

# WHAT JURORS AREN'T TOLD IN CAR ACCIDENT CASES

1. **The defendant has insurance.** Washington is one of the few states that do not allow the jury to know that the defendant has insurance and usually has nothing personally at risk. Even though the defendant's name is on the lawsuit and they sit in the courtroom during trial; the insurance company is really in charge and will pay any judgment that is entered. The defendant will never have to pay a judgment against them out of their own pocket; the insurance company pays. The insurance company hired and is paying the attorney sitting at the defendant's table. In fact, the insurance company also pays all of the defendant's costs of litigation including travel, parking and, usually, even reimburses them for any time they miss from work.
2. **The defendant was drunk, on drugs, talking on a cell phone or texting when they caused the accident.** If the insurance company admits that the defendant caused the collision, the court rules don't allow the jury to hear the true facts of what led to the collision, no matter how outrageous or dangerous the defendant's behavior was. To make things more difficult and expensive for an injured person to obtain justice, the insurance company often first denies that the defendant was at fault and strategically waits until trial, or just before, to admit that the defendant was at fault (so the jury doesn't hear all of the facts).
3. **The defendant got a ticket.** Washington rules don't let the jury hear that the investigating police officer issued a ticket to the defendant, that the ticket was upheld in court or that the defendant paid a fine for the traffic infraction that caused the collision.
4. **The insurance company forced the injured person to file a lawsuit.** The injured person (or their lawyer) tried to negotiate a fair settlement with the insurance company before ever filing a lawsuit. But, insurance companies delay, deny and defend legitimate claims to increase their corporate profits. By refusing to offer a reasonable settlement, an insurance company hangs on to money that is owed to an injured person for medical expenses, lost wages, and disruption to their life—hoping that the injured person will settle for far less than what is fair.

5. **The insurance company asked for a jury (rather than have a judge decide the case).** Having an arbitrator or judge hear and decide a case is a quick and inexpensive way to have a disagreement settled. But delay is good for insurance companies: the longer the delay, the longer they get to keep the money that is rightfully owed to the injured person; money that is needed to pay medical bills, cover lost wages and compensate for the unwelcomed changes to a person's life that an injury has caused. To make it as difficult and expensive as possible for an injured person to get their case heard, insurance companies demand that the cases be decided by juries. Because it often takes years to get jury trials scheduled and the costs are prohibitive, many injured people just give up and settle their cases for far less than what is fair. For the ones who eventually get to court, **no matter how seriously a person is injured and no matter how legitimate their claims are**, the insurance companies hope that jurors will be skeptical and view injured people who have been forced into court as liars, cheats, and frauds who are trying to scam the system.
  
6. **The defendant's "expert" doctor is paid by the insurance company.** The defendant has the right to force the injured person to see a doctor of their (insurance company's) choice. Insurance companies pick the same doctors over and over again because they can rely on their opinions to be favorable to the defendant.
  
7. **The defendant does not have to pay any legal expenses and has nothing personally at stake in the lawsuit.** The insurance company provides the attorney for the defendant and pays all the costs of litigation. The insurance company pays any judgment that is entered. Even though the defendant has nothing personally at risk in the lawsuit, the insurance company insists that they sit through the trial to create the appearance that the defendant has something at risk.
  
8. **The injured person has to reimburse their own insurance company.** Where health insurance, car insurance or a worker's compensation plan has paid medical bills or wage loss, the injured person will have to reimburse their insurance company from any judgment they are awarded.
  
9. **The injured person has to pay their lawyer, medical expenses and litigation costs.** The injured person does not get the entire judgment. In addition to paying any outstanding medical bills, they usually have to reimburse their health insurance

company. The injured person must also pay their attorney approximately one-third of any verdict rendered in their favor. Additionally, they (or their attorney) must pay all of their legal costs to pursue their claim including paying for their doctors' and other experts' time for testifying in court. The court rules only require the defendant's insurance company to reimburse a small portion of those costs.