



~ Our Mission ~

"A professional organization dedicated to the ongoing education of the claims community. Providing an arena for member interaction and the sharing of resources."

Next Regular Meeting: September 21, 2018

Renaissance Hotel, Seattle

— See page 2 for details

We failed to mention in last months newsletter
Temporary Accommodations as our
 Golf Tournament **Breakfast Sponsor**.
 We apologize for that oversight!



Case Study

— Page 11



**Personal Interest
Health Wise**

— Page 17

Psst!
 Dues are now DUE!



**ATTENTION CLAIMS
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**Dues for 2018-19, September
 thru August, are NOW DUE!**
 Please renew your annual dues

to avoid any interruption in communications from PSAA.

Application can be found on page 24 or on our website at www.pugetsoundadjusters.org

**PSAA Membership
Application for 2018-19**

— Page 24

~ Benefits of PSAA Membership ~
Insurance Claims Personnel Join or Renew Today!

We can't say enough about the advantages of membership in the Puget Sound Adjusters Association. The benefits are numerous! For example:

- **Newsletter** — Receive an electronic copy of the PSAA newsletter every month. Each issue includes educational articles and other information of interest to adjusters. It is also a resource guide to goods and services provided by our industry vendors — who also support our Association.
- **Monthly Meetings** — Claims Personnel who have paid dues can attend monthly meetings and have lunch at no charge with free parking; hear local presenters on topics that are pertinent to today's adjuster — always educational and sometimes entertaining!
- **Spring Symposium & Vendor Fair** — This annual educational event held in the spring is also free to dues paying Claims Personnel. A full day of workshops on all the hot topics and an opportunity to meet with industry vendors face-to-face outside the office.
- **Bowling & Golf** — Not much educational about bowling or golf, but what adjuster today doesn't need a little relaxation and fun; also free to dues paying Claims Personnel.
- **Website** — Pay dues online with a credit card. Check the calendar so you know what's happening and when. Find contact information for our supporting Vendors, and all PSAA board and committee members. Find a new job from the employment listings or post a job opening.
 - **And so much more.....**

Membership in PSAA is open to all Claims Personnel, and should be a priority on your list of things to do!

Print the application from our website and **JOIN or RENEW TODAY!** www.pugetsoundadjusters.org



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PSAA Next Luncheon Mtg

Next Meeting: **September 21, 2018**

Time: 11:30am to 1:30pm

Location: **Renaissance Seattle Hotel**

515 Madison Street
Seattle, WA
206/583-0300 www.marriott.com/Seattle

Cost: Claims Personnel—Active Member Status
No charge for lunch or parking

Vendors & Non-Members
\$35 if paid in advance (\$50 @ door)
Parking \$12

Presentations: TBD

Sponsors: TBD



To RSVP or to stay in touch with PSAA use our social media tools listed below!

- www.pugetsoundadjusters.org/calendar
- www.facebook.com/PSAAPugetSoundAdjusters
- www.linkedin.com www.twitter.com

Additional Meeting Information

Please keep in mind that we'd like to start and end promptly during our monthly meetings. Here is the timeline for each meeting:

- 11:30 a.m. Registration
- 11:45 a.m. Buffet
- 12:00 p.m. Meeting Called to Order
- 1:30 p.m. End of Meeting

Please arrive on time and have your cash or check (payable to PSAA) ready, or provide your online payment receipt. We appreciate your cooperation and assistance.



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President's Choice Charity for 2017-18

To submit an article to this publication contact Barb Tyler at npassist@msn.com

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Half of Parents Use Cell Phones While Driving with Kids in Car

Reprinted from www.insurancejournal.com

About half of parents talk on a cell phone while driving when their children between the ages of 4 and 10 are in the car, while one in three read text messages and one in seven use social media.

A new study from a team of researchers at Children's Hospital of Philadelphia (CHOP) and the University of Pennsylvania School of Nursing also found a correlation between cell phone use while children were in the car and other risky driving behaviors, such as not wearing a seat belt and driving under the influence of alcohol. The findings were published in the *Journal of Pediatrics*.

Distracted driving is responsible for about one in four motor vehicle crashes. Previous research suggests that causes of distracted driving by parents and caregivers include talking on hand-held or hands-free cell phones or using phones to text, email, or access the Internet.

Researchers wanted to identify specific factors associated with cell phone-related distracted driving in parents and caregivers of children between the ages of 4 and 10.

"Technology has become increasingly intertwined with our daily lives," said lead author Catherine McDonald, PhD, RN, FAAN, a senior fellow with CHOP's Center for Injury Research and Prevention and an Assistant Professor of Nursing in the Family and Community Health Department at Penn Nursing. "The results from this research reinforce that risky driving behaviors rarely occur in isolation, and lay the groundwork for interventions and education specifically aimed at parents who drive with young children in their cars."

The study was conducted using an online sample of 760 adults from 47 U.S. states. The respondents had to be at least 18 years old, a parent or routine caregiver of a child between the ages of 4 and 10, and had driven their oldest child between those ages at least six times in the preceding three months.

In the preceding three months, 52.2 percent of parents had talked on a hands-free phone while driv-

ing with a young child in the car, while 47 percent had done so with a hand-held phone. The study also found that 33.7 percent of parents read text messages while 26.7 percent sent text messages while driving with children. Social media also contributed to distracted driving, with 13.7 percent of respondents reporting using social media while driving with children.

The study also looked at child restraint system use for children in the same age group. The study found that 14.5 percent of parents did not consistently use their typical restraints system when driving with their children. Drivers who did not consistently use theirs were more likely to engage in cell phone use while driving.

Finally, the study looked at parent and caregiver risky behavior associated with driving, including not wearing a seat belt as a driver and driving under the influence of alcohol, whether or not their children were in the car. The researchers saw a direct correlation between a history of driving under the influence and increased likelihood of all types of cell phone use while driving with children in the car. All cell phone-related distracted driving behaviors other than talking on a hands-free phone increased if a person did not always wear their seat belt while driving with children.

"When clinicians are discussing child passenger safety with families, they can use the opportunity to ask and educate about parental driving behaviors such as seat belt use and cell phone use while driving," McDonald said. "This type of education is especially pivotal today, as in-vehicle technology is rapidly changing and there is increased – and



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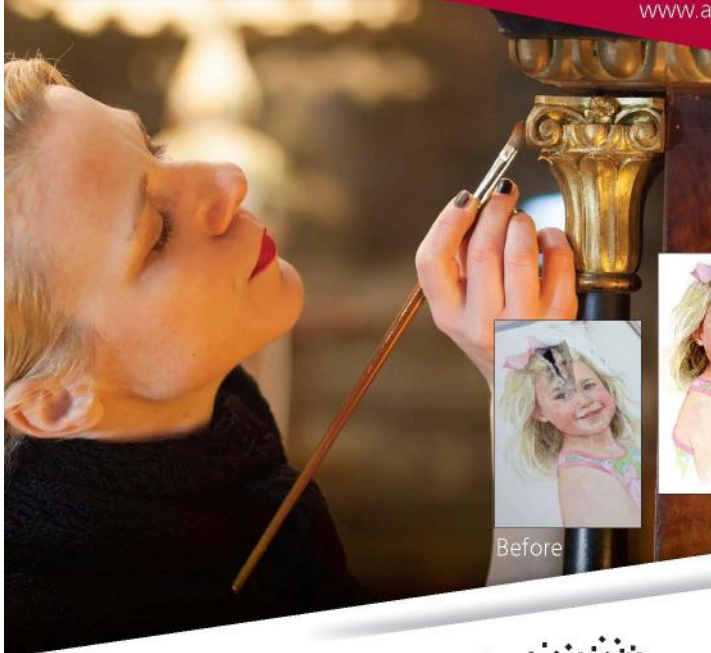


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seemingly constant – reliability on cell phones. However, it is also important to note that even parents who did not engage in risky behaviors, such as not wearing a seat belt as a driver or driving under the influence of alcohol, still used their cell phones while driving.”

McDonald said that future studies are needed to understand if unsafe distracted driving behaviors by parents influences their children as they become young drivers in the future.

The National Science Foundation (NSF) sponsored the CHOP study. ❖

Source: McDonald et al, “Factors Associated with Cell Phone Use While Driving in a Survey of Parents and Caregivers of Children ages 4-10 Years,” *Journal of Pediatrics*, online July 12, 2018.

Think a Lightning Strike Won't Happen to You? It's more likely than winning lottery

By Alexis Stevens
Reprinted from www.ajc.com



He was fishing with his two young sons when Egan Blain Stanley was struck by lightning. Four days later, the 37-year-old died at Grady Memorial Hospital.

The Dalton resident became the 12th person killed by lightning this year in the U.S. when he died Sunday.

On Tuesday, a Florida man was killed by lightning, and on Thursday, an Alabama woman died two weeks after being struck. The 14 deaths are just two shy of the 2017 total of 16 deaths, and hundreds of others were injured last year. And Georgia meteorologists warn there are still plenty of summer storms on the way.

“July is Georgia’s wettest month of the year,” Glenn Burns, Channel 2 Action News chief meteorologist, said. “We see summer storms almost every day. We track them and also show how much lightning is occurring.”

Think you have a better chance of winning the lottery than getting struck by lightning? Not so, ac-



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According to statistics from the National Weather Service and the Powerball lottery. There is a 1 in 14,600 chance of being struck by lightning during a lifetime, according to the NWS. Rather win the Powerball grand prize? The chance of that is 1 in 292,201,338.

Lightning is one of the top storm-related causes of death, coming in behind tornadoes and hurricanes, the NWS says. Lightning strikes were responsible for 40 deaths in 2016, but have declined over a 10-year period, data showed. The average number of deaths a year since 2008 is 28, and June, July and August are when lightning is most likely to kill someone.

"The type of 'pop up' convective storms we get this time of year can take more people off guard," Brad Nitz, Channel 2 meteorologist, said. "As the storms develop, the first lightning they produce may come as a surprise because there hadn't been any lightning up to that point."

In many cases, people struck by lightning are working outside, mowing the lawn or other house repairs. Other times, such as with Stanley, the hot temperatures bring people outside for recreation. Some people have been struck while trying to get inside during a storm.

During the summer of 2010, two metro Atlanta teenagers died within two weeks after being struck by lightning in separate incidents.

In July 2010, cousins Chaquille Hunter and Theresa Seabrum were walking home from a friend's Cobb County apartment when lightning struck a nearby tree and the teenagers. Chaquille, 16, died from her injuries and Theresa, 14, was critically injured. Two weeks earlier, a Henry County 14-year-old died after being struck while standing under a tree in his neighborhood.

"Lightning can strike five miles, or even more sometimes, away from a thunderstorm," Nitz said. "As a rule of thumb, if you can hear thunder you are close enough to the storm to be struck by lightning — even if it's not raining where you are."

Sophisticated forecasting and technology make it easier to be prepared for storms, Burns said. Even though the steamy summer days bring more people outside, it's important to monitor the forecast.

"There is ample warning to take precautions and our weather app alerts people when lightning is in the area," he said.



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1. If you hear thunder, lightning is close enough to strike you.
2. When you hear thunder, immediately move to safe shelter: a substantial building with electricity or plumbing or an enclosed, metal-topped vehicle with windows up.
3. Stay in safe shelter at least 30 minutes after you hear the last sound of thunder.
4. If you're inside, stay off electrical equipment that puts you in direct contact with electricity and stay away from windows and doors. Avoid sinks, baths and faucets.
5. If you're caught outside with no safe shelter, get off elevated areas and never shelter under a tree. Immediately get out and away from ponds, lakes and other bodies of water. Stay away from objects that conduct electricity, such as barbed wire or power lines. ❖

Source: National Weather Service

Detecting and Preventing Fraudulent Business Interruption Claims

By Tiffany Couch

Reprinted from www.propertycasualty360.com

All forms of insurance — from health to workers' compensation to homeowners — provide security and protection to individuals and companies in case of injury, illness, theft or damage. Most businesses carry several types of insurance to protect their assets and their people. One of the most common types of coverage is business interruption insurance, which provides compensation to an insured if its operations are interrupted due to damage or theft. Fire, floods, earthquakes and other unanticipated natural disasters can quickly destroy thriving companies and having business interruption insurance can help cover costs during a period of rebuilding.

While most business interruption claims are paid on legitimate loss, unfortunately, an estimated \$80 billion in fraudulent insurance claims (across all lines) are made every year in the U.S. And fraudulent business interruption claims are no exception. Agents, brokers, insurers and claims professionals should scrutinize every business interruption claim cautiously. Even the most experienced professional may not recognize potentially fraudulent information if the claim appears straightforward and seemingly complete. For this reason, it's essential to examine every claim thoroughly to make sure it's legitimate.

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Insureds who intentionally manipulate their company's financials to create a false picture of the business's profitability are committing fraud.

Three common business interruption claim fraud schemes

Overstating sales: Inflating the amount of lost revenue means increased insurance payouts.

For example, if a claimant's sales were strong for five years before the loss as per the tax returns or financial statements, but the financial records show a decrease in revenue in the months prior to the date of the claim for reasons other than the loss event (e.g. the loss of a major customer due to competition), that detailed analysis can significantly reduce claimed losses.

Understating expenses: Minimizing costs is a common way to manipulate financial documents to make a business appear more profitable. Understating expenses can come in the form of delaying their entry in the books and records or not recording them at all. Another example of this scheme is companies that intentionally capitalize expenses (i.e. record them as an asset on the balance sheet) instead of recording them on the income statement.

Inflating extra costs: Embellishing a claim with additional expenses — either by claiming the lost or damaged items were more expensive than they were or attaching completely unrelated costs to the claim (such as regular ongoing expenditures) — is fraud.

Keep an eye out for red flags

It may seem like filing a bogus insurance claim is a victimless crime but it hurts everyone —driving up the cost to the insurance companies who in turn must raise policyholder rates.

Fortunately, knowing what to look for can help detect and deter a fraudulent business interruption claim before it is paid out. Here are five "red flags" that can help agents, insurers, brokers and claims examiners identify fraud.

1. The claim was filed shortly after the policy was activated, or after the coverage amount was raised.
2. The business has a track record of reporting losses to the IRS, yet the claimant is seeking significant lost profits.
3. The insured is overly assertive in pushing for a quick settlement.

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- The insured's financial documents include questionable, irregular information, such as out-of-sequence checks, altered or photocopied documents, or receipts, invoices and shipping labels that do not show a paid stamp.
- The policyholder refuses to provide concrete financial source documents to substantiate the claim, such as a copy of their accounting software, bank statements, vendor agreements, and invoices.

How can a forensic accountant help investigate a business interruption claim?

While the presence of one or more red flags does not singularly constitute fraud, it may indicate that the claim requires further investigation. If so, it's never too early to bring a forensic accountant into the claims process. Their technical knowledge of accounting and expertise in fraud investigation can help expedite resolution of a business interruption claim. Put simply: if the claim looks suspicious, don't hesitate to step up the investigation to ensure the loss is legitimate. ❖

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Case Study

Court Finds Issues of Material Fact on Reasonableness of Insurer's Handling of UIM Claim



From the desk of Josh Hayward:



Numerous statutes in Washington require insurers to act in good faith when dealing with the insured's UIM and PIP claims. Among other requirements, acting in good faith requires an insurer to act

"reasonably." In the event that the insurer's expert determines that the insured's medical condition was not caused by the accident but the insured's expert determined that it was, does the insurer act in bad faith by relying solely on the opinion of its own expert?

Claims Pointer: In this case arising out of a car accident, the insured sought UIM benefits claiming that the car accident caused her dermatomyositis condition. The insured's medical expert determined that the dermatomyositis condition was caused by the car accident, while the insurer's medical expert determine that it was "more likely than not" that the car accident did not cause the insured's condition. The Washington Court of Appeals determined that there was an issue of material fact as to whether it was reasonable for the insurer to rely solely on the opinion of its own medical expert when there was other credible evidence related to causation.

Leahy v. State Farm, 76272-9-1, Washington Court of Appeals Div. I (May 21, 2018)

Shannon Leahy ("Leahy") suffered soft tissue injuries in a car accident. Leahy first sought PIP benefits and later sought UIM benefits from her insurer, State Farm Mutual Automobile Insurance Company ("State Farm"). After the accident, Leahy was also diagnosed with dermatomyositis ("DM"). Leahy alleged that the condition was triggered or caused by the accident. State Farm's adjuster requested Leahy's medical treatment records for three years prior to the accident, none of which mentioned Leahy's dermatomyositis condition. Leahy provided State Farm with a report from her rheumatologist, which showed that the rheumatologist examined Leahy and concluded that her DM was caused by the accident. State Farm thus retained a rheumatologist, who opined that there was no medical support for a causal relationship between the accident and DM,



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and concluded that "it was more probable than not" that the accident did not cause Leahy's DM. In light of the expert's opinion, State Farm presented Leahy with an offer to waive \$11,116 of its PIP subrogation. (Leahy had already settled for the tortfeasor's policy limits.)

Leahy rejected the offer and sued State Farm for her UIM policy limits. Leahy was awarded \$884,017.31 in damages. State Farm paid Leahy the \$100,000 policy limit. Leahy then amended her complaint to allege violations of bad faith, the Consumer Protection Act ("CPA") and Insurance Fair Conduct Act ("IFCA"). The court however granted summary judgment to State Farm and dismissed Leahy's claims. Leahy appealed.

On appeal, Leahy argued that the trial court should not have granted State Farm's summary judgment motion because there was a genuine question of material fact as to the reasonableness of State Farm's handling of her claim. The Washington Court of Appeals explained that generally, an insurer acts in bad faith if the "breach of the insurance contract was unreasonable, frivolous, or unfounded." (emphasis added). Denying coverage without reasonable justification constitutes bad faith. However, a disparity between an offer and the ultimate award alone does not establish bad faith or a CPA violation. The court noted that in the context of summary judgment, an insurer is entitled to summary judgment only when "reasonable minds could not differ that its denial of coverage was based upon reasonable grounds."

After looking to similar Washington case law, the Washington Court of Appeals explained that the question in this case was "whether there is a genuine issue of material fact whether [State Farm] acted reasonably in relying solely on its expert on causation, while ignoring Leahy's expert on causation." Both rheumatologists were board certified and both were on faculty at the University of Washington. Accordingly, both experts appeared to be qualified to render opinions on the causation of the DM. Nevertheless, there was a clear conflict between the two experts on the causation of the DM, as Leahy's expert found a causal link between the car accident and DM, while State Farm's expert found no support for the causal link. The court held that in light of the qualifications of the experts and direct conflict, whether State Farm acted reasonably was a factual question for the jury, and not one that State Farm could successfully answer on summary judgment.

The court noted that State Farm made a series of settlement offers. According to the court, the settle-


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ment offer amounts also raised a question as to “whether they were reasonable under the circumstances.” Once again, the court determined that these were factual questions that could not be decided on summary judgment. Accordingly, the Washington Court of Appeals reversed the trial court’s decision to grant summary judgment, and remanded the case for further proceedings.

Note: Because the Washington Court of Appeals reviewed the trial court’s decision to grant summary judgment, the Washington Court of Appeals did not determine whether State Farm’s handling of the UIM claim and decision to rely solely on its own expert’s opinion was or was not reasonable. Instead, the Washington Court of Appeals held that this was a question of fact, and as such, a question that the jury should decide. Accordingly, it is possible that State Farm will prevail on trial if the jury finds that State Farm acted reasonably. ❖

— View full opinion at: <https://www.courts.wa.gov/opinions/pdf/762729.pdf>

Legislative Update

WA Legislature Expands Mandatory Civil Arbitration to \$100,000 Claims



From the Desk of Kyle Riley: Currently, in Washington, civil cases with claims not exceeding \$50,000 are subject to mandatory arbitration. However, Washington’s legislature recently passed a bill that increases the claim limit from \$50,000 to \$100,000. The bill was then signed by Washington’s Governor on March 13, 2018. Read on for a discussion on the new law that is set to govern civil cases filed in Washington on or after September 1, 2018.

Claims Pointer: Effective September 1, 2018, the new legislation on mandatory arbitration will have a sizable impact on Washington’s civil litigation process. Adjusters should be aware of the new law as it will result in a larger scope of cases being subject to mandatory arbitration.

HB 1128 contains numerous amendments and changes to existing laws. Two significant changes are that (1) claims up to \$100,000 will be subject to Washington’s mandatory arbitration program, and (2) a request for a trial de novo appealing the arbitration award must be signed by the client. It is important to keep in mind that HB 1128 will only affect cases that are filed on or after September 1, 2018.

One of the more obvious consequences of the new arbitration rule is that the \$100,000 claim limit will



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increase the number of cases subject to mandatory arbitration. There are several reasons why this change will be disadvantageous to defendant. First, arbitration awards, especially in King County and surrounding counties tend to be more generous than jury awards. One of the reasons that arbitration awards tend to vary from jury awards is that the evidentiary rules in arbitrations are much relaxed. Second, cases in arbitration move on an accelerated timeline with limited discovery and relaxed evidentiary rules. Parties can serve limited discovery requests and take depositions. Parties must file a motion with the arbitrator to issue interrogatories or to compel a medical examination. As a result, there is less time to prepare a defense and often the evidence presented at arbitration can catch opposing parties by surprise. Adjusters, defendants, and their counsel will need to work quickly and effectively in preparing their defense. Third, there will be more claims with potential excess exposure within the arbitration system. Policy limits in Washington can be as low as \$25,000 per person. Thus, there may be many cases subject to the arbitration system under HB 1128 that expose the insured to a significant excess exposure.

While arbitrations can be appealed, if the ultimate jury verdict is less favorable than the arbitration award, then the appealing party will be subject to an award of reasonable attorney fees and expert costs incurred after the appeal. The award must be appealed within 20 days of its entry, or it becomes subject to a final judgment. HB 1128 creates a new obstacle to appealing awards, by requiring the client to sign the request for a trial de novo. This must be filed and served within 20 days, and a failure to obtain written client consent will thwart an effort to appeal the arbitration award. Thus, decisions on whether to appeal an award must be expedited and immediately discussed with the client. Furthermore, if the client has availability issues preventing them from signing the request, the ability to appeal the award may be significantly impaired. ❖

— View the Session Law for HB 1128 here: <http://lawfilesexternal.leg.wa.gov/biennium/2017-18/Pdf/Bills/Session%20Laws/House/1128.SL.pdf>



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What to Know Before You Try CBD Oil for Pain Relief

By Mallory Creveling
Reprinted from www.prevention.com

Cannabidiol, better known as CBD, is having a major moment. Most commonly consumed as an oil, the marijuana compound doesn't give you that floaty feeling of being high—but it does have its own set of uplifting properties. CBD oil users say it melts away anxiety, eases sleep issues, and relieves depression. And last month, the U.S. Food and Drug Administration approved CBD to treat two severe forms of epilepsy, making it the first marijuana-derived drug approved at the federal level.

But the CBD oil use that might be most intriguing—and could perhaps be the biggest game-changer—is for pain relief. As the United States grapples with the opioid epidemic and struggles to treat the 50 million plus Americans who struggle with chronic pain, CBD oil has emerged as a nonaddictive alternative that people are applying as a topical oil, ingesting as a pill, or smoking through a vape pen.

But does CBD oil for pain really work—or is it just a passing fad amplified by the placebo effect? Here's what we know so far.

CBD oil as a painkiller just hasn't been studied much

There has been lots of anecdotal proof for CBD and pain relief, so researchers have often focused on finding out whether that's due to the placebo effect, says Rebecca M. Craft, PhD, H. L. Eastlick professor of psychology and director of the experimental psychology doctoral program at Washington State University.

Currently, the U.S. National Library of Medicine lists just 25 clinical studies involving CBD and its effects on pain. Only a handful of those have been completed so far, but there are more in the works. Many of these trials involve pain in people with advanced cancer, and while some show positive pay-offs, others demonstrate that cannabis treatment doesn't provide any more relief than a placebo. The catch: Most of this science involves both CBD and THC (or Δ^9 -tetrahydrocannabinol, the part of

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cannabis that does give you a high).

There are a few other drawbacks to studies on CBD. First off, many involve rats rather than humans (including one that focuses on arthritis-related ache relief). Also, the science that does involve people doesn't often include a large test group, Craft says. Finally, as Craft notes along with a review of CBD studies, there's not much research out there about the long-term effects of cannabis-based meds.

In the end, science just needs to catch up with the draw toward CBD, at least in terms of easing aches.

CBD oil for pain relief boils down to your brain

It likely comes down to neurotransmitters in the brain. "One mechanism of action is that it desensitizes a particular receptor known to be involved in pain, called TRPV1," Craft explains. TRPV1 creates that sort of burning sensation pain you might feel from something like nerve damage. As Craft points out, that's only one particular form of pain that CBD could affect—and one in which scientists are still trying to learn more about.

Trying CBD oil for back pain and other run-of-the-mill aches probably won't hurt you

None of this is to say trying CBD is off limits. "Cannabidiol is generally well-tolerated, which gives it a distinct advantage over other medications currently available for pain, including (and especially) opioids, non-steroidal anti-inflammatory drugs, steroids, anticonvulsant, and antidepressant medications," says Seth Waldman, MD, anesthesiologist and director of the pain management division at the Hospital for Special Surgery. "I have seen a number of patients with difficult neuropathic pain syndromes who found it helpful." (There's also a study on this neuropathic pain—that burning-like sensation that affects the nervous system as Craft mentioned earlier. Research showed, though weak, it had a positive effect.)

Also, while using it topically as an oil is probably safer, more promising results come from taking it orally, Dr. Waldman notes. So you'll want to be extra careful going the ingested route.

Your biggest concern should be making sure you're not getting the THC along with the CBD, Craft says, and that can be difficult to ensure. "Very low doses are unlikely to have side effects," she says. "But if you have higher concentrations and you're predisposed for mental illness, it could actually make it worse."

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CBD oil for chronic pain has pros and cons

A strong draw to CBD: There's no record of severe side effects. You might feel a little drowsy—and probably shouldn't operate a vehicle while on it—but otherwise, you're likely in the clear.

The bad news: CBD, just like any other supplement sold in the U.S., isn't regulated. That means you can never be totally sure of the amount of CBD you're getting. "If you and I go into a local cannabis shop, even a shop with a lot of experience of people coming in for medical reasons—unless you're in Canada or Netherlands, where they have federally-produced drugs—we can't trust that what's on the label is what we're actually getting," Craft says. That means you could be getting more or less of CBD, as well as THC (which has its own set of side effects).

Using CBD oil for pain: The takeaway

"If it's safe and you feel it works for you, then that's great," Craft says. "As far as helping the general public make a decision, we just want to know if it's going to work for more people," and that calls for more research.

Dr. Waldman says it is worth trying, at least for that neurological pain, but you'll want to follow a few precautions considering dosage is hard to decipher. "Try only one new treatment at a time, so that any effects or side effects can be attributed to the right one," he says. Then, "start low and go slow. That is, begin with the lowest dose, used once daily, and if tolerated and necessary, the dose could be increased slowly and deliberately. It is more difficult to gauge the effects of a new treatment if it is used irregularly." One last important note is, of course, talk to your doctor first before trying.

This type of pain treatment, "is trendy and may have legitimate medicinal properties that are incredible—or it could go by to the wayside in a few years," Craft says. "We just have to wait and see."

FDA Just Approved a Marijuana-Based CBD Drug for Epilepsy

By Anisa Arsenault
Reprinted from www.prevention.com

The Food and Drug Administration (FDA) made history on Monday: For the first time, it approved the use of a marijuana-derived drug.

The drug, Epidiolex, treats two rare and severe forms of epilepsy in patients ages 2 and older using a purified form of cannabidiol oil (CBD oil), a derivative of cannabis that doesn't result in a high.



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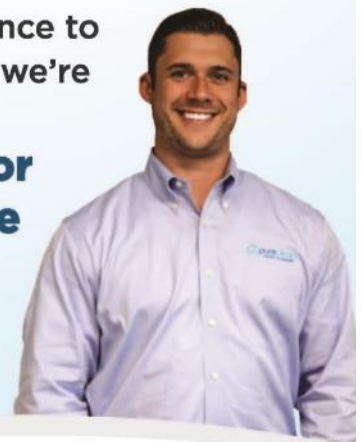
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GW Pharmaceuticals is producing the drug. In clinical trials, it reduced seizures in people with Dravet syndrome and Lennox-Gastaut syndrome without the harsh side effects of typical epilepsy drugs, which can include nausea, blurred vision and liver problems.

In a press release, FDA Commissioner Scott Gottlieb, MD, makes clear this is not a sweeping legalization of marijuana in general, or any of its other 80 active chemicals:

"This is an important medical advance. But it's also important to note that this is not an approval of marijuana or all of its components. This is the approval of one specific CBD medication for a specific use. And it was based on well-controlled clinical trials evaluating the use of this compound in the treatment of a specific condition. Moreover, this is a purified form of CBD. It's being delivered to patients in a reliable dosage form and through a reproducible route of delivery to ensure that patients derive the anticipated benefits. This is how sound medical science is advanced."

Proponents of CBD oil say it brings benefits including better sleep, pain management, and depression relief. But the number of people who swear by it aside, CBD oil is classified as a Schedule I drug by the Drug Enforcement Administration (DEA), which means it has no medicinal value. Before GW Pharmaceuticals can market it, the DEA will need to change its classification. (That said, by state law, CBD oil is legal in the 30 US and territories where medicinal or recreational marijuana is legal.)

It also remains to be seen how FDA approval will affect insurance coverage for epileptic patients seeking CBD treatment. For example, at a new (legal) Texas dispensary that made headlines for treating a 2-year-old boy with epilepsy, a 7.5-milliliter bottle costs \$105, and is not up for coverage.

The good news? Dr. Gottlieb emphasizes that as long as medical marijuana product developers play by the rules and submit to government drug development programs, this is only the first of many advances for treatments like CBD.

"Drugs derived from marijuana also are eligible for several programs that are intended to facilitate and expedite development and review of new drugs that address unmet medical needs in the treatment of serious or life-threatening conditions," he says. "The FDA will continue to support rigorous scientific research on potential medical treatments using marijuana and its components that seek to be developed through the appropriate scientific channels." ❖



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PSAA Membership Application for 2018-2019



PSAA Mission Statement

Puget Sound Adjusters Association is a professional organization dedicated to the ongoing education of the claims community — providing an arena for member interaction and the sharing of knowledge and resources.

- Share timely & professional information
- Camaraderie with colleagues & service providers
- Keep current regarding professional products & services
- Learn skills that enhance daily service operations & delivery

ANNUAL MEMBERSHIP APPLICATION

ANNUAL MEMBERSHIP DUES FOR THE YEAR STARTING SEPTEMBER 1, 2018 TO AUGUST 31, 2019

DUES ARE \$50 FOR THE YEAR.*

Submit this application and pay with check or pay online with credit card.

Mail to: PSAA, PO Box 87, Dexter, OR 97431 or scan and email to info@pugetsoundadjusters.org

Please print or type information

Application is: (Check one) Renewal _____ New _____ Change _____ Referred by _____

- Applicant is:
- | | | |
|--|--|---|
| <input type="checkbox"/> ACTIVE Member \$50*
Carrier Claims Personnel (claims adjusters, managers, supervisors, underwriters, subrogation, etc.), Risk Managers, Self-Insured & Insurance Pool personnel, Independent Adjusters, TPAs, Agents, Brokers | | <input type="checkbox"/> Associate Member \$50
Attorney |
| <input type="checkbox"/> Corporate Members (6 or more employees from one office) \$30 per person
To qualify for this rate, persons must be eligible for ACTIVE membership and there must be at least 6 applicants located within the same office. | | |
| <input type="checkbox"/> Honorary Member NO DUES — PSAA, SCAA and TCAA Past Presidents | | |

Paid by: Check Credit Card Amount Enclosed: \$ _____

Applicant Name _____ Job Title _____
(For Corporate Members, please list names and email addresses below)

Company _____ Discipline: Property Casualty Auto Work Comp Other

Company Address _____ City _____ State _____ Zip _____

Home Address _____ City _____ State _____ Zip _____

Work Phone _____ Cell Phone _____

Email Address _____

The PSAA Monthly Newsletter and other association correspondence will be sent via email.

***Claims Personnel who pay dues receive free attendance at ALL PSAA functions and events, including monthly meetings and annual symposium.**

Corporate Members:

Name: _____	Email: _____
Name: _____	Email: _____
Name: _____	Email: _____
Name: _____	Email: _____
Name: _____	Email: _____
Name: _____	Email: _____