




from
VICTIM

to
VICTORY



INSURANCE COMPANIES,
WHICH ARE MULTI-BILLION-
DOLLAR CORPORATIONS,
ARE KNOWN FOR THEIR
SHADY AND UNDERHANDED
TACTICS TO SAVE A BUCK.

SOMETIMES THEIR ARGUMENTS
IN PERSONAL INJURY CASES
ARE SO FRIVOLOUS THEY ARE
SIMPLY LAUGHABLE.

THE FOLLOWING ARE SOME OF THE MOST
RIDICULOUS ARGUMENTS OUR FIRM HAS
HEARD IN OUR RECENT CASES.

TOP 5 MOST LAUGHABLE ARGUMENTS

MADE BY INSURANCE ADJUSTERS IN PERSONAL INJURY CASES

— by John Coco, Esq., Law Offices of JOHN COCO, PLLC

#1 “YOUR CLIENT IS FAT”

Our client was injured in a high-speed car crash which totaled both vehicles. The other driver made an illegal turn causing the collision. Our client immediately had severe hip pain and required major surgery. The damage to his hip was so extensive that the surgeon had to pull the ball of our client's femur from his hip socket and drill several anchors into his bone before pushing it back in.

The insurance adjuster said this surgery was entirely unrelated to the crash, and that our client needed hip surgery because he was “very overweight at the time of the crash.” After we filed a lawsuit and sent some letters pointing out the ridiculousness and frivolity of the adjuster's argument, the insurance company paid the entire \$100,000 insurance policy.

#2 “YOUR CLIENT HAD SEX”

Our firm represented a young woman who was rear ended and suffered a severe neck herniation. The neck injury caused her hands to become numb, painful, and weak. About two months after the crash she became pregnant. The insurance adjuster defended the case by stating, “If your client was so hurt, how did she have sex?”

We gave the insurance adjuster a quick anatomy lesson so she understood which body parts are involved in baby making. Once that issue was cleared up, our client was paid the entire \$250,000 insurance policy.

#3 “YOUR CLIENT WAS DUMB BEFORE THE ACCIDENT”

We represented a young girl who was in a major car crash where all the glass was blown out of her vehicle and every airbag was deployed. She struck her head in the crash and was experiencing confusion, trouble concentrating, and other symptoms related to a mild traumatic brain injury.

Her grades in school were suffering and the insurance company defended the case by arguing, “She was dumb before the accident so you can't blame this on us.”

We compiled her complete school records and proved that her grades indeed began to decline only after the crash. The insurance company relented on their outrageous and reprehensible argument and eventually paid nearly \$800,000 just prior to trial.



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#4 “YOUR CLIENT WORE BLACK”

We represented a man who was struck by a car as he crossed the street in a crosswalk while he had the green light.

Of course (according to the insurance company) this collision could not be the fault of their insured, the driver who ran our client down. The insurance company blamed the victim by emphatically and repeatedly asking (with an air of righteous indignation) “Well, why was your client walking at night and wearing black?”

To the insurance company, this fact was the true “smoking gun” of the case. They conveniently ignored the fact that our client was in a crosswalk with a green light.

We responded to this stupidity with a lawsuit and a few months later our client was paid the full insurance policy.

#5 “IT’S THE CHIROPRACTOR’S FAULT”

We represented a man who was rear ended and suffered from a cervical disc (neck) herniation. This was treated first with chiropractic care, and then with a course of epidural disc injections.

The insurance company called us with an inadequate offer and demanded to know why the client saw a chiropractor.

The insurance adjuster’s argument was that our client should have seen a physical therapist, and that the chiropractor (not the heavy collision with the insured’s car) was at fault. He argued that the chiropractor must have made our client’s injury worse!

None of the evidence supported this “argument.” We sent a strongly worded letter stating that his argument was baseless and bordering on defamation of the chiropractor.

A week later the insurance company paid double their “last, full, and final offer.”

CONCLUSION

While some of these arguments are laughable, mistreating injury victims is no laughing matter. When an insurance company and their attorneys defend a case, they want to confuse and cast doubt. It is typical for an insurance adjuster to try every argument possible to undermine the plaintiff’s position.

Plaintiff’s attorneys have the “burden of proof,” meaning we have to provide actual evidence to prove our case. Some insurance adjusters and defense attorneys will say anything to muddy the issues. We have found the best course of action is to ignore these baseless arguments and move the case through court as fast as possible.

If you are injured you can expect similar treatment from the responsible insurance company. Do not battle an insurance corporation alone.

We offer a free consultation and case evaluation and never charge a fee unless we win your case.

Call us at 516.224.4774 or email jcoco@johncocolaw.com.

We guide injury victims to victory.



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