By: Senator(s) Hewes

To: Insurance; Judiciary

SENATE BILL NO. 2811

AN ACT TO CREATE THE MISSISSIPPI CONSUMER CHOICE IN MOTOR 1 2 VEHICLE INSURANCE ACT; TO DEFINE CERTAIN TERMS; TO CREATE A SYSTEM 3 OF MOTOR VEHICLE INSURANCE THAT OFFERS A CHOICE OF METHODS OF PROTECTION AGAINST LOSSES FROM PERSONAL INJURY ARISING OUT OF THE 4 5 MAINTENANCE OR USE OF MOTOR VEHICLES; TO ABOLISH TORT LIABILITY IN CERTAIN CASES; TO PROHIBIT STACKING OF COVERAGES; TO AUTHORIZE THE 6 COMMISSIONER OF INSURANCE TO ADOPT RULES AND REGULATIONS FOR THE 7 ADMINISTRATION OF THE ACT; AND FOR RELATED PURPOSES. 8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI: 9 SECTION 1. Title. This act may be cited as the Mississippi 10 Consumer Choice in Motor Vehicle Insurance Act. 11 12 SECTION 2. Statement of Purpose. (1) Controlling Provisions. To the extent the provisions of Section 2 of this act 13 14 differ from the provisions of Section 3 of this act and thereafter, the provisions of the subsequent sections control. 15 16 (2) Existing Law. Under existing law, the ability of a person to recover losses incurred as a result of a motor vehicle 17 18 accident is limited by factors over which the accident victim has 19 no control. The recovery is dependent on, among other things, the 20 conduct of the other driver, the amount of liability insurance (if any) carried by the other driver, and the financial resources (if 21 22 any) of the other driver. Under the current system, two (2) individuals who have received identical injuries may recover 23 24 markedly different amounts. Therefore, many individuals, 25 particularly the large number of motorists involved in one-car accidents, receive no compensation for their losses at all. 26 27 (3) The Right to Choose. This bill gives motorists (a) the right to choose the kinds of personal injury protection which will 28

be available to themselves and their family members in case of an

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automobile accident, and (b) the right to choose the amount of 30 31 financial protection they deem appropriate and affordable for themselves and their families. Instead of being forced to buy 32 33 traditional tort liability insurance to protect strangers, 34 motorists will have the opportunity to buy a new Personal Injury 35 Protection coverage to protect themselves and their family members in the event of a motor vehicle accident. As an alternative, they 36 37 will have the right to elect traditional Tort Liability Insurance which will include an inverse liability coverage (entitled "Tort 38 Maintenance Coverage") to provide protection in the event of 39 40 injury caused by someone who has elected the Personal Injury 41 Protection Option.

42 (4) Tort Liability Insurance versus Personal Injury43 Protection coverage.

Motorists who choose the Tort Liability Insurance 44 (a) and who are involved in an accident with another motorist will 45 retain the tort liability system, except that, based on fault, (i) 46 47 they can be sued by those who choose personal injury protection but only for damages in excess of the limits of the Personal 48 49 Injury Protection policy and (ii) they cannot claim against those 50 who choose Personal Injury Protection coverage except for uncompensated economic loss in excess of the limits of their own 51 52 first party Tort Maintenance Coverage.

(b) Motorists who choose Personal Injury Protection coverage established by this act and who are involved in an accident with a motorist who has chosen traditional Tort Liability Insurance will be promptly compensated for their own losses, without regard to fault, and can also claim against the other motorist based on fault for uncompensated economic loss in excess of the limits of the Personal Injury Protection policy.

60 (c) Two (2) motorists who each choose Personal Injury 61 Protection coverage and who are involved in an accident with each 62 other will be promptly compensated under their own policies for 63 their own losses without regard to fault. In this situation, the 64 two (2) motorists who have chosen the Personal Injury Protection 65 coverage lose the right to claim and sue for "pain and suffering" 66 and other noneconomic loss, but if either suffers economic loss in

67 excess of his/her policy's benefit levels, that person retains the 68 right to claim and sue for unreimbursed economic loss based on 69 fault.

70 (d) When two motorists who each choose Tort Liability
71 Insurance are involved in an accident with each other, their
72 rights against each other are unaffected by this act.

73 If a motorist who has chosen Tort Liability (e) 74 Insurance is involved in an accident with an uninsured motorist, 75 the policyholder will be compensated for losses under the 76 uninsured motorist provisions of his/her own policy based on fault 77 and has the right to sue for damages. The uninsured motorist 78 forfeits the right to claim for noneconomic loss against the motorist who has chosen Tort Liability Insurance unless the tort 79 liability insured was driving under the influence of alcohol or 80 illegal drugs or was guilty of intentional misconduct. 81

82 (f) If a motorist who has chosen the Personal Injury 83 Protection policy is involved in an accident with an uninsured motorist, the policyholder will be promptly compensated for losses 84 85 without regard to fault under his/her Personal Injury Protection policy, and has the right to claim and sue the uninsured motorist 86 87 for damages based on fault. The uninsured motorist forfeits the right to claim for noneconomic loss against the motorist who has 88 89 chosen the Personal Injury Protection policy except when the 90 Personal Injury Protection Insured was driving under the influence 91 of alcohol or illegal drugs or was guilty of intentional 92 misconduct.

93 (5) Property Damage. A motorist who purchased a Personal 94 Injury Protection policy will thereby procure Ten Thousand Dollars 95 (\$10,000.00) of property damage liability insurance as part of 96 his/her mandatory coverage. In order to keep the cost of property 97 damage liability insurance as low as possible, persons who have 98 chosen Personal Injury Protection policies have no cause of action 99 for damage to a motor vehicle to the extent such vehicle is

100 insured against collision damage in accidents involving other 101 Personal Injury Protection Insureds.

102 <u>SECTION 3.</u> **Definitions.** As used in this act, unless the 103 context requires otherwise, the following terms have the meaning 104 ascribed to them in this section:

(a) "Accidental bodily injury" means bodily injury,
sickness or disease, including death resulting therefrom, arising
out of the operation or use of a motor vehicle, or while occupying
such vehicle, which is accidental as to the person injured.

109 "Added personal injury protection" means coverage (b) 110 for additional personal injury protection. Added personal injury 111 protection coverage includes benefits with an aggregate limit of One Hundred Thousand Dollars (\$100,000.00) per person (including 112 Thirty Thousand Dollars (\$30,000.00) of Basic Personal Injury 113 Protection benefits), to consist of medical expenses, up to One 114 115 Thousand Dollars (\$1,000.00) per week of loss of income from work, 116 up to Three Hundred Dollars (\$300.00) per week of replacement services loss, and if death is proximately and directly caused by 117 118 a motor vehicle and occurs within one (1) year of the date of the accident, a death benefit of Twenty-five Thousand Dollars 119 120 (\$25,000.00) payable to the dependents, if any, or, if none, to 121 the heirs or estate of the decedent. Nothing contained in this 122 section prevents a Personal Injury Protection Insurer from also 123 making available other additional compensation benefits in coverages and amounts other than those prescribed in this section. 124 125 No applicant or insured may be required to purchase a lesser 126 amount than those prescribed in this paragraph (b).

(c) "Basic Personal Injury Protection" means coverage,
for Personal Injury Protection which provides benefits for loss
resulting from accidental bodily injury. Basic Personal Injury
Protection benefits consist of the following elements with an
aggregate limit of Fifteen Thousand Dollars (\$15,000.00) per
person:

133 (i) Medical expenses, subject to a deductible of Two Hundred Fifty Dollars (\$250.00) applicable only to the named 134 135 insured and to resident relatives of the named insured; (ii) Loss of income from work, not to exceed Two 136 137 Hundred Dollars (\$200.00) per week; 138 (iii) Replacement services loss, not to exceed One 139 Hundred Dollars (\$100.00) per week; (iv) A death benefit of Ten Thousand Dollars 140 (\$10,000.00), payable to the dependents, if any or, if none, to 141 142 the heirs or estate of the decedent, if the death of an injured person is directly and proximately caused by an accidental bodily 143 144 injury and occurs within one (1) year of the date of such injury. 145 "Cause of action for injury" means a claim for (d) 146 accidental bodily injury for economic or noneconomic loss, or 147 both, caused by the negligent conduct or intentional misconduct of 148 another person (whether directly or vicariously), and includes a 149 claim by any person other than a person suffering accidental bodily injury based on such injury, including, but not limited to, 150 151 loss of consortium, companionship, or any other derivative claim. 152 "Collateral sources" means all benefits one (e) 153 receives or is entitled to receive as reimbursement of loss 154 because of an injury from sources other than Personal Injury 155 Protection benefits. In such calculation, no subtraction is made 156 for amounts one receives or is entitled to receive: 157 (i) In discharge of familial obligations or 158 support; (ii) By reason of another's death, except that 159 160 there is subtracted from loss in calculating net loss those 161 amounts received from social security or workers' compensation; or (iii) As gratuities. In no event is any payment 162 163 made by an employer to his employee or an employee's survivors to be regarded as a gratuity. 164 165 (f) "Commissioner" means the Commissioner of Insurance

166 of the State of Mississippi.

167 (g) "Coverage" means a policy or plan for insurance168 benefits.

(h) "Dependent" means all persons related to another person by blood, marriage, adoption or otherwise who reside in the same household as such person at the time of the accidental bodily injury, and receive financial or services support from him or her.

173 "Driving under the influence of alcohol or illegal (i) 174 drugs" refers to such conduct when it causes or substantially 175 contributes to the harm claimed for. A driver is deemed to be driving under the influence of alcohol for the purposes of this 176 177 act only if a test of blood, breath or urine as called for under the laws of this state shows an illegal blood or breath alcohol 178 content as defined by state law, or if a driver refuses to undergo 179 180 such tests as called for under the laws of this state.

(j) "Economic loss" means medical expenses, loss of income from work, and replacement services loss incurred by or on behalf of an injured person as the result of an accidental bodily injury to such injured person.

185 (k) "Fault" is encompassed by the definition of "tort186 liability."

(1) "Injured person" means a person who sustains
accidental bodily injury when eligible for benefits under a policy
providing personal injury protection or under the assigned claims
plan under Section 23 of this act. The term also includes where
appropriate the personal representative of an estate.

192 "Intentional misconduct" means conduct whereby harm (m) 193 is intentionally caused or attempted to be caused by one who acts or fails to act for the purpose of causing harm or with knowledge 194 195 that harm is substantially certain to follow when such conduct 196 caused or substantially contributed to the harm claimed for. А person does not intentionally cause or attempt to cause harm (i) 197 198 merely because his act or failure to act is intentional or done

199 with the realization that it creates a grave risk of causing harm 200 or (ii) if the act or omission causing bodily harm is for the 201 purpose of averting bodily harm to oneself or another person.

202 "Loss of income from work" means eighty percent (n) 203 (80%) of loss of income an injured person would have earned through work during the period of disability, reduced by any 204 205 income from substitute work actually performed by the injured 206 person, or by any income the injured person would have earned in 207 available appropriate substitute work which such person was 208 capable of performing but unreasonably failed to undertake. Loss 209 of income from work does not include any loss after the death of 210 an injured person and payment for the period of disability is not 211 to exceed two (2) years from the date of the accident.

212 "Medical expenses" means reasonable expenses (0) incurred by an injured person for necessary medical, surgical, 213 214 X-ray, dental, ambulance, hospital, medical rehabilitation, and 215 professional nursing services and includes expenses for eyeglasses, hearing aids, and prosthetic devices. The words 216 217 "incurred by" include medical expenses incurred on behalf of an injured person by a parent or guardian if the injured person is a 218 219 minor or incompetent, or by a surviving spouse if the injured 220 person be deceased. Personal Injury Protection Insurers are 221 authorized to review medical expenses prior to, during, and after 222 the course of treatment of an injured person, to assure that they are both reasonable and necessary. Under Basic Personal Injury 223 224 Protection and under Added Personal Injury Protection, medical 225 expenses are payable for services provided to the injured person within two (2) years of the date of accidental bodily injury. 226 227 "Medical expenses" does not include:

(i) that portion of the charge for a room in any
hospital, clinic, convalescent or nursing home, extended care
facility or any similar facility in excess of the reasonable and
customary charge for semi-private accommodations unless medically

232 required; or

(ii) treatment, services, products or procedures that are experimental in nature, for research or not primarily designed to serve a medical purpose, or not commonly and customarily recognized throughout the medical profession and within the United States as appropriate for treatment of accidental bodily injury.

(p) "Medical rehabilitation" means rehabilitation
services reasonably necessary and designed to reduce the
disability and dependence of an injured person and to restore such
person, to the extent reasonably possible, to his or her
pre-accident level of physical functioning.

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(q) "Motor vehicle" means:

(i) a vehicle of a kind required to be registeredunder the laws of this state relating to motor vehicles, or

(ii) a vehicle with four (4) or more load bearing wheels, including a trailer, designed for operation upon a public roadway by other than muscular power, except a vehicle used exclusively upon stationary rails or tracks. "Public roadway" means a way open to the use of the public for purposes of automobile travel.

(r) "Noneconomic loss" means any loss other than economic loss and includes, but is not necessarily limited to, pain, suffering, inconvenience, mental anguish, and all other noneconomic damage whether otherwise recoverable under the law of this state or not. Noneconomic loss does not include economic loss caused by pain and suffering or by physical impairment.

(s) "Occupying" means to be in or upon a motor vehicle or engaged in the immediate act of entering into or alighting from the motor vehicle.

(t) "Operation or use" means operation or use of a motor vehicle as a motor vehicle. Operation or use does not include manufacturing, sale or maintenance of a motor vehicle,

265 including repairing, servicing, washing, loading or unloading, 266 unless the conduct occurs while occupying it.

267 "Owner" means the person or persons in whose name (11) 268 the motor vehicle has been registered. If no registration is in 269 effect at the time of an accident involving the motor vehicle, 270 "owner" means the person or persons holding legal title thereto, 271 or in the event the motor vehicle is the subject of a security 272 agreement or lease with option to purchase with the debtor or lessee having the right of possession, "owner" means the debtor or 273 274 lessee. Owner does not include the United States of America or any agency thereof except with respect to motor vehicles for which 275 276 it has elected to provide insurance.

277 (v) "Person" includes an organization, public or278 private.

(w) "Personal Injury Protection" means coverage
providing Basic (and, if purchased, Added) benefits, regardless of
fault, for loss resulting from accidental bodily injury.

(x) "Personal Injury Protection Insured" means, the 282 283 first person identified by name as an insured under a policy providing Personal Injury Protection benefits, the spouse of such 284 285 person if a resident of household, and any other resident relative 286 of the same household, and, with respect to accidents within this 287 state, any person who sustains accidental bodily injury while 288 occupying or through being struck by a motor vehicle insured for Personal Injury Protection, unless such person is insured pursuant 289 290 to the Tort Liability Insurance option provided under Section 4 of this act or is an uninsured motorist. 291

(y) "Personal Injury Protection Insurer" means an
insurer or qualified self-insurer providing Personal Injury
Protection benefits.

(z) "Replacement services loss" means expenses
reasonably incurred in obtaining ordinary and necessary services
from others, not members of the injured person's household, in

298 lieu of the services the injured person would have performed for 299 the benefit of the household. Replacement services loss are not 300 due if the injured person is entitled to receive Personal Injury 301 Protection benefits for loss of income from work for the same time 302 period. Replacement services loss does not include any loss after 303 the death of an injured person, and payment for the period of 304 disability under Basic Personal Injury Protection is not to exceed 305 two (2) years from the date of accidental bodily injury.

306 (aa) "Resident relative" means a person related to the 307 owner of a motor vehicle by blood, marriage, adoption, or 308 otherwise, and residing in the same household. A person resides 309 in the same household if he or she usually makes his or her home 310 in the same family unit, though temporarily living elsewhere.

311 (bb) "Tort liability" means the legal obligation for 312 payment of damages caused by one adjudged to have committed a 313 tort.

314 (cc) "Tort Maintenance Coverage" means coverage under 315 which a person who has chosen Tort Liability Insurance coverage 316 when involved in an accident with a Personal Injury Protection 317 insured, claims for tort liability against his/her own insurer to 318 the extent of such coverage.

319 "Uncompensated economic loss" means that portion (dd) 320 of economic loss arising out of an accidental bodily injury of an 321 injured person which exceeds the benefits provided by (i) Personal Injury Protection coverage (except for loss on account of the 322 323 application of a deductible under such a policy), or (ii) Tort Maintenance Coverage, and (iii) collateral sources. Such loss is 324 recoverable under the same terms and limitations as under Added 325 326 Personal Injury Protection, but shall not be subject to the aggregate limit of liability of such coverage. 327

328 (ee) "Uninsured motorist" means the owner, or a
329 dependent thereof, of a motor vehicle uninsured for either Basic
330 Personal Injury Protection or Tort Liability Insurance at the

331 limits prescribed by this state's financial responsibility law, or 332 higher while such person is operating, using or occupying the 333 owned but uninsured motor vehicle.

334 <u>SECTION 4.</u> Insurance Requirements. Every motor vehicle 335 required to be registered in this state can be insured:

336 (a) For Basic Personal Injury Protection and the
 337 property damage liability mandated under this state's financial
 338 responsibility law, or

339 (b) For bodily injury and property damage liability as340 described in this state's financial responsibility law.

341 An insurance policy written by a Personal Injury (C) 342 Protection Insurer pursuant to this act to provide Basic Personal Injury Protection is deemed to include all Basic Personal Injury 343 344 Protection coverage required by this act. Coverage under Basic 345 Personal Injury Protection meets the requirements of this state's 346 financial responsibility law even though such policy does not 347 provide protection against bodily injury liability claims arising out of accidents within this state. 348

349 (d) A Personal Injury Protection Insurer shall make
350 available, at the option of a named insured, Added Personal Injury
351 Protection on a policy providing Basic Personal Injury Protection.
352 The exercise of the option not to purchase Added Personal Injury
353 Protection by a named insured or an applicant shall be binding on
354 all Personal Injury Protection insureds covered under the policy.

355 (e) A Personal Injury Protection insurer is authorized
 356 to write Personal Injury Protection without any deductible or
 357 subject to reasonable deductibles pursuant to Section 28 of this
 358 act.

(f) A Personal Injury Protection Insurer shall also make available a pain and suffering coverage, pursuant to regulations issued under Section 28 of this act, with a limit of Fifty Thousand Dollars (\$50,000.00), payable if the injured person sustains an accidental bodily injury resulting in death or

364 dismemberment or significant and permanent loss of important 365 bodily function or significant and permanent scarring or 366 disfigurement. Nothing contained herein shall preclude any 367 insurer from offering higher limits of pain and suffering coverage 368 or providing broader coverage.

369 (g) In addition to Added Personal Injury Protection 370 coverages, a Personal Injury Protection insurer shall make 371 available other insurance coverages with the approval of the 372 commissioner. Such coverages shall include, but are not limited 373 to, bodily injury liability insurance, collision coverage, and 374 comprehensive physical damage coverage.

375 (h) An insurance policy written by a motor vehicle 376 liability insurer pursuant to this act to provide coverage under 377 the Tort Liability Insurance option shall include Tort Maintenance Coverage for accidental bodily injury of an insured under the Tort 378 379 Liability Insurance option, caused by the negligence, in whole or 380 in part, of a Personal Injury Protection insured. Such insurance will pay such damages as might have been recovered against a 381 382 Personal Injury Protection insured but for the exemption from tort liability provided by Section 14 of this act up to the liability 383 384 limits of the Tort Maintenance Coverage.

385 SECTION 5. Required Limits of Liability Coverage. Every 386 owner who chooses the Tort Liability Insurance Option must carry 387 liability insurance in an amount equal to the minimum liability limits for accidental bodily injury and property damage as 388 389 specified by this state's financial responsibility law. Insurers 390 providing coverage for such persons shall include Tort Maintenance Coverage required in Section 4 of this act in all policies 391 providing primary coverage for legal liability for motor vehicles 392 393 at limits equal to the bodily injury liability coverage carried by 394 the Tort Maintenance Coverage insured.

395 <u>SECTION 6.</u> Election of Personal Injury Protection Option or
 396 Tort Maintenance Coverage Option. Upon the earliest and first

397 renewal of any applicable motor vehicle liability insurance policy on or after the effective date of this act, or before the issuance 398 399 of a policy required by this act, a choice must be made of either the Tort Maintenance Coverage option or the Personal Injury 400 401 Protection option. In order to minimize conflict between the two (2) options, all motor vehicle insurers are authorized to maintain 402 403 underwriting rules which encourage uniformity within a household. 404 A choice made pursuant to this act is binding with respect to any continuation, renewal, or reinstatement of an applicable motor 405 406 vehicle insurance policy, and continues with respect to any policy 407 which extends, supersedes, or replaces the policy unless the named 408 insured subsequently makes a different choice in writing.

409 <u>SECTION 7.</u> Application of Coverage. (1) If there is only 410 one (1) vehicle owned by the named insured or any member of the 411 household of the named insured, the choice made by the named 412 insured is applicable to his or her spouse and to any resident 413 relatives of the household. That choice also applies to all 414 persons insured under the policy while occupying other motor 415 vehicles or if struck by another motor vehicle.

(2) 416 If there is more than one (1) motor vehicle in the 417 household, and the named insured chooses different options for 418 different vehicles, the choice applicable to the vehicle in use 419 governs not only the named insured, but also all other persons 420 insured under the policy whose injury arises out of the use of 421 that motor vehicle unless the named insured has specifically 422 identified family members who shall be Personal Injury Protection Insureds. If the named insured is injured while occupying or 423 424 through being struck by another motor vehicle, the Tort 425 Maintenance Coverage option shall be deemed applicable and 426 Personal Injury Protection benefits shall not be provided. If any 427 other person insured under two (2) or more policies covering different options is injured while occupying or through being 428 429 struck by another motor vehicle, and that insured has not been

430 specifically identified by the named insured as being a Personal 431 Injury Protection insured at all times, the Tort Maintenance 432 Coverage option shall be deemed applicable and personal benefits 433 shall not be provided.

434 (3) If there are two (2) or more vehicles in the household, 435 each owned by different persons, each such person shall have the right to choose either the Personal Injury Protection option or 436 437 the Tort Maintenance Coverage option for himself or herself. That 438 person's choice shall determine that person's rights no matter 439 which vehicle he or she is occupying or which vehicle he or she 440 might be struck by. The rights of all members of the household 441 who are not motor vehicle owners shall be governed by the choice 442 applicable to the motor vehicle which they were occupying at the 443 time of the injury, if that vehicle was owned by a member of the 444 household.

445 (4) In the event of a bodily injury occurring prior to the 446 effective date of a required choice, if there are conflicting 447 choices within the household creating questions as to the 448 applicability of the Personal Injury Protection option or the Tort Maintenance Coverage option, or if there is a failure to make a 449 choice as required by this act, Tort Maintenance insurance will be 450 451 applicable, and Personal Injury Protection benefits will not be 452 payable.

453 SECTION 8. Geographic Application of Personal Injury 454 Protection Policies. A Personal Injury Protection Insurer shall 455 pay Personal Injury Protection benefits for accidental bodily 456 injury of a Personal Injury Protection Insured sustained within 457 the United States of America, its territories or possessions, or 458 Canada. Any Personal Injury Protection insurance policy issued to 459 satisfy the financial responsibility law of this state shall be 460 conformed to satisfy the financial responsibility law of any 461 jurisdiction mentioned above in which the insured motor vehicle is 462 being operated with respect to an accident occurring in that

463 jurisdiction.

464 <u>SECTION 9.</u> Persons Not Entitled to Personal Injury 465 Protection Benefits. A Personal Injury Protection Insurer has no 466 obligation to provide Personal Injury Protection benefits to or on 467 behalf of any injured person who:

(a) Was involved in a motor vehicle accident while
committing a felony or while voluntarily occupying a motor vehicle
known by him or her to be stolen;

471 (b) Was driving under the influence of alcohol or472 illegal drugs;

(c) Is injured while occupying a motor vehicle owned by, or furnished or available for the regular use of the injured person, or the injured person's resident spouse or relative, if such motor vehicle is not described in the policy under which a claim is made, or is not a newly acquired or replacement motor vehicle covered under the terms of the policy;

479 (d) Was operating or occupying a motor vehicle with480 three (3) or fewer load bearing wheels;

(e) Was guilty of intentional misconduct. (If a person
dies as a result of intentional misconduct aimed at himself or
herself, his or her survivors are not entitled to Personal Injury
Protection for loss arising from the decedent's injury or death.);

485 (f) Is injured pursuant to the Tort Maintenance486 Coverage option described in Section 4(h) of this act, or

487 (g) Is an uninsured motorist, or a dependent of an
488 uninsured motorist who is not otherwise insured for Personal
489 Injury Protection.

490 Nothing contained herein prevents a Personal Injury 491 Protection Insurer from including in Personal Injury Protection 492 coverage persons mentioned in this section, but only if such is 493 done by language clearly manifesting an intent to provide such 494 coverage.

495 <u>SECTION 10.</u> Payment of Personal Injury Protection Benefits.

496 Personal Injury Protection benefits when due are payable at the 497 option of the Personal Injury Protection Insurer to any of the 498 following:

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(a) The injured person;

500 (b) The parent or guardian of the injured person, if 501 the injured person is a minor or incompetent;

502 (c) A dependent survivor, executor or administrator of 503 the injured person; or

504 (d) Any other person or organization rendering the505 services for which payment is due.

506 SECTION 11. Multiple Coverages. Regardless of the number of 507 motor vehicles involved, persons covered, claims made, motor 508 vehicles or premiums shown on the policy or premiums paid, in no 509 event shall the coverage limits under a motor vehicle insurance policy for any one (1) coverage be added to, combined with, or 510 511 otherwise stacked upon any other coverage limit to determine the 512 maximum limit of coverage available to an injured person for any one (1) accident. Unless the contract clearly provides otherwise, 513 514 policies or plans may also provide that if two (2) or more 515 policies, plans, or coverages apply equally to the same accident, 516 the highest limit of liability applicable shall be the maximum 517 amount available to an insured person under any one (1) of such 518 policies. Each such policy, plan or coverage shall bear its 519 proportionate share of the loss.

520 <u>SECTION 12.</u> **Priority of Benefits.** (1) Persons entitled to 521 Basic Personal Injury Protection benefits required or provided 522 pursuant to this act are entitled to at least the Personal Injury 523 Protection coverage under the policy insuring them and shall claim 524 such benefits from insurers in the following order of priority up 525 to the limits of Personal Injury Protection in the listed 526 category:

527 First: The Personal Injury Protection covering a motor 528 vehicle involved in the accident, if the person injured was an

529 occupant of or was struck by such motor vehicle at the time of the 530 accident.

531 Second: The Personal Injury Protection under which the 532 injured person is or was an insured.

533 Third: If no Personal Injury Protection is available under 534 the above priorities, a person injured as a result of a motor 535 vehicle accident may claim benefits under the Assigned Claims Plan 536 pursuant to Section 23 of this act, unless unqualified for 537 benefits under Section 6 of this act.

538 If two (2) or more insurers are obligated to pay (2)Personal Injury Protection benefits in accordance with the 539 540 priorities set out in this section, the insurer against whom the 541 claim is first made shall pay the claim as if wholly responsible, 542 and may thereafter recover contribution pro rata from any other 543 insurer at the same priority level for the cost of the payments 544 and the processing of the claim. For purposes of this section, an 545 unoccupied parked motor vehicle is not a motor vehicle involved in 546 an accident unless it was parked in such a way as to cause 547 unreasonable risk of injury.

548 <u>SECTION 13.</u> Coordination of Benefits. A Basic Personal 549 Injury Protection Insurer has the primary obligation to indemnify 550 an injured person except to the extent of collateral sources paid 551 or payable to such person.

552 <u>SECTION 14.</u> Tort Rights and Legal Liability Under this Act. 553 (1) No Personal Injury Protection Insured has a cause of 554 action for injury against, nor is liable to, any other person on 555 account of an accident occurring within this state, except as 556 provided in subsections (2), (3), (4) and (5) and except for 557 injury caused other than by the ownership, operation, or use of a 558 motor vehicle.

(2) An injured person has a cause of action for accidental
bodily injury against any party driving under the influence of
alcohol or illegal drugs or guilty of intentional misconduct. Any

562 party providing Personal Injury Protection or Tort Maintenance 563 Coverage benefits to such injured person has a right of 564 subrogation under this subsection (2).

(3) A Personal Injury Protection Insured has a cause of
action for accidental bodily injury for uncompensated economic
loss against, and is liable for same, to, any person insured under
Personal Injury Protection or Tort Maintenance Coverage.

569 (4) Benefits under subsection (3) include reasonable 570 expenses incurred by the party in collecting such benefits, 571 including a reasonable attorney's fee for advising and 572 representing a claimant for such benefits. No part of the fee for 573 representing such party in connection with such benefits is a charge against benefits otherwise due the claimant, and no 574 575 additional fee may be charged by an attorney to any party in 576 collecting such benefits. All or part of the fee may be deducted 577 from the benefits otherwise due the claimant if any significant 578 part of the claim for such benefits was fraudulent or so excessive as to have no reasonable foundation. In any action brought 579 580 against an injured person by a Personal Injury Protection Insurer, 581 the court may award the injured person's attorney a reasonable 582 attorney's fee for defending the action if the injured person was 583 the prevailing party.

(5) A Personal Injury Protection Insured whose motor vehicle
is damaged by the fault of another Personal Injury Protection
Insured has a cause of action for damage to such motor vehicle
only to the extent such motor vehicle is not covered by collision
insurance.

589 (6) A person covered by Tort Maintenance Coverage has a590 cause of action for injury against another person so covered.

591 (7) An uninsured motorist has no cause of action against a 592 Personal Injury Protection Insured for (a) injury other than for 593 uncompensated economic loss and (b) damage to property except 594 damage in excess of the property damage liability limits mandated

595 under this state's financial responsibility law unless the 596 Personal Injury Protection Insured was driving under the influence 597 of alcohol or illegal drugs or was guilty of intentional 598 misconduct. An uninsured motorist remains liable in tort to a 599 person insured for Personal Injury Protection benefits for 600 noneconomic loss, economic loss, and property damage.

601 <u>SECTION 15.</u> Insurer's Right of Subrogation. There is no 602 right of subrogation or contribution by a Personal Injury 603 Protection Insurer except under Sections 14, 16 and 23 of this 604 act, and except that a Personal Injury Protection Insurer is 605 subrogated, to the extent of its obligations, to all of the rights 606 of its Personal Injury Protection Insured with respect to an 607 accident caused in whole or in part by:

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(a) The negligence of an uninsured motorist;

609 (b) The negligence of the owner or operator of a motor 610 vehicle having a gross weight of seven thousand (7000) pounds or 611 more;

612 (c) Driving under the influence of alcohol or illegal613 drugs;

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(d) Intentional misconduct; or

615 Any person who is not affected by the limitations (e) on tort rights and liabilities pursuant to Section 14 of this act. 616 SECTION 16. Personal Injury Protection Benefits and Causes 617 of Action for Injury. No subtraction is made against Personal 618 619 Injury Protection benefits due because of the value of a cause of 620 action for injury preserved under this act, except that after recovery is realized under such cause of action, a subtraction is 621 622 made to the extent of the net recovery, exclusive of reasonable 623 attorneys' fees and other reasonable expenses incurred in 624 effecting the recovery. If Personal Injury Protection benefits 625 have already been received, the recipient thereof shall repay to 626 the insurer paying Personal Injury Protection benefits out of such 627 recovery a sum equal to the Personal Injury Protection benefits

628 received but not more than the realized net recovery, and the 629 insurer shall have a lien on the recovery to this extent. Anv 630 remainder of the net recovery from such a cause of action applies 631 periodically against loss as it accrues, until an amount equal to 632 the net recovery under such a cause of action has been subtracted. 633 SECTION 17. Personal Injury Protection Benefits Payable **Periodically.** Personal Injury Protection benefits are payable 634 635 monthly as loss accrues. Such benefits are overdue if not paid 636 within thirty (30) days after the Personal Injury Protection Insurer receives reasonable proof of the fact and the amount of 637 638 loss sustained, except that a Personal Injury Protection Insurer 639 may accumulate claims for periods not exceeding one (1) month, and 640 benefits are not overdue if paid within twenty (20) days after the period of accumulation. If reasonable proof is not supplied as to 641 642 the entire claim, the amount supported by reasonable proof is 643 overdue if not paid within thirty (30) days after such proof is received by the insurer, subject to the right of review specified 644 645 in Section 30 of this act. Any part or all of the remainder of the claim that is later supported by reasonable proof if overdue 646 647 if not paid within thirty (30) days after such proof is received by the insurer. For the purpose of calculating the extent to 648 649 which any benefits are overdue, payment is treated as made on the 650 date a draft or other valid instrument is placed in the United States mail in a properly addressed postpaid envelope, or, if not 651 652 so posted, on the date of delivery. Personal Injury Protection 653 benefits may be paid by the Personal Injury Protection Insurer 654 directly to persons supplying necessary products, services, or 655 accommodations to the injured person. If overdue benefits are 656 recovered against a Personal Injury Protection Insurer or are paid 657 by a Personal Injury Protection Insurer, the provisions of 658 subsection (5) of Section 14 of this act pertaining to expenses 659 and an attorney's fee apply. In addition, the insurer is 660 obligated to pay interest on the overdue payment at one hundred

661 fifty percent (150%) of the prime rate in effect at the time the 662 payment became overdue.

663 <u>SECTION 18.</u> Assignment or Garnishment of Personal Injury 664 Protection Benefits. (1) Personal Injury Protection benefits, 665 other than those for medical expenses, are exempt from 666 garnishment, attachment, execution, and any other process or claim 667 to the extent that wages or earnings are exempt under any 668 applicable law exempting wages or earnings from process or claims.

669 (2) An agreement for assignment of any right to Personal 670 Injury Protection benefits payable in the future other than 671 medical expenses is unenforceable except to the extent that such benefits are for the cost of products, services, or accommodations 672 673 provided or to be provided by the assignee or that benefits for 674 loss of income from work or replacement services are assigned to 675 secure payment of alimony, maintenance, or child support. Pain 676 and suffering coverage benefits may also be assigned.

677 SECTION 19. No Penalty for Claims for Personal Injury 678 Protection Benefits. An Insurer shall not cancel, fail to renew, or increase the premium of its Insured solely on account of the 679 680 Insured or any other injured person making a claim for Personal 681 Injury Protection benefits or for collision damage to the insured 682 vehicle. Violation of this section is punishable by a fine of One 683 Thousand Dollars (\$1,0000.00) per offense, such punishment to be 684 exclusive of all other remedies permitted by law.

685 SECTION 20. Limitation of Actions. Subject to the arbitration provisions which follow, if no Personal Injury 686 687 Protection benefits have been paid, an action therefore may be 688 commenced against the Personal Injury Protection Insurer not later 689 than two (2) years after the injured person suffers accidental 690 If Personal Injury Protection benefits have been bodily injury. 691 paid, an action for recovery of further benefits by either the injured person or another claimant may be commenced not later than 692 693 two (2) years after the last payment of benefits.

694 SECTION 21. Mental and Physical Examinations. (1) Whenever the mental or physical condition of an injured person is material 695 696 to any claim that has been made or may be made for past or future Personal Injury Protection benefits, the insured person shall 697 698 submit to reasonable mental or physical examinations by a physician or physicians designated by the insurer at a reasonably 699 700 convenient time and location, subject to regulations, if any, 701 promulgated by the commissioner. Personal Injury Protection 702 Insurers are authorized to include provisions of this nature in 703 policies providing Personal Injury Protection benefits.

(2) Where an insurer has requested of a person receiving Personal Injury Protection benefits that such person undergo medical or rehabilitation services, and such person unreasonably refuses to comply with such request, the insurer may, upon written notice, suspend all future such benefits until such person complies with that request.

710 <u>SECTION 22.</u> Verification of Entitlement to Benefits. (1)
711 Every employer shall furnish pertinent information on a form
712 approved by the commissioner regarding an employee who has filed a
713 claim for Personal Injury Protection benefits if a request is made
714 by an insurer providing such benefits under this section.

Every physician, hospital, clinic, or other medical 715 (2) 716 institution providing, before or after an injury resulting from a 717 motor vehicle accident upon which a claim for Personal Injury 718 Protection benefits is based, any products, services, or 719 accommodations in relation to that or any other injury, or in 720 relation to a condition claimed to be connected with that or any other injury shall, if requested to do so by the Personal Injury 721 722 Protection Insurer against whom the claim has been made, furnish a 723 written report of the history, condition, and treatment, and the 724 dates and costs of such treatment of the injured person. Such 725 information shall be provided together with a sworn statement that 726 the treatment or services rendered were reasonable and necessary

727 with respect to the injury sustained and identifying which portion 728 of the expenses for such treatment or services were incurred as a 729 result of such injury. Every such physician, hospital, clinic, or 730 other medical institution shall also promptly produce and permit 731 the inspection and copying of its records regarding such history, 732 condition, and treatment, and the dates and costs of treatment. 733 The sworn statement required under this section reads as follows:

734 "Under penalty of perjury, I declare that I have read 735 the foregoing and the facts alleged are true, to the best of 736 my knowledge and belief."

No cause of action for violation of a physician-patient privilege or invasion of the right of privacy is allowed against any physician, hospital, clinic, or other medical institution complying with the provisions of this section. The person requesting records and a sworn statement under this subsection (2) shall pay all reasonable costs connected therewith.

(3) In the event of any dispute regarding the Personal
Injury Protection Insurer's right to discovery of facts about an
injured person, if the dispute is not referred to arbitration
under Section 31 of this act, a court of record may enter an order
for such discovery as justice requires.

748 <u>SECTION 23.</u> Assigned Claims Plan. Insurers and qualified 749 self-insurers authorized to provide Personal Injury Protection 750 insurance under this act shall organize, participate in, and 751 maintain an assigned claims plan to provide Basic Personal Injury 752 Protection benefits to any person who is injured as a result of a 753 motor vehicle accident if:

(a) Basic Personal Injury Protection benefits are
payable but not applicable to the injury for some reason other
than those specified in Section 9 of this act; provided such
person shall have the right to reject Personal Injury Protection
benefits and to seek damages in tort. The election must be made
within ninety (90) days after the accident or ninety (90) days

760 after receiving written notice of the right of election.

(b) Basic Personal Injury Protection benefits are unavailable, in whole or in part, because of financial inability of an insurer to fulfill its obligations. Payments made by the Assigned Claims Plan pursuant to this paragraph (b) constitute covered claims of the Insurance Guaranty Association under the laws of this state.

767 (c) The Assigned Claims Plan shall provide such rules 768 and agreements for the operation of the plan and for the equitable 769 distribution of costs as approved by the commissioner. Any claim 770 brought through the Assigned Claims Plan is assigned to an insurer 771 in accordance with such rules and agreements, and that insurer, 772 after such assignment, has the rights and obligations it would 773 have had if, prior to such assignment, it had issued a policy 774 providing Personal Injury Protection applicable to the loss. Any 775 person accepting Personal Injury Protection benefits under the 776 Assigned Claims Plan has such rights and obligations as he or she 777 would have had under a policy issued to him or her providing 778 Personal Injury Protection benefits.

If a claim qualifies for assignment under this 779 (d) 780 section, the Assigned Claims Plan and any insurer to whom the 781 claim is assigned is subrogated to all of the rights of the 782 claimant against any person liable for such loss and against any 783 insurer, its successor in interest, or any other person or organization legally obligated to provide Personal Injury 784 785 Protection benefits to the insured person for benefits provided by 786 the assignment.

787 <u>SECTION 24.</u> Fraudulent Claims. Any person, including an 788 insurer, who, with intent to defraud or deceive any other person 789 in connection with a claim for payment or other benefit pursuant 790 to an insurance policy providing benefits under this act, does or 791 attempts to do either of the following, knowing that such 792 statement contains any false, incomplete, or misleading

793 information concerning any fact or thing material to such claim:

(a) Presents or causes to be presented, or conspires to
present or cause to be presented, any written or oral statements
in connection with a claim for payment or other benefit; or

(b) Prepares or makes any written or oral statement that is intended to be presented to any person in connection with or in support of any claim for payment or other benefit, shall be guilty of a felony punishable by a fine of not more than Ten Thousand Dollars (\$10,000.00).

802 SECTION 25. Non-Discrimination in Fees for Medical Services. 803 A physician, hospital, clinic, or other person or institution 804 lawfully rendering treatment to an injured person, and a person or 805 institution providing medical rehabilitation services following an injury to an injured person, may charge only a reasonable amount 806 807 for the products, services, and accommodations rendered. The 808 charge shall not exceed the amount the person or institution 809 customarily charges for like products, services, and 810 accommodations in cases not involving insurance.

811 SECTION 26. Managed Care. A Personal Injury Protection Insurer, with the approval of the commissioner, may utilize, for 812 the payment of medical expenses provided under Personal Injury 813 814 Protection, managed care systems, including but not limited to, 815 health maintenance and preferred provider organizations, and may require an injured person to obtain health care through a managed 816 817 care system designated by the Personal Injury Protection Insurer 818 if such injured person has opted to be subject to such a managed care system at the time of purchase of Personal Injury Protection 819 820 coverage at an appropriately reduced premium.

821 <u>SECTION 27.</u> Safety Equipment. Each Personal Injury 822 Protection Insurer shall adopt an actuarially sound program which 823 provides incentives, in the form of increased benefits, reduced 824 premiums, or other means, for Personal Injury Protection Insureds 825 to install, maintain, and make use of injury reducing devices such

826 as, but not necessarily limited to, seat and harness belts, air 827 bags, and child restraint systems.

828 SECTION 28. Regulations. (a) The commissioner may adopt additional regulations to provide effective administration of this 829 830 act that are consistent with its purposes and are fair and equitable, including regulations which authorize Personal Injury 831 832 Protection Insurers to write Personal Injury Protection insurance 833 with reasonable deductibles higher or lower in amount than that provided in Section 3(c) of this act, and regulations to permit 834 835 the offering of pain and suffering coverage.

(b) The commissioner shall develop an informational
brochure which must be provided by each insurer or agent to each
policyholder or applicant for motor vehicle insurance explaining
the Personal Injury Protection option and the Tort Liability
Insurance option as well as the consequence of selection of one
option over the other.

842 The commissioner shall establish, within the Department of Insurance, a compliance unit which shall monitor all complaints 843 844 against insurers, health care providers, and attorneys arising out 845 of the provision of Personal Injury Protection benefits. The 846 commissioner shall report to the Legislature, at least annually, 847 on the nature of the complaints, the penalties levied against 848 insurers, and the final disposition of complaints. The report, 849 which will identify parties by name, will be a public record available on request by any member of the public. 850

851 SECTION 29. Limitation of Liability for Advising on Options. 852 No insurer or any agent or employee of such insurer, no insurance 853 producer representing a motor vehicle insurer or any automobile 854 residual market plan, and no attorney licensed to practice law 855 within this state shall be liable in an action for damages on 856 account of an election of the Tort Liability Insurance option, an 857 election of the Personal Injury Protection option, or a failure to 858 make a required election, unless such person has willfully

859 misrepresented the available choices or has fraudulently induced 860 the election of one system over the other.

861 <u>SECTION 30.</u> Cost of Living Adjustment. Every two (2) years, 862 on the anniversary of the effective date of this act, the 863 commissioner shall report in writing to the Legislature on the 864 effect of changes in the relevant components of the cost of living 865 on levels of benefits, limits of liability, and deductibles 866 mentioned in this act.

SECTION 31. Arbitration. Any dispute with respect to 867 Personal Injury Protection coverage between a Personal Injury 868 869 Protection Insurer and an injured person, or the dependents of such person, shall be submitted to arbitration. Such dispute 870 either shall be submitted to the American Arbitration Association, 871 or be submitted for determination in the following manner: Upon 872 873 the request for arbitration being made by either party, each party 874 to the dispute shall select an arbitrator and the two (2) arbitrators so named shall select a third arbitrator. The written 875 876 decision of any two (2) arbitrators is binding on each party. If arbitrators are not selected within forty-five (45) days from such 877 878 request, either party may require that such arbitration be 879 submitted to the American Arbitration Association.

880 SECTION 32. Out-of-State Vehicles. Each insurer authorized 881 to transact or transacting business in this state shall file with the commissioner, as a condition of its continued transaction of 882 883 business within this state, a form approved by the commissioner 884 declaring that any contract of motor vehicle liability insurance, 885 wherever issued, covering the maintenance or use of a motor 886 vehicle while the motor vehicle is in this state, is deemed to provide the insurance required by Section 5 of this act unless the 887 888 named insured, prior to a motor vehicle accident within this 889 state, has elected the Personal Injury Protection option pursuant 890 to Section 4 of this act. Any nonadmitted insurer may also file 891 such form. In the event a person is entitled to Personal Injury

Protection benefits or their equivalent under the requirements of more than one (1) state, such person shall elect to recover under the laws of any one (1) such state and such election shall represent the exclusive source of recovery of all Personal Injury Protection benefits, or their equivalent, paid or payable under the financial responsibility requirements of that or any other state.

899 <u>SECTION 33.</u> Terms, Conditions, and Exclusions. All 900 insurance coverages provided pursuant to this act are subject to 901 such terms, conditions, and exclusions as have been approved by 902 the commissioner.

903 SECTION 34. Applicable Provisions to Tort Maintenance Coverage. As to matters covered in Sections 12, 15, 16, 18, 21, 904 905 22, 23, 26, 27, 29 and 32 of this act, and other related matters, 906 where appropriate laws and regulations of this state applicable to 907 uninsured motorist coverage are applicable to Tort Maintenance Coverage, except that the commissioner may by regulation apply 908 909 pertinent provisions applicable to Personal Injury Protection to 910 Tort Maintenance Coverage.

SECTION 35. Severability and Constitutionality. 911 If any provision of this act or the application thereof to any person or 912 913 circumstance is held to be unconstitutional or otherwise invalid, 914 the remainder of this act and the application of such provision to other persons or circumstances are not affected thereby, and it is 915 916 to be conclusively presumed that the Legislature would have 917 enacted the remainder of this act without such invalid or unconstitutional provision, except that if Section 14 of this act 918 919 is found to be unconstitutional or invalid, it is to be 920 conclusively presumed that the Legislature would not have enacted 921 the remainder of this act without such limitations, and the entire 922 act is invalid. If Section 14 of this act is found to be 923 unconstitutional or invalid, Personal Injury Protection Insurers 924 have no obligation to pay Personal Injury Protection benefits with

925 respect to accidents occurring on or after the date of the finding 926 of such unconstitutionality or invalidity and, in addition, are 927 subrogated to all of the rights of Personal Injury Protection 928 Insureds for all previous such benefits paid.

929 SECTION 36. Declaratory Judgment. In addition to the provisions of Section 35 of this act, because the Legislature 930 finds and declares that questions of law may exist with respect to 931 932 the constitutionality of some of the sections of this act, the 933 public welfare requires that such questions with respect to this 934 act be resolved with expedition prior to such time as its mandatory provisions take effect in order to avoid disruption of 935 936 the orderly implementation of its provisions. Therefore, the Legislature finds that the remedy of declaratory judgment to 937 determine the constitutionality of the provisions of this act 938 should immediately be made available to determine those important 939 940 questions, in order to avoid utter confusion by the public in the 941 event this act is declared unconstitutional. Therefore, any resident of the state is authorized to forthwith bring an action 942 943 for a declaratory judgment against the commissioner to determine the constitutionality of this act's provisions. Such court shall 944 945 reserve the questions of law for the advice of the Supreme Court as provided by law. In the interest of expediting a decision, the 946 947 Supreme Court may suspend its rules as provided therein.

948 SECTION 37. This act shall take effect and be in force from 949 and after July 1, 1999.