

Five Mistakes to Avoid with Insurance Companies

The most important thing to remember when working with an insurance company is that the insurance company makes more money by giving you less money. As personal injury attorneys in Oregon, we see many mistakes people make because they forget this dynamic. Below are five mistakes to avoid when dealing with insurance companies.

It is important to note that these tips are meant to increase the likelihood of a fair offer from an insurance company. It does not guarantee a fair offer will be made. There are many variables that affect the amount of an offer. Keep in mind that the insurance claims adjuster has a job to do and wants to do that job well – it is how they pay their bills and provide for their family. As a result, they want to settle your claim for less money than they believe it is worth. Settling a claim for less means the claims adjuster will be perceived as doing a good job. Always negotiate. If you have questions, call an Oregon personal injury attorney.

1. DON'T SIGN INSURANCE COMPANY MEDICAL RELEASES

If you have a car accident claim, the at-fault driver's insurance company will send you medical releases to sign. They will say it's just to allow them to "verify your injuries." DO NOT SIGN THE RELEASE. The other driver's insurance company is not your friend. Their goal is to convince you to settle for less than your claim is legitimately worth. One trick they use is to leverage the confidential medical information they get by rummaging around in your personal medical history. Your medical records may contain very personal, private details about your life, details you would not want revealed publicly. This information has nothing to do with your injury claim. You or your personal injury attorney should personally review all of your medical records and only send the particular records necessary to prove your claim to the at-fault driver's insurance company.

EXCEPTION: When your own insurance company wants you to sign a release for medical records to process and pay your medical bills from the personal injury protection benefits of your policy, you will need to sign a medical release before they will pay the bills. You can limit the release to records and bills starting on or after the date of the accident. You or your personal injury attorney should monitor your care and make sure your insurance company pays



the medical bills. It's important to note that your insurance company is not allowed to send your personal medical records to the insurance company for the at-fault driver.

At the end of your case, the at-fault driver's policy will repay your insurance company. This will not affect your insurance rates.

2. DON'T SETTLE YOUR INJURY CLAIM QUICKLY

Insurance companies want to settle personal injury claims quickly and cheaply. They want to settle quickly because many medical problems from accident injuries can persist for months, years, or a lifetime. Moreover, the causes of some nagging symptoms are not discovered until conservative treatments have failed and further diagnostic testing is done.

Once you settle your personal injury claim, the at-fault driver's insurance company is off the hook. Our personal injury attorneys have seen many clients with injured backs, necks, shoulders, knees, ankles, and other body parts that never fully recover to their pre-accident health. Some clients have needed surgery months and years after the incident that caused the initial injury. If they had settled quickly, before their medical condition was clear, they would not have been fully compensated.

Oregon law has a basic two-year statute of limitations on most injury claims and a three-year limitation on death claims. Within these time limitations, there is ample time to know what your medical future looks like before settling your claim. Do not gamble on your future and settle your case early.

<u>Caution</u>: There are many exceptions to the statute of limitations in personal injury cases. Some claims require you to file a formal notice of claims within 180 days of the accident. Other exceptions allow claims to stay open longer than two years. We recommend speaking with an experienced Oregon personal injury attorney as soon as possible to learn what time deadlines apply to your specific case.



3. DON'T BELIEVE THE INSURANCE CLAIM ADJUSTER'S VALUE OF YOUR CASE.

Insurance companies exist to make a profit. To keep profits high, they need to keep claim payments low. Insurance claims adjusters are trained to help the company's bottom line by paying you as little as possible for your claim.

Insurance companies are required by law to set aside money called "reserves" that estimates the value of your claim. The claim adjuster won't tell you this "secret number," because they get gold stars on their performance reviews for paying you less than they honestly believe your claim is worth. Sometimes adjusters get bonuses and/or promotions for consistently settling claims for less than the "reserves" and saving the company money.

The fair value of an insurance claim is part science and part professional judgment. Insurance companies know that if the claim is not settled, a lawsuit might result and a jury of 12 citizens will decide the ultimate value of the claim. Insurance companies look at the data of what juries have done in injury claims similar to yours. No two claims are exactly alike, but many claims are similar. A skilled personal injury lawyer can make a reasonably accurate prediction of how a jury might react to a particular claim. The lawyer will research jury verdicts in similar cases and rely upon years of experience of actually trying cases before juries. After putting all of the available data together, along with the lawyers professional judgment, you can be given a reasonable range of settlement values for your claim. Unfortunately, no one can accurately predict the future with 100% certainty.

You or your personal injury attorney should periodically provide information about your claim to the insurance adjuster in an effort to get the adjuster to raise the "reserves" assigned to your claim. This will make it easier to settle your claim at the appropriate time. Insurance adjusters rarely offer their "top dollar" at the start of the negotiations. Often many rounds of negotiation, discussion, exchanges of information, threats of litigation from the attorney, and the passage of time are necessary to get the insurance adjuster to put the top dollar of the adjuster's authority on the table. Even then, the offer may not be fair in light of the severity of the claim. It is at this point that you and your personal injury attorney will weigh the pros and



cons of filing a lawsuit or settling the claim for the last offer. In the end, the client always makes the final decision.

4. DON'T MAKE UNSUPPORTED DEMANDS

It is not uncommon for clients to tell us they got nowhere when they tried to settle their claim with the insurance company. One of the biggest mistakes we see clients and other personal injury attorneys make is they don't support their settlement demand offers with proper documentation.

To understand this concept better, it important to step into the shoes of an insurance claims adjuster. An insurance claims adjuster knows that they have a boss looking over their shoulder. The claims adjuster knows they need to justify every penny they hand out or they will get in trouble with their boss. This means that simply telling the adjuster you have lost wages or broke your arm will not help your case. These harms need to be documented and then provided to the claims adjuster.

Documenting claims can be tedious. Our personal injury attorneys spend countless hours working to document claims for insurance adjusters and eventually juries. In fact, whether you settle your claim or go to trial, you will need to properly document your claim.

Documenting your claim can be as simple as submitting police reports, medical records, and medical bills. For wage loss claims, it means getting a statement from your employer substantiating the time and total wages lost. Documenting a claim can become more difficult in cases with disputed liability, injury causation issues, or permanent physical conditions. In many of these cases, the initial records do not sufficiently document the loss or harm. Our attorneys sometimes hire private investigators, meet with doctors, and request narrative reports from doctors to document a file.

Failing to properly document your claim will result in lower settlement offers from the insurance claims adjuster and eventually a lower verdict at trial. If you want move your claim forward with an insurance claims adjuster, you need to provide them the information they need to get you where you want to go.



5. DON'T BE DISHONEST OR RUDE TO THE INSURANCE CLAIMS ADJUSTER

Insurance claims adjusters have a lot of power when it comes to pre-trial settlements. The insurance claims adjuster intakes the claim, conducts investigations, processes and analyzes medical records and bills, inputs information into computer programs that make settlement recommendations, and sometimes makes recommendations to his or her boss about whether or not to settle a claim. The value of your claim pre-trial is determined on how well the adjuster processes and documents your claim. If they poorly process and document your claim, it will not be evaluated at its full value.

It is important to remember that insurance claims adjusters are human. Just like everyone else, if you lie or are rude to the claims adjuster, they will be less likely to work with you.

From time to time we take over a personal injury case where a client has been rude and disrespectful to the insurance claims adjuster. The frustration that caused the client to act this way is real and often understandable. In many cases, however, the adjuster remembers how they were treated. In these instances, the claims adjuster loses the incentive to work on the claim or help the client get to the settlement number they want. This dynamic often forces people to hire an attorney so they can get a fair value from the insurance company.

We have also seen clients that haven't been completely honest with the claims adjuster. The most common subjects people lie about are the facts of the incident, prior incidents, and prior medical conditions. Insurance companies conduct thorough investigations into the facts of all cases and have records of prior accidents, injuries, and prior medical conditions. When clients lie, the insurance company often knows. Dishonesty creates the same negative relationship dynamic as being rude and disrespectful.

Its important to remember that the claims adjuster is just like you. They have a job to do, children to take care of, and a mortgage to pay. They like working with transparent, polite people and dislike rude and disrespectful ones. A good relationship with adjuster can help get you where you want to go. A claims adjuster that carefully and properly processes your file



increases the odds you will get a fair offer. Some claims adjusters will even work with you and tell you what they need so they can increase your settlement offer.

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