

THE BLUENOSE BUGLE - NOVEMBER 2018 EDITION



NSIWA

NOVA SCOTIA INSURANCE
WOMEN'S ASSOCIATION

Presented by NSIWA

www.nsiwa.com

www.caiw-acfa.com/nsiwa

Presidents Message November 2018



The beautiful leaves are now all gone, it's getting colder and before you know it everyone will be putting up their Christmas lights. Speaking of Christmas, it is not too soon to start thinking about what you would like to donate to our Christmas Auction. The Ways and Means are busy getting ready and don't forget to sell the Christmas Basket tickets that were passed out at our October General Meeting. There will be more tickets available at this month's meeting. So please get yours as all proceeds go to the Cancer Society.

I attended the 65th Annual Awards Dinner on Nov 1st and I had the pleasure to present a cheque, plaque & Trophy for the Top CIP award to Samantha Mayo of Northbridge General Insurance. NSIWA is very honored to sponsor this award that recognizes the hard work and dedication it takes to earn the CIP designation. It was a great evening and congratulations to all graduates on their special evening.

November is also the month in which we honor our veterans on Remembrance Day, who fought and died for our freedom. Please remember to wear your poppy to show respect.

We are very excited to have a sponsor for our Insurance Information Week. A very big thank you to CAA and thank you Lynne for making this happen.

Hoping to see all of you at our November General Meeting on Nov 21st for great Fellowship, Networking and Education.

Yours in Fellowship,

Paula Creelman

NSIWA President



NSIWA DINNER MEETING – Nov 21st, 2018



Brightwood Golf & Country Club – 5:30pm

\$45 per person

**Guest Speaker: Avery Kartes – Origin & Cause
Topic: Common Water Losses & Mitigation**

**Member Speaker: Genevieve Maceachern
Topic: Ways & Means Christmas Auction**

Please RSVP to Jennifer Poirier by Friday November 16th, 2018:

Jennifer.Poirier@intact.net

NSIWA NOVEMBER BIRTHDAYS!!



Lottie MacAlpine	Nov 1 st
Beverley Devlin	Nov 2 nd
Natalie Keyes	Nov 6 th
Genevieve MacEachern	Nov 9 th
Victoria Higgins	Nov 12 th
Colleen Sampson	Nov 12 th
Deb MacDougall	Nov 14 th
Diana Vardy	Nov 17 th
Tanya MacDonald	Nov 21 st
Heather MacLean	Nov 30 th

NSIWA MEMBERSHIP 2018-2019



Arnold	Cathy	CAIB	Archway
Baltzer	Heather	CIP	Archway
Barker	Beverley	FCIP	The Cooperators
Barnett	Steven R		Foster & CO
Bond	Melanie		All-Tech Enviromental
Briand	Sarah-Jo		C3 Legal
Burgher	Kelly	FCIP, CRM	Sovereign General
Burke	Jerri	CIP	Travelers
Burke	Rebecca		Marsh Canada
Burke	Bill		Burke Co Investigations
Caissie	Jason		Foster & CO
Cambell	Leslie	CIP, CAIB Hons	Salvatore Insurance Brokers
Clahane	Ken		Retired
Connors	Kristina		Portage Mutual Insurance
Cox	Sandra	Bsc, CIP	GFH Underwriting Agency Ltd
Crcchetto	Jennifer		Strum Consulting
Creelman	Paula		Portage Mutual Insurance
Crosbie	Victoria		McInnis Cooper
Crowell	Paula	BBA CAIB	Huestis Insurance Group
Day	Nancy		Totten Insurance Group
Devilin	Beverley	CIP	Aviva
Doane	Tina		System Care
Donnelly	Briana	CPA	MDD Forensic Accountants
Down	Tracey	FCIP CRM	Portage Mutual Insurance
Dude	Penny		First On Site
Foster	J.Charles	Q.C	Foster & CO
Furey	Alileen		McInnis Cooper
Gamble	Brenda		Desjardins Insurance
Garrison	Melanie		WCL Bauld
Gerhardt	Lynne		CAA Insurance
Godin	Tanya	CIP	Intact Insurance
Hachey	Erika		Foster & CO
Hardwick	Myrna		Archway
Harris	Robin		Carstar New Minas
henriksson	Leanne		Insurance Institute Nova Scotia
Higgins	Victoria		Portage Mutual Insurance
Higgins	Tamara		Avis Budget Group
Innes	Sarah		Impact Auto Auctions
Jennings	Joyce		Portage Mutual Insurance
Jenny	Reyno		Insurance Institute Nova Scotia
Johnson	Deb	FCIP CRM	Current Insurance

Johnson	Wendy		McInnis Cooper
Joudrey	Ann M		Marsh Adjustment LTD
Kaminska	Karen	FCIP, CRM	Economical Insurance
Kartes	Avery		Origin and Cause Inc.
Kean	Jillian		McInnis Cooper
Kenny	Lana	CIP	Travelers
Keyes	Natalie	CRM MBA	Travelers
LeBlanc	Lisa	CIP	Insurance Institute Nova Scotia
LeBlanc	mellissa	CIP	Aviva
Ley	Janet	CIP	Marsh Adjustment LTD
locke	Kelly	BA, CHRM,CIP	Intact Insurance
love	Jennifer		The Guarantee Company of North America
Macdonald	Tanya		Stantec
MacDougall	Deb	CIP	Travelers
MacEachern	Genevieve		Ecclesiatical Insurance
MacInnis	Amber	B.A CIP	Amber MacInnis & Asscoiates
Martin	Annie	CIP	Aviva
McAlpine	Lottie		Retired Marsh Adjustment
McGinley	Paula		MCT Insurance
McKee	Patricia	CIP	Intact Insurance
Mclean	Heather	B.A	Cluett Insurance
Merrick	Brian		Pario Engineering
Mitchell	Adele		The Personal
Nairn	Stephanie		Intact Insurance
Orman	Teresa		Retired March Adjustment
Osullivan	Karen		Arthur J Gallagher
Parker	Carla		Impact Auto Auctions
Paulsen	Erin		Totten Insurance Group
Pearn	Matthew		Foster & CO
Penney	Diane		Retired
Pope	Cheryl		The Guarantee Company of North America
Porier	Jennifer	CIP BBA	Intact Insurance
Reyno	Grant	P.Eng	Contrast Engineering Ltd
Rhuland	John		Totten Insurance Group
Richardson	Darlene		Strum Consulting
Richardson	Natalia		Intact Insurance
Rockwell	Devon		Totten Insurance Group
Russell	Denise		Stanhope Simpson Insurance
Russell	Kyla		C3 Legal
Sampson	Sarah	BBA CIP	Portage Mutual Insurance
Sampson	Colleen	FIIC	Retired
Smythe	Kim	BA, CIP	Economical Insurance
Sperry	Jason		First On Site
Stewart	Amy Jessica		Cox & Palmer
Stinson	Rosalie	CIP CRM	Travelers
Sulkas	Gary		Belron Canada
Summers	Mathew		Archway

Sutherland	Launa		Cliams Pro Inc.
Theriault	Gilberte		Retired
Thomas	Aileen	CIP	Travelers
Vardy	Diana		Travelers
Vautour	Brenda		Avis Budget Group
Walters	Nancy	CIP CRM	Aon Risk Services
Wilcott	Bradley	MBA, CPA,CMA,CE	MDD Forensic Accountants
Wilson-Day	Katie		Economical Insurance
Windle	Jenn		Portage Mutual Insurance
Young	Jacque		Avis Budget Group
Young	Barb		Merit Insurance



NSIWA FUNDRAISER

CATCH THE QUEEN

NOVEMBER GENERAL MEETING

I am happy to report that the Queen of Hearts was not picked last month. Ticket sales were \$179.00 and the starting pot for the November General Meeting has grown to \$67.65.

Tickets are 1 for \$2, 3 for \$5 and 10 for \$10. Bring your cash!

During the break, we will be calling a ticket number. If your number is called, you get to pick a card from the deck. If you pick the Queen of Hearts, you get 50% of the pot. If you pick another card, you get 20% of the take and the remaining 30% gets added to the pot for the next meeting.

NSIWA Ways & Means Committee
Geneviève MacEachern, Cheryl Pope, Jennifer Love



NSIWA
December General Meeting – 13-Dec-2018

CHRISTMAS LIVE AUCTION

We need your help!

This year again, we will be raising funds for the NSIWA by ways of a very exciting live auction, and for the Cancer Society via ticket sales for the Christmas Baskets. Last year, we were very happy to deliver a cheque in the amount of \$2,405.00 to the Cancer Society!

WE NEED YOUR HELP!

- Donations for the auction: holiday items, baked goods, homemade pickles (very popular item), etc.
- Donations for the baskets: small gift items, gift cards, etc.
- Selling tickets for the baskets. **Tickets will be available at the November General Meeting.**

Ways & Means Committee: Geneviève MacEachern, Cheryl Pope and Jennifer Love

FOR THE FIRST TIME EVER!

Beat Denise Russell Contest: Christmas Basket ticket sales

Every year, Denise Russell sells the most Christmas Basket tickets. Without fail. It's a fact.

Since we cannot challenge Denise, the Ways and Means Committee will be awarding a gift card to the person with ticket sales the closest to Denise's sales!

So, get your tickets and sell sell sell. It's all going to a good cause, with 100% of the sales going to the Cancer Society.

YOUR WAYS & MEANS COMMITTEE:

GENEVIÈVE MACEACHERN, CHERYL POPE AND JENNIFER LOVE

NSIWA.COM

Our webpage

Where you will find our history, executive, committee chairs, most recent achievements, photo gallery, upcoming events and calendar.



We are in search of a current education piece, a short article for our blog. Starting with as little as a few paragraphs.

Most recent post include topics like:

1. Underinsurance in Atlantic Canada
2. When Involved in an automobile accident
3. Protecting your home from water damage
4. What do adjusters do

WE WOULD LOVE TO SHARE YOUR ARTICLE ON OUR WEBSITE BLOG.

#NSIWA

This is a hashtag



Help us promote NSIWA and its members by adding a hashtag to your posts on social media.

Just type #NSIWA following any post with a specific NSIWA theme or content that can be shared publicly

Public Speaking Contest - 2019

It is time to start thinking about the Annual Public Speaking Contest. I would like to encourage members to participate in this worthy contest.

Please find attached the Topics approved by CAIW, which also includes the rules and regulations. Our local contest is being held on March 20th, 2019, at Brightwood Golf Club.

The winner of our NSIWA Public Speaking Contest will represent our association at the CAIW Convention as a contestant in their Public Speaking Contest being held in Calgary this year from June 6th through the 9th, 2019. Here is a great opportunity to have your way paid to attend this exciting convention, plus the recognition you receive for participating in such a great contest.

The first place winner would receive

- \$50.00 cash award
- Convention Registration Fees (which includes most of your meals)
- Hotel Expenses for three nights (based on one-half of the nominal rate for standard double room.)
- Airfare Economy price .

In addition to all the above, there is cash awards to be won at the National Convention,

1st place winner - \$500.00 plus a keeper trophy

2nd place winner - \$250.00

3rd place winner - \$150.00

Intact Insurance is our proud sponsor of our National Public Speaking Contest , and we truly appreciate all their support over the years.

Believe in yourself and take the Challenge.

If you have any questions or concerns please call me anytime

Diane Penney

Home # 902-865-3422

Cell # 902-293-4256

e-mail address diane.penney@icloud.com

Thank you everyone and I know that we will have a great contest, I believe in our association and it's members . Together we can do anything.

Diane Penney

Public Speaking Contest Chair - NSIWA

Mission statement:

To preserve and enhance the value of our Member Associations through Education, Networking and to foster personal growth.



<http://www.caiw-acfa.com>

Énoncé de mission :

Préserver et rehausser la qualité de nos associations membres, par l'éducation, l'entraide et encourager le développement personnel.

PUBLIC SPEAKING CONTEST 2019 – TOPICS

1. **Smashing the Glass Ceiling in the Insurance Industry – How have you, or will you break the Glass Ceiling of the male dominated Insurance Industry?**
2. **Underinsurance – what impact does this have on your customer?? Who's accountable?**
3. **Mergers and Acquisitions – What are the effects or could be the effects of this trend on your current job role and security?**
4. **Legalization of Cannabis – what changes have you seen since legalization Oct/2018 from a sales and/or claims perspective?**
5. **Who/What has impacted me professionally during my career journey??**
6. **Topic of your choice**

Respectfully submitted,

Lana Kenny, CIP

Intact Public Speaking Contest Chairperson

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INTACT PUBLIC SPEAKING CONTEST 2019
RULES AND REGULATIONS

A Public Speaking Contest is held each year at the Annual Meeting. A speaker from each Local Association is eligible to participate. The winner receives a large plaque engraved with their name to keep for one (1) year and a small plaque to keep permanently along with a cash award of \$500.00. Second place receives a cash award of \$250.00. Third place receives a cash award of \$150.00. Every contestant receives a certificate, stating the year of the contest, name, etc. Intact Insurance sponsors the contest.

REGULATIONS FOR INTACT PUBLIC SPEAKING CONTEST

The Speakers

1. One representative from each Local Association may participate.
2. The speaker's topic may be chosen from any of the suggested topics or a topic of their own choice.
3. The speech shall be of five (5) minutes duration
4. Before the Contest commences, the speakers will draw for order of speeches.
5. Speakers will remain outside the room until it is their turn to speak.
6. The judges will choose a spokesperson to comment on the speeches.
7. The winner is announced during the Saturday evening banquet.
8. The winner of the Public Speaking Contest will be barred from competing until three (3) years has elapsed.
9. Deadline for entries shall be March 31, 2019
10. Acknowledgement of the entry form shall be forward to the Director by the Public Speaking Chairman.
11. Chairman to advise the Local Association if submissions were accepted or rejected.

The Timekeeper

1. The timekeeper will be arranged by the Public Speaking Chairman.
2. The timekeeper will be seated where she can be seen clearly by the contestants.
3. The timekeeper will have a copy of the Regulations and know the time allotted for speeches.
4. The timekeeper will have a stopwatch.

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5. One minute before the end of time allotted each speaker, the timekeeper will stand up and remain standing until one minute has expired – and then the timekeeper will sit down.
6. For the benefit of the Judges, at the conclusion of each address, the timekeeper will announce the actual time taken.

The Judges

1. The Host City will provide three (3) bilingual judges, when required.
2. During the speeches, the judges will be seated in different parts of the room and shall not confer with each other, or with any other person, from the time the Contest starts until the decision has been announced.
3. Judges will use the Official Worksheet and Ballot of the C.A.I.W.
4. When the judging of each Speaker has been completed, each judge will raise their hand to notify the Chairman that they are ready to proceed.
5. No speaker shall be penalized for speaking one minute over or under the time allotted. Excessive overtime or under time, will be penalized by deducting a maximum of five (5) points for each excessive minute. Deductions shall be made from the "DELIVERY" section.
6. Apparent reading from a prepared text, other than brief statements obtained from authoritative sources and statistics, will be penalized by deducting points from the "DELIVERY" section at the discretion of the judges.
7. Each judge shall fill out the Official Worksheet, total the score of each speaker and then, according to these totals, give their decision by writing the names of first, second, and third place winners on the Official Ballot.
8. Judges will render independent decisions designating the winning speaker, second and third place winners
9. The majority opinion of two (2) judges, as to the winner, will determine the result, regardless of the point totals made by the three (3) judges. In the event of a tie, then the total points of the tied speakers shall determine the winner. If the points total is also tied, then the speaker with the highest points for the "DELIVERY" section shall be the winner. **DELIVERY** comprises VOICE, PHYSICAL, LANGUAGE and MANNER Sections.
10. A suitable gift will be provided by C.A.I.W. for presentation to each judge.



NSIWA Education Corner

We are pleased to include our Education Report from Convention 2018, held in Halifax. In light of this, we will continue the NSIWA Education corner in next month's Bulletin. Enjoy the Education Report!

CAIW Convention 2018 Education Report

Session 1 – Digital Solutions for the Modern Insurance Brokerage - Sherif Gemayel, President Sharp Insurance

History of Sharp:

- In August 2009 Sherif was an oil and gas mogul. He and a friend in insurance joined together to create Sharp Insurance
- Brought Intact on as their market
- Used Google Business page to create great referrals
- The brokerage made over \$1,000,000 in their first year mostly due to Google Business
- Created EMETHOD, Sharp Mobile and Click Hook. These companies merge and create Trufla

Unlocking your Brokerage's Potential – Customers do not compare you to your competitors, they are comparing you to all their shopping experiences (ie. Amazon, etc), how simple and fast is the experience.

Web Design and SEC (Search Engine Optimization)

It takes consumers 2.2 seconds to decide if they trust you or not.

- Your website is your first impression – it needs to engage your audience, if you have a “Quote Now” button but it goes to “Give us a call” you will lose the interest of the potential customer. If you don't give them what they want it creates doubt and loss of trust. “Why can't you give me what I want, are you too expensive or do you have an inferior product?” ...
- Give options on how they want to deal with you on the website
- 25% of Google search revenue comes from the search word “Insurance”
- SEO has to be considered when designing your website. If you can't be found on the first page of Google, your business will not survive the digital world

Lead Management - You have to have a system in place to track, monitor and manage the leads

Data and Analytics

- Data is your brokerage's biggest asset
 - Data = new selling opportunities
- The biggest premium setting piece of data – Credit
 - Knowing credit score gives informed info on type of insurance they would need and can offer different coverage before they ask or know they need it.
 - You are able to sell products that are more meaningful when selling based on data

CAIW Convention 2018 Education Report

Amazon purchased an insurance company in India. Stocks on US Insurance sites dropped due to the rumor Amazon will start selling insurance in the US. Fear because Amazon is so good at distributing.

Being able to harness the data and use it helps you meet the customer's expectations. It helps you make intelligent business decisions.

Data can be used to:

- Attract and engage customers
- Identify and predict trends
- Maximize conversion rates
- Make data driven decisions

The Magic of Mobile

- Stay Connected
 - Access pink cards
 - View policy and payment details
 - Request policy changes
 - Submit auto claims
 - Receive instant recall and weather alerts
- 50% of app users say they would stay even for a higher premium to stay with the mobile app

The one most important message according to Sherif – Capture Data and measure it at every step of the way, adjust your business accordingly.

CAIW Convention 2018 Education Report

Session 2 – Effect of Marijuana on the Insurance Industry – Panel Discussion

Cst. Chad Morrison – Provincial DECP Coordinator, Special Projects

Melanie Comstock LLB, BA – Partner – McInnes Cooper

Rene Fenez CIP, CRM – AVP Atlantic – Vericclaim Canada (Sedgwick)

Part 1: Effects of Marijuana Legalization on Law Enforcement

Cst. Chad Morrison has been with the RCMP for 10 years. He is a Provincial Drug Recognition (DRE) Expert, which is an officer specially trained to identify drug impairment in drivers.

A DRE Coordinator organizes drug-impaired driving training, review drug-impaired driving files and liaises with the crown regarding investigations and charges

Since 1925, it has been illegal to drive while impaired by any substance – this includes marijuana.

The Current Model:

- If there is a **reasonable suspicion** of drugs the officer can demand a Standardized Field Sobriety Test (SFST) which are used to form **reasonable grounds** for driver impaired by drugs
- If there are **reasonable grounds** of impairment the officer can demand for Drug recognition evaluation, which is a 12 step process to determine the drugs causing the impairment
 - Breath Alcohol Test (if applicable)
 - Interview of arresting officer
 - Preliminary examination
 - Eye exams
 - Divided attention tests
 - Clinical indicators
 - Dark room checks
 - Check for muscle tone
 - Check for injection marks
 - Interview
 - Opinion
 - Toxicological Sample

CAIW Convention 2018 Education Report

Drug Evaluation & Classification Program - There are Seven Drug Categories

1. Central Nervous System Depressants
2. Inhalants
3. Dissociative Anesthetics
4. Cannabis
5. Central Nervous System Stimulants
6. Hallucinogens
7. Narcotic Analgesics

On April 13, 2017, Bill C-45, also known as The Cannabis Act, was introduced. The purpose of the bill is to de-criminalize cannabis, and it was initially expected to take effect on July 1st, 2018.

The act seeks to provide legal access to cannabis and to control its production, distribution and sale

The Objectives of the Act are to:

- Prevent youth access
- Public health and safety through strict product safety/quality requirements
- Deter crime via serious criminal penalties
- Reduce the burden on the criminal justice system

In preparation for the coming legalization of Cannabis in Canada, Nova Scotia has the following resources in place/planned:

- 53 active DREs currently
- 14 DREs will complete their certifications in June
- An Additional 22-24 DREs will be trained in the Fall of 2018 which will bring the total to 90 DREs (9.5/100,000 of population)
- There will be nearly 500 SFST trained police officers in Nova Scotia

Impact on Impaired Driving Laws:

- It will continue to be illegal to drive impaired by Cannabis
- The number/frequency of drug-impaired driving may increase
- Police will get additional tools to fight drug-impaired driving as noted above
- Legalization will occur across the country in every jurisdiction
- It is difficult to predict the outcomes in terms of impaired driving
- Generally, lowering restrictions has resulted in increased incidence of Cannabis use in drivers

CAIW Convention 2018 Education Report

Bill C-46: Act to amend the Criminal Code

- Mandatory alcohol screening at roadside
- “Per se” levels assigned to a variety of drugs:
 - THC – 5 ng/ml of blood
 - GHB – 5 mg/l of Blood
 - Lysergic Acid Diethylamide (LSD)
 - Psilocybin (“Magic Mushrooms”)
 - 6 Monoacetylmorphine (Heroin)
 - Phencyclidine (PCP)
 - Ketamine
 - Cocaine
 - Methamphetamine
- **Reasonable Suspicion** of drugs the officer can demand Oral Fluid
 - Results used to form reasonable grounds of impairment
- **Reasonable Grounds** of impairment the officer can demand DRE and/or Blood Sample
 - THC among most common drugs involved in Nova Scotia and toughest to prosecute
 - Oral fluid allows quick screening for Cocaine, Methamphetamines and THC. This will eliminate some of the challenges officers currently see with their current screening techniques. Oral Fluid is a mixture of saliva and other secretions (water, proteins, electrolytes, etc) and screening tools are an additional, useful tool for apprehending impaired drivers. They are NOT expected to replace the need for DRE trained officers.
 - Varying onset and durations of drugs can result in varying impairing effects. Signs of impairment can wear off. Blood demand will assist with time delays seen with DRE evaluations
 - Will assist with collision investigations where the driver is unable to submit to DRE Evaluations (currently there is no “blood demand” for drugs)

So why do we still need DREs? Here are the limitations:

- Oral fluid only tests for three drugs
- Not all drugs have “per se” limits
- Blood collection is not always possible
- Many of the common drugs are excluded:
 - Dilaudid
 - OxyContin
 - Methadone
 - Codeine
 - Valium
 - Xanax

CAIW Convention 2018 Education Report

- Ambien
- Clonazepam
- Lorazepam
- Officers roadside are not able to identify specific drugs causing impairment. Unless certain that a “per se” drug is involved, a DRE should be conducted

Current Law:

- Traffic Stop – Police form suspicion of drugs (smell of drugs, red eyes)
- Police demand Sobriety tests (ie. walk and turn)
- Police form reasonable grounds to believe driver is impaired
- Police demand driver undergo DRE (includes bodily sample)
- Driver fails DRE – driver charged with drug impaired driving

Proposed Law:

- Traffic Stop – Police form suspicion of drugs (smell of drugs, red eyes)
- Police either:
 - Demand sobriety tests (ie. walk and turn); or
 - Demand oral fluid sample
- Police form reasonable grounds to believe driver is impaired
- Police either:
 - Demand driver undergo DRE (includes bodily sample) – driver fails DRE and driver charged with drug impaired driving; or
 - Demand driver provide blood sample – blood sample analysed – over legal limit – driver charged with new offence

Part 2: The Impact of Marijuana Legalization on the Insurance Industry

The impact legalization will have on marijuana will be the reduced stigma behind it which will in turn cause higher usage (and claims). The legalization of recreational cannabis will likely lead more people to view medical cannabis as an acceptable treatment.

Current Medical Cannabis Law: The Access to Cannabis for Medical Purposes Regulations (ACMPR) authorizes four key activities –

1. Production – regulates the production of dried and fresh cannabis and oil by Licensed Producers.
2. Sale & Distribution – Regulates the sale and distribution of dried and fresh cannabis and oil by licensed producers to eligible members of the public
 - a. Licensed Producers – must be licensed by Health Canada and are the only ones legally allowed to sell medical cannabis to the public

CAIW Convention 2018 Education Report

- b. Eligible Members of the Public – a resident of Canada who is obtains a prescription from the Healthcare Practitioner who is treating them
- c. Healthcare Practitioner – a medical practitioner or a nurse practitioner who has direct in-person contact with the patient before authorizing use of cannabis and pre-conditions to prescription
- d. Medical Document – a person eligible to obtain medical cannabis must have a healthcare practitioner’s support in the form of a mandatory Medical Document containing the information require d in the regs:
 - i. Healthcare practitioner’s name, profession, business address, phone number
 - ii. The province where the practitioner is authorized to practise
 - iii. The number assigned by the province to that authorization
 - iv. Fax number and email address if appropriate
 - v. Patient’s name and date of birth
 - vi. Address of the location where the patient consulted with the practitioner
 - vii. The daily quantity of Cannabis the patient is to use expressed in terms of Grams of dried cannabis (typically 1-3 grams per day and Health Canada recommends a max of 5 grams per day)
 - viii. The period of use as a number of days, weeks or months that cannot exceed one year. The document is only valid for the specific time period indicated and a new document is required and the patient much re-register with a licensed producer every year
 - ix. The healthcare practitioner’s signature and a statement confirming the information contained is correct and complete
- 3. Possession – Regulates the maximum amount of Medical Cannabis (fresh or dried) an eligible person can carry on them at any one time. The maximum amount at any one time is the lessor of 30 times the daily amount prescribed or 150 grams.
- 4. Self-Production – An eligible member of the public is permitted to produce cannabis for their own medical purposes or to designate someone else to produce it on their behalf. However, they are not permitted to sell cannabis, it is for personal use only. To be eligible the grower must not have a criminal conviction for a designated cannabis offence and submit an application which includes the medical document noted above.

CAIW Convention 2018 Education Report

The Medical Cannabis Process

Understanding the rules around legal medical cannabis prescriptions will help insurance companies extend coverage only to medical cannabis that is legally acquired and possessed.

- The insured must be eligible to purchase medical cannabis and it must be from a licensed producer. There are strict regulations about filing Medical Documents and the registrations of individuals as clients of licensed producers to avoid an individual from attempting to fill their prescription through multiple producers.
- The Producers – not everyone is eligible to produce, sell or distribute medical cannabis. If the insured purchases their medical cannabis from an unlicensed producer the claim can be denied. Health Canada’s website lists all licensed producers in Canada.
- The insured can be approved for Home-Grown medical cannabis, however again there is strict regulations and requirements in order to be approved for this.
- Only some forms of cannabis can be produced, distributed or possessed under the medical cannabis laws: Fresh, dried, oil, seeds and plants
- Medical cannabis is not actually prescribed because it is not a pharmaceutical agent. However, healthcare practitioners can authorize the use of medical cannabis by issuing the Medical Document noted above.
- The Dosage – while the Act does not limit the amount a healthcare practitioner can prescribe, the cap on the amount an individual can possess works out to the equivalent of five grams of dried cannabis per day.

Personal Injury Claims – Cost of Care

There are five key considerations which courts have focussed on in assessing cannabis cost of care claims:

1. Regulatory Permission
2. Medical Document
3. Medical Practitioner
4. Medical Evidence
5. Health Canada Recommended Maximum daily dosage

If the plaintiff follow the regulatory process and allowed dosage they are more likely to success in having the courts recognize the claim.

Some examples where they were not followed:

Datoc v. Raj, (2013 BC) – court denied the claim for medical cannabis in part because it was prescribed by his naturopath – not a “medical practitioner”

CAIW Convention 2018 Education Report

Poirier v. Robichaud, (2007 NB) – the court accepted that cannabis did considerably relieve the plaintiff's pain, but refused her claim because she had no prescription, no other significant medical expert evidence in support of cannabis use; nor had she taken any formal steps to obtain permission for cannabis use under the regulatory process, despite the fact she had demonstrated intolerance or allergic reactions to some of her prescribed narcotics and had become addicted to another.

However, in Amini v. Mondragaon (2014 BC) the court accepted a claim for the cost of medical cannabis in which 10 grams daily was prescribed, but the indication was that the plaintiff would be using it for six months only and it was to be consumed in ointment form which may be less potent.

The Medical Document and a Passive Doctor

A doctor that completes the Medical Document based on a request of the Plaintiff, solely based on the self-report verses a considered decision based on research by a physician who regularly sees the plaintiff. A judge is more likely to rule with the latter.

Reasonable Treatment

Does the medical evidence must show that medical cannabis is a reasonable treatment for the plaintiff's specific symptoms? The medical evidence would be more convincing if it shows a positive benefit. For example if it shows using medical cannabis would reduce the use of narcotics to treat chronic pain. And the benefits of the medical cannabis use would need to outweigh any negative aspects. For example, it is much less likely to be approved for the following conditions:

- Trial or experimental treatment
- Respiratory conditions
- Prior adverse effects
- Addiction
- Depression

Pre-Injury Pot Use – How it affects Claims

If a plaintiff was a recreational pot user prior to being injured, it can affect the judgement in an injury claim.

In Gulbrandsen v. Mohr, the plaintiff testified that she had used cannabis recreationally before being injured in an MVA, but only used it for medical purposes since the accident. The court didn't believe her and concluded that she was attempting to obtain damages to support her recreational cannabis use and declined to award damages for cost of medical cannabis.

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In *Joinson v. Heran* the court reduced the plaintiff's claim for medical cannabis by 50% because his prior recreational use would likely have continued.

The medical cannabis use must also be prescribed as the result of the negligent action giving rise to the claim. In *Wright v. Mistry*, the court denied the plaintiff's claim for medical cannabis as a cost of care because the medical evidence showed that it was prescribed to treat high blood pressure and stress which were not conditions caused by the accident in question.

Cost of Care Calculation

There are a number of considerations that are taken into account when calculating the cost associated with Medical Cannabis:

1. Acquisition
 - a. Licensed Producer – the cost per gram is readily available online and varies based on the strain prescribed
 - b. Self-Grown – this could include the cost of purchasing the plants, set up and maintaining the mandated production and storage sites along with other expenses like electricity, soil, fertilizer, lights etc
2. Substitutes – The courts could base the compensation on the medically equivalent amount of synthetic substitutes, such as Cesamet
3. Accessories – Depending on how the plaintiff plans to consume the cannabis, there could be costs for rolling papers, a vaporizer, additional ingredients and equipment to make it into an ointment, etc
4. Future Improvement – Depending on the injury and prognosis, the award for medical cannabis should only cover the period the medical evidence supports. It should also be taken into account that participation in a pain management program should reduce the reliance on pain medications in the future, including medical cannabis.
5. Prior Cannabis Consumption – as noted above, an award for medical cannabis may take into account the plaintiff's prior use of cannabis.

Medical Cannabis and Section B

Recent case law indicates that medical marijuana can satisfy the test of medical necessity.

In *N.(T.) v. Personal Insurance Co. of Canada* (2012), the injured party claimed \$1,200/month for cannabis for pain, insomnia and poor appetite after a motor vehicle accident. While controversial, medical cannabis can be used to treat the insured's symptoms. It was reasonable and necessary. The applicant's entitlement based on the

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amount set out in the treatment plan was \$567.60 per month, which is based on purchasing the medical cannabis through the regulated system.

Medical Cannabis and Group Benefits

Benefit providers are required to pay claims fairly and any denials must be justifiable. They have the obligation to only pay benefits when the plan covers the claim. They must have a good grasp on the medical cannabis prescription process, the terms of the coverage plan and the medical evidence in the specific claim presented.

In *Skinner v. Canadian Elevator Industry Welfare Trust Fund*, Skinner was denied coverage under his employee benefits plan for coverage of his prescribed medical cannabis. Skinner claimed discrimination. The Nova Scotia Human Rights Board of Inquiry decided the denial of coverage was discrimination. The NS Court of Appeal reversed the lower court's decision stating it is not discriminatory for a private drug plan to limit reimbursement for the cost of drugs to only those approved by Health Canada. This has not yet been presented to the Supreme Court for review.

The benefit providers have ways that they can limit the costs while still providing coverage for medical cannabis:

- Annual Caps – the Ontario Public Service Employees Union allows employees to spend up to \$3,000 annually on medical cannabis. It must be obtained with a doctor's prescription through legally authorized sellers, but there is no limitation on the eligible conditions.
- Dosage Caps – Doctors can prescribe higher amounts of medical cannabis if they feel it is necessary. However, Health Canada's maximum daily dosage recommendation is 5 grams.
- Acquisition Control – claims can be assessed based on purchasing the product from a licensed producer
- Strain – There are a wide range of products available and the price can vary based on the strain. The benefits provider could limit their coverage to a specific price per gram or to a maximum strain
- Substitutes – Insurers can limit the cost to the medically equivalent amount of synthetic substitutes
- Accessories – Insurers can limit coverage to the product specifically and exclude accessories

If a benefits provider chooses to exclude medical cannabis they must go to great lengths to express any exclusions of coverage clearly and justifiably and in relation to the language of the plan coverage as a whole. For example, the coverage can be clearly excluded, however it may not avoid a human rights complaint for discrimination.

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Property Claims:

Growing cannabis in a residential home creates higher risk of water damage, mold, fire, vandalism and burglary. The average claim for structural damage after one successful grow-op is approximately \$41,000. For this reason many insurers exclude coverage for properties that house legal grow-ops. There are insurers who specialize in property insurance for grow operations, however the premiums and deductibles are significantly higher.

The courts found that if the insured knew a rental property contained a grow op than the policy could be voided. And the loss would have to be directly related to the grow-op for the claim to be denied. In Davidson v. Wawanesa the insured's house burned down due to arson the day after it was raided by police. However, because the fire was not "caused" by the grow-op it was covered.

The courts have also found that cannabis plants can be covered under the contents portion of homeowners insurance. In Stewart v. TD General Insurance Co the courts found that the policy provided coverage for growing plants, trees and shrubs with \$1,000 limit per plant. The policy did contain an exclusion for illegal substances, however because the insured had obtained Health Canada authorization to possess and grow marijuana for his personal medical use, the courts ruled that the exclusion did not apply.

Part 3: Marijuana's Effects on Claims Investigation

Rene Fenez is a regional Atlantic Manager for Sedgwick Claims Management Services who has worked the bulk of his career within the insurance claims field.

Rene talked initially of a local Nova Scotia man by the name of Rick Simpson who began treating himself with the oil from the marijuana plants and claimed that it cured a number of ailments including cancer for himself and others. He began giving away oil. There is an interesting documentary available on YouTube called "Run From the Cure...The Rick Simpson Story".

The purpose of Rene's presentation is to provide an overview look at what potential changes may occur in the field of underwriting and claims investigation with the legalization of recreational marijuana.

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Perspective

To gain perspective on just how much the new laws will affect us it is important to know the current statistics on usage. So prior to marijuana becoming legal, Stats Can estimates from 2015 show the following usage:

Consumers age 18-24	38% (3.8 out of 10 people)
Consumers age 25-44	22-23% (2.2 out of 10 people)
Consumers age 45-64	11% (1.1 out of 10 people)

25% of the population between ages 15-44 are estimated to be cannabis consumers

Consumption is estimated at 700 tonnes per year, that's equal to 700,000,000 grams

A conservative estimated selling price per gram between \$7.14-\$8.84 puts revenue from selling cannabis at about \$5 Billion a year!

So how will the legalization affect the insurance industry? Perhaps the USA can predict our future...

Colorado outlawed Cannabis in 1929. However legalization similar to alcohol regulation occurred in November of 2012. Rene went to a colleague in Colorado to find out how claims have been affected there:

- Fires from CBD oil as it is converted to powder. The CBD is very flammable.
- Fires in apartment complexes and homes from people that are making their own hash oil because you cannot buy it, and it is stronger and highly flammable. The colleague in Colorado indicated that they have had approximately one fire a month in the metro area from this alone
- Water damage to grow facilities. The automatic water systems fails causing damage to the buildings
- Normal claims for fire suppression systems damaging crop
- Normal hail claims on the many grow houses in the area affect claim payment
- Home invasions are up in the homes of people in the industry
- However, no reported increase in claims involving marijuana impaired operators

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There are some notable differences that suggest Canada's future will be a little different than Colorado:

Marijuana production, sale and consumption is still illegal from the perspective of the US Federal Government. This has created an entirely cash industry in Colorado which speaks to the "slight" increase in thefts from homes and home invasions, usually related to the homes of retail shop owners in the industry. Adjusters in Colorado reported a number of commercial claims were withdrawn in relation to Business interruption after requests to inspect vaults at retail locations. In Canada where Cannabis will be Federally de-criminalized the cash industry problem won't occur. It will be large retailers who will be federally regulated that will be selling the products.

Although Rene's Colorado colleagues reported no noticeable increase in marijuana related auto casualty assignments, the Investigative Support Center for the Rocky Mountain High Intensity Drug Trafficking Area, HIDTA, reported an increase in fatal accidents within which the vehicle operator tested positive for marijuana. It should be noted however that the organization is directly relevant to its findings and a full review of the data supporting a correlation to Pot was not made. The percentage increase in 2015 from 2006 was .02% and from the lowest fatality year 2011 to 2015 was an increase of 18%.

Insurers will need to investigate...

For property and liability risks, underwriting questionnaires and physical risk inspections will be important tools in collecting data and assessing the risks.

Insurers should agree on internal expectations and be sure to communicate to their sales force...what will be considered material and what will constitute an unacceptable risk? Property and Perils currently excluded will need to be reviewed and addressed (ie. property illegally acquired, kept, stored or transported etc).

It will be important to stay current with legislation and case law. Learn everything you can about Marijuana so you know what to look for – Grow boxes, oil distilling BHO...

For auto there will be changes regarding laws etc, but the insurance side will be similar to what is currently in place for alcohol and the questions during the claim investigation remain the same.

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Session 3 – Sail Away from the Safe Harbour Janice Butler – Creative Breeze Training

Sail away from safe harbour and tackle your fears and doubts!

“A ship in a harbour is safe, but that is not why a ship was built” William Shedd. You are the captain of your ship!

Every idea comes from a moment of inspiration, whether it be from co-workers, books, kids etc. You need to act in the moment of the idea, if not it will go away.

When you have an idea, you have voices of doubt

- Am I capable
- What will other people say
- When I retire (later will be better)
 - o You should live your retirement now
- I can't afford it
- I'm too old

When you deal with your internal doubt the only thing left is your doing what you always wanted to do.

Fabricated
Experience
Appearing
Real

Techniques for dealing with Fear:

1. Tell yourself “BIG X ON THAT” – it helps to negate those voices
2. Affirmation – Change the negative to a positive – how much is this going to cost?
I can do little things to come up with it
3. Inspiring Music – don't want to do something...crank up the music
4. Inspiring Quote – you are the captain of your ship...

Sail through fear step by step – looking at the whole will seem too big, break it down into smaller steps, next thing you know you walked the whole thing and learned from all the experiences. You need the good steps and the bad to move forward.

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Session 4 – Automated Vehicles – Implications for the Insurance Industry in Canada

Paul Kovacs, Executive Director, Institute for Catastrophic Loss Reduction

Paul is the author of the research report on behalf of the Insurance Institute regarding the implications for the insurance industry in Canada of Automated vehicles.

There are three types of vehicles:

1. Self-Driving – these vehicles are fully automated, the “driver” takes no control of the vehicle and can go to sleep if they wish. The car senses all surroundings.
2. Semi-automated – The driver still has control over the vehicle, but can switch to automated for parking, etc.
3. Conventional – driver has total control over the vehicle

Of the current vehicle on the road, there are about 95% conventional and 5% Semi-automated. There are no fully self-driving vehicles on the road. However, by 2025 it is predicted that Self-driving will have approximately 5%, Semi-automated 30% and conventional 60%. And by 2040 Self-driving will be between 30-50%, Semi-automated will be between 50-80% and conventional will be down to 5%.

A Causation Study was conducted on conventionally driven vehicles which showed approximately 7% of accidents were caused by the vehicle or weather conditions. The remaining 93% were caused by driver error. The study then reassessed based on vehicles being semi-automated. It showed that 50% of the accidents were preventable, 25% now caused by driver error and 25% vehicle or weather.

Finally, the study reassessed based on self-driving vehicles and 77% of the accidents in the conventional study were preventable and only 23% now based on the vehicle or weather. So with the self-driving vehicles there could be 77% less collisions on the road.

Responsibility is Shifting!

With the introduction of semi-automated vehicles the questions of who is responsible for traffic collisions becomes a much more difficult question to answer.

With conventional vehicles the claims are resolved based on relative contribution of each of the drivers involved.

With Semi-automated vehicles the claims resolution is based on two main factors:

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1. Determining if and when the safety features were engaged or disengaged at the time of the accident; and
2. Determining responsibility of the driver, vehicle owner, automaker and/or repair professional

With self-driving vehicles claims are resolved based on determining what caused the vehicle to act unsafely: failure of driving assistance technologies, repair professional or communications systems?

Effects on Insurance:

While the total number of claims is expected to decline with the semi-automated and self-driving vehicles, the cost of claims is expected to rise due to the complexity of the computer and other electronic equipment installed in the vehicles.

Right now drivers are responsible for most collisions and individuals own most cars. With the introduction of automated vehicles it is expected that transit as a service and vehicle sharing will also rise which will cause a disruption in insurance. The premiums on the personal auto side could drop by more than 50% by 2040. However, product liability premium will likely go up for the manufacturer companies who design and build the vehicles and components.

Key Findings of Report:

- Responsibility for Collisions is shifting
- Difficult to underwrite new vehicles
- Must rewrite traffic and insurance regulations
- Opportunity to champion safety gains

Recommendations:

- Champion action to reduce collisions
- Assess the emerging policy issues
- Monitor developments elsewhere
- Clarify liability and modify wordings
- Work with regulators
- Collect data to support underwriting
- Communicate that costs drive pricing

You can download Paul's full report at: www.insuranceinstitute.ca/research

Respectfully Submitted
Leslie Campbell, CIP, CAIB Hons

CONGRATULATIONS!!! – MEMBERS IN THE NEWS

Jenn Windle, BBA started her new career as a Commercial Underwriter with Portage Mutual Insurance on October 29th. Congratulations Jenn, NSIWA wishes you all the best in your new endeavour!!



If you know of an NSIWA member who has made a career change, please let us know tamara.higgins@avisbudget.com

NOVA SCOTIA INSURANCE WOMEN'S ASSOCIATION
EXECUTIVE OFFICERS
2018 – 2019

PAST PRESIDENT	Tamara Higgins Avis Budget Group 111 Selfridge Way Enfield, NS B2T 0C1	P: 902-492-7561 C: 902-717-0961 tamara.Higgins@avisbudget.com
PRESIDENT	Paula Creelman Portage Mutual Insurance 224-1595 Bedford Hwy. Bedford, NS B4A 3Y4	P: 902-835-1054 C: 902-252-9005 pcreelman@portagemutual.com
1 ST VICE PRESIDENT	Diana Vardy Travelers Canada 300-100 Venture Run Dartmouth, NS B3B 0H9	P: 902-491-2484 C: 902-401-9418 dvardy@travelers.com
2 ND VICE PRESIDENT	Jennifer Poirier, CIP, BBA Intact Insurance 200-20 Hector Gate Dartmouth, NS B3B 0K3	P: 1-866-464-2424 Ext 50298 Jennifer.poirier@intact.net
TREASURER	Patti McKee, CIP Intact Insurance 200-20 Hector Gate Dartmouth, NS B3B 0K3	P: 902-420-1732 Ext 50194 patti.mckee@intact.net
SECRETARY	Sarah Sampson, BBA, CIP Portage Mutual Insurance 224-1595 Bedford Hwy. Bedford, NS B4A 3Y4	P: 902-835-1054 C: 902-489-3785 ssampson@portagemutual.com
DIRECTOR	Amber MacInnis, B.A., CIP Amber MacInnis & Assoc Inc 7071 Bayers Rd., Suite 272 Halifax, NS B3L 2C2	P: 902-453-7900 amber_macinnis@cooperators.ca
DIRECTOR	Debby Johnson, FCIP, CRM Current Insurance 302-5657 Spring Garden Rd., Box 36010 Halifax, NS B3J 3S9	P: 902-429-4242 Ext 114 djohnson@currentinsurance.ca
DIRECTOR	Leslie Campbell, CIP, CAIB (Hons) Salvatore Insurance 2-1 Pinehill Drive Lower Sackville, NS B4C 1N4	P: 902-865-4297 Ext 108 lesliec@salvatoreinsurance.ca
CAIW DIRECTOR	Lana Kenny, CIP Travelers Canada 300-100 Venture Run Dartmouth, NS B3B 0H9	P: 902-492-5730 lkenny@travelers.com

NSIWA Executive 2018-2019

COMMITTEE	COMMITTEE CHAIRS	COMPANY	EMAIL	PHONE
Archive & Historian	Tamara Higgins	Avis Budget Group	Tamara.Higgins@avisbudget.com	902-492-7561
Audit	Lana Kenny	Travelers Canada	lkenny@travelers.com	902-492-5730
	Leslie Campbell	Salvatore Insurance	Lesliec@salvatoreinsurance.ca	902-865-4297
	Annie Martin	Aviva Canada	Annie.martin@aviva.com	902-463-3109
Budget & Finance	Patti McKee	Intact Insurance	Patti.Mckee@intact.net	902-420-1732 ext 50194
Bulletin	Lynne Gerhardt	CAA Insurance	lger@caasco.ca	902-229-3478
CAIW Director	Lana Kenny	Travelers Canada	lkenny@travelers.com	902-492-5730
Cancer Crusade	Leslie Campbell	Salvatore Insurance	Lesliec@salvatoreinsurance.ca	902-865-4297
Constitution & Bylaws	Deb MacDougall	Travelers Canada	dmacdoug@travelers.com	902-492-5710
Convention 2019	Joyce Jennings	Retired	jjenni@ns.sympatico.ca	902-455-8652
Co-ordination & Planning	Jennifer Poirier	Intact Insurance	Jennifer.poirier@intact.net	1-866-464-2424 ext 50298
Corresponding Secretary	Sarah Sampson	Portage Mutual Insurance	ssampson@portagemutual.com	902-835-1054
Education	Diana Vardy	Travelers Canada	dvardy@travelers.com	902-491-2484
Fellowship Fund	Debby Johnson	Current Insurance	Djohnson@currentinsurance.ca	902-492-4242 ext 114
Golf Day 2018	Lynne Gerhardt	CAA Insurance	lger@caasco.ca	902-229-3478
	Amber MacInnis	Amber MacInnis & Associates Inc	Amber_Macinnis@cooperators.ca	902-453-7900
Insurance Woman of the Year	Colleen Sampson	Retired	cmsampson@bellaliant.net	902-443-0087
Life Membership	Colleen Sampson	Retired	cmsampson@bellaliant.net	902-443-0087
Long Range Planning	Colleen Sampson	Retired	cmsampson@bellaliant.net	902-443-0087
Membership/Mailing List/ Marketing	Tamara Higgins	Avis Budget Group	Tamara.Higgins@avisbudget.com	902-492-7561
Nominations	Tamara Higgins	Avis Budget Group	Tamara.Higgins@avisbudget.com	902-492-7561
Parliamentarian	Gil Theriault	Retired	gilberte@ns.sympatico.ca	902-434-5517
President	Paula Creelman	Portage Mutual Insurance	pcreelman@portagemutual.com	902-835-1054
Public Relations/Publicity & Website/Marketing	Tracey Down	Portage Mutual Insurance	tdown@portagemutual.com	902-835-1054
Public Speaking/Contest	Diane Penney	Retired	Diane.penney@icloud.com	902-865-3422
Special Awards	Stephanie Nairn	Intact Insurance	stephanie.nairn@intact.net	1-877-667-3423 ext 50242
	Kim Smythe	Economical Insurance	kim.smythe@economical.com	902-835-8967 ext 46473
Ways & Means	Genevieve MacEachern	Ecclesiastical Insurance	gmaceachern@eccles-ins.com	902-482-4551
	Cheryl Pope	The Guarantee Co North America	Cheryl.Pope@theguarantee.com	902-425-4700 ext 35202
	Jennifer Love	The Guarantee Co North America	Jennifer.Love@theguarantee.com	902-425-4700 ext 35204
Wine & Cheese	Jerri Burke	Travelers Canada	jburke5@travelers.com	902-492-5732