state of New York.

RESULTS

Arbitration Win Secured in a Case Involving Allegedly Unpaid Medical Bills

Personal Injury Protection (PIP) Litigation August 22, 2025

We secured an arbitration win, slashing a \$83,000 claim to \$625. The applicant, a major medical provider, filed an arbitration matter in the total amount of \$83,625, alleging our client owed it for the claimant's unpaid medical bills following a major motor vehicle accident. The claimant had been involved in the motor vehicle accident and sought payment for a series of medical treatments rendered post-accident. Counsel for the medical provider argued that the medical billing was never properly paid, therefore, payment of the claims was overdue.