By: Representative Chism

To: Insurance; Judiciary A

## HOUSE BILL NO. 232

- AN ACT TO CREATE THE MISSISSIPPI CONSUMER CHOICE IN MOTOR 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 MAINTENANCE OR USE OF MOTOR VEHICLES; TO ABOLISH TORT LIABILITY IN
- 5
- CERTAIN CASES; TO PROHIBIT CERTAIN STACKING OF COVERAGES; TO 6
- 7 AUTHORIZE THE COMMISSIONER OF INSURANCE TO ADOPT RULES AND
- 8 REGULATIONS FOR THE ADMINISTRATION OF THE ACT; AND FOR RELATED
- 9 PURPOSES.
- 10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:
- 11 SECTION 1. Title. This act may be cited as the Mississippi
- Consumer Choice in Motor Vehicle Insurance Act. 12
- SECTION 2. Statement of purpose. (1) Controlling 13
- 14 provisions. To the extent the provisions of Section 2 of this act
- differ from the provisions of Section 3 of this act and 15
- 16 thereafter, the provisions of the subsequent sections control.
- (2) Existing law. Under existing law, the ability of a 17
- person to recover losses incurred as a result of a motor vehicle 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
- 21 conduct of the other driver, the amount of liability insurance (if
- any) carried by the other driver, and the financial resources (if 22
- 23 any) of the other driver. Under the current system, two (2)
- individuals who have received identical injuries may recover 2.4
- markedly different amounts. Therefore, many individuals, 25
- particularly the large number of motorists involved in one-car 26
- 27 accidents, receive no compensation for their losses at all.
- 28 (3) The Right to choose. This bill gives motorists (a) the
- right to choose the kinds of personal injury protection which will 29
- 30 be available to themselves and their family members in case of an

- 31 automobile accident, and (b) the right to choose the amount of
- 32 financial protection they deem appropriate and affordable for
- 33 themselves and their families. Instead of being forced to buy
- 34 traditional tort liability insurance to protect strangers,
- 35 motorists will have the opportunity to buy a new personal injury
- 36 protection coverage to protect themselves and their family members
- 37 in the event of a motor vehicle accident. As an alternative, they
- 38 will have the right to elect traditional tort liability insurance
- 39 which will include an inverse liability coverage (entitled "tort
- 40 maintenance coverage") to provide protection in the event of
- 41 injury caused by someone who has elected the personal injury
- 42 protection option.
- 43 (4) Tort liability insurance versus personal injury
- 44 protection coverage.
- 45 (a) Motorists who choose the tort liability insurance
- 46 and who are involved in an accident with another motorist will
- 47 retain the tort liability system, except that, based on fault, (i)
- 48 they can be sued by those who choose personal injury protection
- 49 but only for damages in excess of the limits of the personal
- 50 injury protection policy and (ii) they cannot claim against those
- 51 who choose personal injury protection coverage except for
- 52 uncompensated economic loss in excess of the limits of their own
- 53 first party tort maintenance coverage.
- (b) Motorists who choose personal injury protection
- 55 coverage established by this act and who are involved in an
- 56 accident with a motorist who has chosen traditional tort liability
- 57 insurance will be promptly compensated for their own losses,
- 58 without regard to fault, and can also claim against the other
- 59 motorist based on fault for uncompensated economic loss in excess
- 60 of the limits of the personal injury protection policy.
- 61 (c) Two (2) motorists who each choose personal injury
- 62 protection coverage and who are involved in an accident with each
- other will be promptly compensated under their own policies for

- 64 their own losses without regard to fault. In this situation, the
- 65 two (2) motorists who have chosen the personal injury protection
- 66 coverage lose the right to claim and sue for "pain and suffering"
- 67 and other noneconomic loss, but if either suffers economic loss in
- 68 excess of his/her policy's benefit levels, that person retains the
- 69 right to claim and sue for unreimbursed economic loss based on
- 70 fault.
- 71 (d) When two (2) motorists who each choose tort
- 72 liability insurance are involved in an accident with each other,
- 73 their rights against each other are unaffected by this act.
- 74 (e) If a motorist who has chosen tort liability
- 75 insurance is involved in an accident with an uninsured motorist,
- 76 the policyholder will be compensated for losses under the
- 77 uninsured motorist provisions of his/her own policy based on fault
- 78 and has the right to sue for damages. The uninsured motorist
- 79 forfeits the right to claim for noneconomic loss against the
- 80 motorist who has chosen tort liability insurance unless the tort
- 81 liability insured was driving under the influence of alcohol or
- 82 illegal drugs or was guilty of intentional misconduct.
- (f) If a motorist who has chosen the personal injury
- 84 protection policy is involved in an accident with an uninsured
- 85 motorist, the policyholder will be promptly compensated for losses
- 86 without regard to fault under his/her personal injury protection
- 87 policy, and has the right to claim and sue the uninsured motorist
- 88 for damages based on fault. The uninsured motorist forfeits the
- 89 right to claim for noneconomic loss against the motorist who has
- 90 chosen the personal injury protection policy except when the
- 91 personal injury protection insured was driving under the influence
- 92 of alcohol or illegal drugs or was guilty of intentional
- 93 misconduct.
- 94 (5) Property damage. A motorist who purchased a personal
- 95 injury protection policy will thereby procure Ten Thousand Dollars
- 96 (\$10,000.00) of property damage liability insurance as part of

- 97 his/her mandatory coverage. In order to keep the cost of property
- 98 damage liability insurance as low as possible, persons who have
- 99 chosen personal injury protection policies have no cause of action
- 100 for damage to a motor vehicle to the extent such vehicle is
- 101 insured against collision damage in accidents involving other
- 102 personal injury protection insureds.
- 103 **SECTION 3. Definitions.** As used in this act, unless the
- 104 context requires otherwise, the following terms have the meaning
- 105 ascribed to them in this section:
- 106 (a) "Accidental bodily injury" means bodily injury,
- 107 sickness or disease, including death resulting therefrom, arising
- 108 out of the operation or use of a motor vehicle, or while occupying
- 109 such vehicle, which is accidental as to the person injured.
- 110 (b) "Added personal injury protection" means coverage
- 111 for additional personal injury protection. Added personal injury
- 112 protection coverage includes benefits with an aggregate limit of
- 113 One Hundred Thousand Dollars (\$100,000.00) per person (including
- 114 Thirty Thousand Dollars (\$30,000.00) of basic personal injury
- 115 protection benefits), to consist of medical expenses, up to One
- 116 Thousand Dollars (\$1,000.00) per week of loss of income from work,
- 117 up to Three Hundred Dollars (\$300.00) per week of replacement
- 118 services loss, and if death is proximately and directly caused by
- 119 a motor vehicle and occurs within one (1) year of the date of the
- 120 accident, a death benefit of Twenty-five Thousand Dollars
- 121 (\$25,000.00) payable to the dependents, if any, or, if none, to
- 122 the heirs or estate of the decedent. Nothing contained in this
- 123 section prevents a personal injury protection insurer from also
- 124 making available other additional compensation benefits in
- 125 coverages and amounts other than those prescribed in this section.
- 126 No applicant or insured may be required to purchase a lesser
- 127 amount than those prescribed in this paragraph (b).
- 128 (c) "Basic personal injury protection" means coverage
- 129 for personal injury protection which provides benefits for loss

- 130 resulting from accidental bodily injury. Basic personal injury
- 131 protection benefits consist of the following elements with an
- 132 aggregate limit of Fifteen Thousand Dollars (\$15,000.00) per
- 133 person:
- 134 (i) Medical expenses, subject to a deductible of
- 135 Two Hundred Fifty Dollars (\$250.00) applicable only to the named
- 136 insured and to resident relatives of the named insured;
- 137 (ii) Loss of income from work, not to exceed Two
- 138 Hundred Dollars (\$200.00) per week;
- 139 (iii) Replacement services loss, not to exceed One
- 140 Hundred Dollars (\$100.00) per week;
- 141 (iv) A death benefit of Ten Thousand Dollars
- 142 (\$10,000.00), payable to the dependents, if any, or, if none, to
- 143 the heirs or estate of the decedent, if the death of an injured
- 144 person is directly and proximately caused by an accidental bodily
- 145 injury and occurs within one (1) year of the date of such injury.
- 146 (d) "Cause of action for injury" means a claim for
- 147 accidental bodily injury for economic or noneconomic loss, or
- 148 both, caused by the negligent conduct or intentional misconduct of
- 149 another person (whether directly or vicariously), and includes a
- 150 claim by any person other than a person suffering accidental
- 151 bodily injury based on such injury, including, but not limited to,
- 152 loss of consortium, companionship, or any other derivative claim.
- (e) "Collateral sources" means all benefits one
- 154 receives or is entitled to receive as reimbursement of loss
- 155 because of an injury from sources other than personal injury
- 156 protection benefits. In such calculation, no subtraction is made
- 157 for amounts one receives or is entitled to receive:
- 158 (i) In discharge of familial obligations or
- 159 support;
- 160 (ii) By reason of another's death, except that
- 161 there is subtracted from loss in calculating net loss those
- 162 amounts received from social security or workers' compensation; or

- (iii) As gratuities. In no event is any payment made by an employer to his employee or an employee's survivors to be regarded as a gratuity.
- 166 (f) "Commissioner" means the Commissioner of Insurance 167 of the State of Mississippi.
- 168 (g) "Coverage" means a policy or plan for insurance 169 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.
- "Driving under the influence of alcohol or illegal 174 (i) 175 drugs" refers to such conduct when it causes or substantially contributes to the harm claimed for. A driver is deemed to be 176 177 driving under the influence of alcohol for the purposes of this 178 act only if a test of blood, breath or urine as called for under 179 the laws of this state shows an illegal blood or breath alcohol content as defined by state law, or if a driver refuses to undergo 180 181 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.
- 186 (k) "Fault" is encompassed by the definition of "tort 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.
- 193 (m) "Intentional misconduct" means conduct whereby harm

  194 is intentionally caused or attempted to be caused by one who acts

  195 or fails to act for the purpose of causing harm or with knowledge

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that harm is substantially certain to follow when such conduct 196 197 caused or substantially contributed to the harm claimed for. A 198 person does not intentionally cause or attempt to cause harm (i) 199 merely because his act or failure to act is intentional or done 200 with the realization that it creates a grave risk of causing harm 201 or (ii) if the act or omission causing bodily harm is for the 202 purpose of averting bodily harm to oneself or another person. "Loss of income from work" means eighty percent 203 (n) 204 (80%) of loss of income an injured person would have earned 205 through work during the period of disability, reduced by any 206 income from substitute work actually performed by the injured 207 person, or by any income the injured person would have earned in

available appropriate substitute work which such person was 209 capable of performing but unreasonably failed to undertake. Loss of income from work does not include any loss after the death of 210 211 an injured person and payment for the period of disability is not 212 to exceed two (2) years from the date of the accident. 213 (0) "Medical expenses" means reasonable expenses incurred by an injured person for necessary medical, surgical, 214 215 x-ray, dental, ambulance, hospital, medical rehabilitation, and 216 professional nursing services and includes expenses for 217 eyeglasses, hearing aids, and prosthetic devices. The words

"incurred by" include medical expenses incurred on behalf of an injured person by a parent or guardian if the injured person is a minor or incompetent, or by a surviving spouse if the injured person be deceased. Personal injury protection insurers are authorized to review medical expenses prior to, during, and after the course of treatment of an injured person, to assure that they are both reasonable and necessary. Under basic personal injury protection and under added personal injury protection, medical expenses are payable for services provided to the injured person within two (2) years of the date of accidental bodily injury.

228 "Medical expenses" does not include:

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229	(i) That portion of the charge for a room in any
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231	facility or any similar facility in excess of the reasonable and
232	customary charge for semi-private accommodations unless medically
233	required; or
234	(ii) Treatment, services, products or procedures
235	that are experimental in nature, for research or not primarily
236	designed to serve a medical purpose, or not commonly and
237	customarily recognized throughout the medical profession and
238	within the United States as appropriate for treatment of
239	accidental bodily injury.
240	(p) "Medical rehabilitation" means rehabilitation
241	services reasonably necessary and designed to reduce the
242	disability and dependence of an injured person and to restore such
243	person, to the extent reasonably possible, to his or her
244	pre-accident level of physical functioning.
245	(q) "Motor vehicle" means:
246	(i) A vehicle of a kind required to be registered
247	under the laws of this state relating to motor vehicles, or
248	(ii) A vehicle with four (4) or more load bearing
249	wheels, including a trailer, designed for operation upon a public
250	roadway by other than muscular power, except a vehicle used
251	exclusively upon stationary rails or tracks. "Public roadway"
252	means a way open to the use of the public for purposes of
253	automobile travel.
254	(r) "Noneconomic loss" means any loss other than
255	economic loss and includes, but is not necessarily limited to,
256	pain, suffering, inconvenience, mental anguish, and all other
257	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.

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- 260 (s) "Occupying" means to be in or upon a motor vehicle
  261 or engaged in the immediate act of entering into or alighting from
  262 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,
  including repairing, servicing, washing, loading or unloading,
  unless the conduct occurs while occupying it.
- 268 "Owner" means the person or persons in whose name (u) 269 the motor vehicle has been registered. If no registration is in 270 effect at the time of an accident involving the motor vehicle, 271 "owner" means the person or persons holding legal title thereto, 272 or in the event the motor vehicle is the subject of a security agreement or lease with option to purchase with the debtor or 273 274 lessee having the right of possession, "owner" means the debtor or 275 lessee. Owner does not include the United States of America or 276 any agency thereof except with respect to motor vehicles for which 277 it has elected to provide insurance.
- (v) "Person" includes an organization, public or private.
- 280 (w) "Personal injury protection" means coverage
  281 providing basic (and, if purchased, added) benefits, regardless of
  282 fault, for loss resulting from accidental bodily injury.
- 283 "Personal injury protection insured" means, the 284 first person identified by name as an insured under a policy 285 providing personal injury protection benefits, the spouse of such 286 person if a resident of household, and any other resident relative 287 of the same household, and, with respect to accidents within this state, any person who sustains accidental bodily injury while 288 289 occupying or through being struck by a motor vehicle insured for personal injury protection, unless such person is insured pursuant 290 291 to the tort liability insurance option provided under Section 4 of 292 this act or is an uninsured motorist.

- 293 (y) "Personal injury protection insurer" means an 294 insurer or qualified self-insurer providing personal injury 295 protection benefits.
- 296 "Replacement services loss" means expenses 297 reasonably incurred in obtaining ordinary and necessary services 298 from others, not members of the injured person's household, in 299 lieu of the services the injured person would have performed for 300 the benefit of the household. Replacement services loss is not 301 due if the injured person is entitled to receive personal injury 302 protection benefits for loss of income from work for the same time 303 period. Replacement services loss does not include any loss after 304 the death of an injured person, and payment for the period of 305 disability under basic personal injury protection is not to exceed 306 two (2) years from the date of accidental bodily injury.
- 307 (aa) "Resident relative" means a person related to the 308 owner of a motor vehicle by blood, marriage, adoption, or 309 otherwise, and residing in the same household. A person resides 310 in the same household if he or she usually makes his or her home 311 in the same family unit, though temporarily living elsewhere.
- 312 (bb) "Tort liability" means the legal obligation for 313 payment of damages caused by one adjudged to have committed a 314 tort.
- 315 (cc) "Tort maintenance coverage" means coverage under
  316 which a person who has chosen tort liability insurance coverage
  317 when involved in an accident with a personal injury protection
  318 insured, claims for tort liability against his/her own insurer to
  319 the extent of such coverage.
- of economic loss arising out of an accidental bodily injury of an injured person which exceeds the benefits provided by (i) personal injury protection coverage (except for loss on account of the application of a deductible under such a policy), or (ii) tort maintenance coverage, and (iii) collateral sources. Such loss is

326 recoverable under the same terms and limitations as under added

327 personal injury protection, but shall not be subject to the

- 328 aggregate limit of liability of such coverage.
- 329 (ee) "Uninsured motorist" means the owner, or a
- 330 dependent thereof, of a motor vehicle uninsured for either basic
- 331 personal injury protection or tort liability insurance at the
- 332 limits prescribed by this state's financial responsibility law, or
- 333 higher while such person is operating, using or occupying the
- 334 owned but uninsured motor vehicle.
- 335 SECTION 4. Insurance requirements. Every motor vehicle
- 336 required to be registered in this state can be insured:
- 337 (a) For basic personal injury protection and the
- 338 property damage liability mandated under this state's financial
- 339 responsibility law.
- 340 (b) For bodily injury and property damage liability as
- 341 described in this state's financial responsibility law.
- 342 (c) An insurance policy written by a personal injury
- 343 protection insurer pursuant to this act to provide basic personal
- 344 injury protection is deemed to include all basic personal injury
- 345 protection coverage required by this act. Coverage under basic
- 346 personal injury protection meets the requirements of this state's
- 347 financial responsibility law even though such policy does not
- 348 provide protection against bodily injury liability claims arising
- 349 out of accidents within this state.
- 350 (d) A personal injury protection insurer shall make
- 351 available, at the option of a named insured, added personal injury
- 352 protection on a policy providing basic personal injury protection.
- 353 The exercise of the option not to purchase added personal injury
- 354 protection by a named insured or an applicant shall be binding on
- 355 all personal injury protection insureds covered under the policy.
- 356 (e) A personal injury protection insurer is authorized
- 357 to write personal injury protection without any deductible or

358 subject to reasonable deductibles pursuant to Section 28 of this 359 act.

- A personal injury protection insurer shall also 360 (f) 361 make available a pain and suffering coverage, pursuant to 362 regulations issued under Section 28 of this act, with a limit of 363 Fifty Thousand Dollars (\$50,000.00), payable if the injured person sustains an accidental bodily injury resulting in death or 364 365 dismemberment or significant and permanent loss of important 366 bodily function or significant and permanent scarring or 367 disfigurement. Nothing contained herein shall preclude any 368 insurer from offering higher limits of pain and suffering coverage or providing broader coverage. 369
- (g) In addition to added personal injury protection
  coverages, a personal injury protection insurer shall make
  available other insurance coverages with the approval of the
  commissioner. Such coverages shall include, but are not limited
  to, bodily injury liability insurance, collision coverage, and
  comprehensive physical damage coverage.
- 376 (h) An insurance policy written by a motor vehicle 377 liability insurer pursuant to this act to provide coverage under the tort liability insurance option shall include tort maintenance 378 379 coverage for accidental bodily injury of an insured under the tort 380 liability insurance option, caused by the negligence, in whole or 381 in part, of a personal injury protection insured. Such insurance 382 will pay such damages as might have been recovered against a personal injury protection insured but for the exemption from tort 383 384 liability provided by Section 14 of this act up to the liability 385 limits of the tort maintenance coverage.
- 386 <u>SECTION 5.</u> Required limits of liability coverage. Every
  387 owner who chooses the tort liability insurance option must carry
  388 liability insurance in an amount equal to the minimum liability
  389 limits for accidental bodily injury and property damage as
  390 specified by this state's financial responsibility law. Insurers
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providing coverage for such persons shall include tort maintenance coverage required in Section 4 of this act in all policies providing primary coverage for legal liability for motor vehicles at limits equal to the bodily injury liability coverage carried by the tort maintenance coverage insured.

tort maintenance coverage option. Upon the earliest and first renewal of any applicable motor vehicle liability insurance policy on or after the effective date of this act, or before the issuance of a policy required by this act, a choice must be made of either the tort maintenance coverage option or the personal injury protection option. In order to minimize conflict between the two (2) options, all motor vehicle insurers are authorized to maintain underwriting rules which encourage uniformity within a household. A choice made pursuant to this act is binding with respect to any continuation, renewal, or reinstatement of an applicable motor vehicle insurance policy, and continues with respect to any policy which extends, supersedes, or replaces the policy unless the named insured subsequently makes a different choice in writing.

SECTION 7. Application of coverage. (1) If there is only one (1) vehicle owned by the named insured or any member of the household of the named insured, the choice made by the named insured is applicable to his or her spouse and to any resident relatives of the household. That choice also applies to all persons insured under the policy while occupying other motor vehicles or if struck by another motor vehicle.

(2) If there is more than one (1) motor vehicle in the household, and the named insured chooses different options for different vehicles, the choice applicable to the vehicle in use governs not only the named insured, but also all other persons insured under the policy whose injury arises out of the use of that motor vehicle unless the named insured has specifically identified family members who shall be personal injury protection

If the named insured is injured while occupying or 424 insureds. 425 through being struck by another motor vehicle, the tort 426 maintenance coverage option shall be deemed applicable and 427 personal injury protection benefits shall not be provided. 428 other person insured under two (2) or more policies covering 429 different options is injured while occupying or through being 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 432 433 coverage option shall be deemed applicable and personal benefits 434 shall not be provided.

- (3) If there are two (2) or more vehicles in the household, each owned by different persons, each such person shall have the right to choose either the personal injury protection option or the tort maintenance coverage option for himself or herself. That person's choice shall determine that person's rights no matter which vehicle he or she is occupying or which vehicle he or she might be struck by. The rights of all members of the household who are not motor vehicle owners shall be governed by the choice applicable to the motor vehicle which they were occupying at the time of the injury, if that vehicle was owned by a member of the household.
- 446 (4) In the event of a bodily injury occurring prior to the 447 effective date of a required choice, if there are conflicting 448 choices within the household creating questions as to the applicability of the personal injury protection option or the tort 449 450 maintenance coverage option, or if there is a failure to make a 451 choice as required by this act, tort maintenance insurance will be 452 applicable, and personal injury protection benefits will not be 453 payable.
- 454 <u>SECTION 8.</u> Geographic application of personal injury
  455 protection policies. A personal injury protection insurer shall
  456 pay personal injury protection benefits for accidental bodily
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- 458 the United States of America, its territories or possessions, or
- 459 Canada. Any personal injury protection insurance policy issued to
- 460 satisfy the financial responsibility law of this state shall be
- 461 conformed to satisfy the financial responsibility law of any
- 462 jurisdiction mentioned above in which the insured motor vehicle is
- 463 being operated with respect to an accident occurring in that
- 464 jurisdiction.

## SECTION 9. Persons not entitled to personal injury

- 466 **protection benefits.** A personal injury protection insurer has no
- 467 obligation to provide personal injury protection benefits to or on
- 468 behalf of any injured person who:
- 469 (a) Was involved in a motor vehicle accident while
- 470 committing a felony or while voluntarily occupying a motor vehicle
- 471 known by him or her to be stolen;
- (b) Was driving under the influence of alcohol or
- 473 illegal drugs;
- 474 (c) Is injured while occupying a motor vehicle owned
- 475 by, or furnished or available for the regular use of the injured
- 476 person, or the injured person's resident spouse or relative, if
- 477 such motor vehicle is not described in the policy under which a
- 478 claim is made, or is not a newly acquired or replacement motor
- 479 vehicle covered under the terms of the policy;
- (d) Was operating or occupying a motor vehicle with
- 481 three (3) or fewer load bearing wheels;
- 482 (e) Was guilty of intentional misconduct. (If a person
- 483 dies as a result of intentional misconduct aimed at himself or
- 484 herself, his or her survivors are not entitled to personal injury
- 485 protection for loss arising from the decedent's injury or death.);
- 486 (f) Is injured pursuant to the tort maintenance
- 487 coverage option described in Section 4(h) of this act, or

488		(g)	Is	an ur	nins	sured	motorist	, or	a de	epend	dent	of	an
489	uninsured	motor	rist	who	is	not	otherwise	insu	ıred	for	pers	ona	.1
490	injury pro	otecti	lon.										

Nothing contained herein prevents a personal injury protection insurer from including in personal injury protection coverage persons mentioned in this section, but only if such is done by language clearly manifesting an intent to provide such coverage.

## 496 SECTION 10. Payment of personal injury protection benefits.

- 497 Personal injury protection benefits when due are payable at the 498 option of the personal injury protection insurer to any of the 499 following:
- 500 The injured person; (a)

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- 501 The parent or guardian of the injured person, if (b) the injured person is a minor or incompetent; 502
- 503 A dependent survivor, executor or administrator of the injured person; or 504
- 505 (d) Any other person or organization rendering the 506 services for which payment is due.

SECTION 11. Multiple coverages. Except as otherwise provided in Section 83-11-101 et seq., regardless of the number of motor vehicles involved, persons covered, claims made, motor vehicles or premiums shown on the policy or premiums paid, in no event shall the coverage limits under a motor vehicle insurance policy for any one (1) coverage be added to, combined with, or otherwise stacked upon any other coverage limit to determine the maximum limit of coverage available to an injured person for any one (1) accident. Unless the contract clearly provides otherwise, policies or plans may also provide that if two (2) or more policies, plans, or coverages apply equally to the same accident, the highest limit of liability applicable shall be the maximum 518 amount available to an insured person under any one (1) of such

520 policies. Each such policy, plan or coverage shall bear its

521 proportionate share of the loss.

522 **SECTION 12. Priority of benefits.** (1) Persons entitled to

523 basic personal injury protection benefits required or provided

524 pursuant to this act are entitled to at least the personal injury

525 protection coverage under the policy insuring them and shall claim

526 such benefits from insurers in the following order of priority up

527 to the limits of personal injury protection in the listed

528 category:

529 First: The personal injury protection covering a motor

530 vehicle involved in the accident, if the person injured was an

occupant of or was struck by such motor vehicle at the time of the

532 accident.

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533 Second: The personal injury protection under which the

534 injured person is or was an insured.

535 Third: If no personal injury protection is available under

536 the above priorities, a person injured as a result of a motor

vehicle accident may claim benefits under the assigned claims plan

538 pursuant to Section 23 of this act, unless unqualified for

539 benefits under Section 6 of this act.

540 (2) If two (2) or more insurers are obligated to pay

541 personal injury protection benefits in accordance with the

542 priorities set out in this section, the insurer against whom the

543 claim is first made shall pay the claim as if wholly responsible,

544 and may thereafter recover contribution pro rata from any other

545 insurer at the same priority level for the cost of the payments

546 and the processing of the claim. For purposes of this section, an

unoccupied parked motor vehicle is not a motor vehicle involved in

548 an accident unless it was parked in such a way as to cause

549 unreasonable risk of injury.

550 **SECTION 13.** Coordination of benefits. A basic personal

551 injury protection insurer has the primary obligation to indemnify

an injured person except to the extent of collateral sources paid or payable to such person.

## SECTION 14. Tort rights and legal liability under this act.

- 1) No personal injury protection insured has a cause of action for injury against, nor is liable to, any other person on account of an accident occurring within this state, except as provided in subsections (2), (3), (4) and (5) of this section and except for injury caused other than by the ownership, operation, or use of a motor vehicle.
- 561 (2) An injured person has a cause of action for accidental 562 bodily injury against any party driving under the influence of 563 alcohol or illegal drugs or guilty of intentional misconduct. Any 564 party providing personal injury protection or tort maintenance 565 coverage benefits to such injured person has a right of 566 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.
- 571 (4) Benefits under subsection (3) of this section include 572 reasonable expenses incurred by the party in collecting such 573 benefits, including a reasonable attorney's fee for advising and 574 representing a claimant for such benefits. No part of the fee for 575 representing such party in connection with such benefits is a 576 charge against benefits otherwise due the claimant, and no 577 additional fee may be charged by an attorney to any party in 578 collecting such benefits. All or part of the fee may be deducted 579 from the benefits otherwise due the claimant if any significant part of the claim for such benefits was fraudulent or so excessive 580 581 as to have no reasonable foundation. In any action brought 582 against an injured person by a personal injury protection insurer, 583 the court may award the injured person's attorney a reasonable

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attorney's fee for defending the action if the injured person was the prevailing party.

- 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.
- 591 (6) A person covered by tort maintenance coverage has a 592 cause of action for injury against another person so covered.
  - (7) An uninsured motorist has no cause of action against a personal injury protection insured for (a) injury other than for uncompensated economic loss and (b) damage to property except damage in excess of the property damage liability limits mandated under this state's financial responsibility law unless the personal injury protection insured was driving under the influence of alcohol or illegal drugs or was guilty of intentional misconduct. An uninsured motorist remains liable in tort to a person insured for personal injury protection benefits for noneconomic loss, economic loss, and property damage.
- section 15. Insurer's right of subrogation. There is no right of subrogation or contribution by a personal injury protection insurer except under Sections 14, 16 and 23 of this act, and except that a personal injury protection insurer is subrogated, to the extent of its obligations, to all of the rights of its personal injury protection insured with respect to an accident caused in whole or in part by:
- 610 (a) The negligence of an uninsured motorist;
- (b) The negligence of the owner or operator of a motor vehicle having a gross weight of seven thousand (7,000) pounds or more;
- (c) Driving under the influence of alcohol or illegal drugs;
- 616 (d) Intentional misconduct; or
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618 on tort rights and liabilities pursuant to Section 14 of this act. 619 SECTION 16. Personal injury protection benefits and causes 620 of action for injury. No subtraction is made against personal 621 injury protection benefits due because of the value of a cause of 622 action for injury preserved under this act, except that after 623 recovery is realized under such cause of action, a subtraction is made to the extent of the net recovery, exclusive of reasonable 624 attorney's fees and other reasonable expenses incurred in 625 626 effecting the recovery. If personal injury protection benefits 627 have already been received, the recipient thereof shall repay to the insurer paying personal injury protection benefits out of such 628 629 recovery a sum equal to the personal injury protection benefits 630 received but not more than the realized net recovery, and the 631 insurer shall have a lien on the recovery to this extent. 632 remainder of the net recovery from such a cause of action applies 633 periodically against loss as it accrues, until an amount equal to the net recovery under such a cause of action has been subtracted. 634 635 SECTION 17. Personal injury protection benefits payable 636 periodically. Personal injury protection benefits are payable 637 monthly as loss accrues. Such benefits are overdue if not paid 638 within thirty (30) days after the personal injury protection 639 insurer receives reasonable proof of the fact and the amount of 640 loss sustained, except that a personal injury protection insurer 641 may accumulate claims for periods not exceeding one (1) month, and 642 benefits are not overdue if paid within twenty (20) days after the 643 period of accumulation. If reasonable proof is not supplied as to 644 the entire claim, the amount supported by reasonable proof is overdue if not paid within thirty (30) days after such proof is 645 646 received by the insurer, subject to the right of review specified 647 in Section 30 of this act. Any part or all of the remainder of 648 the claim that is later supported by reasonable proof is overdue 649 if not paid within thirty (30) days after such proof is received H. B. No. 232

(e) Any person who is not affected by the limitations

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by the insurer. For the purpose of calculating the extent to 650 651 which any benefits are overdue, payment is treated as made on the 652 date a draft or other valid instrument is placed in the United 653 States mail in a properly addressed postpaid envelope, or, if not 654 so posted, on the date of delivery. Personal injury protection 655 benefits may be paid by the personal injury protection insurer 656 directly to persons supplying necessary products, services, or 657 accommodations to the injured person. If overdue benefits are 658 recovered against a personal injury protection insurer or are paid 659 by a personal injury protection insurer, the provisions of 660 subsection (5) of Section 14 of this act pertaining to expenses 661 and an attorney's fee apply. In addition, the insurer is 662 obligated to pay interest on the overdue payment at one hundred 663 fifty percent (150%) of the prime rate in effect at the time the 664 payment became overdue. SECTION 18. Assignment or garnishment of personal injury 665 666 protection benefits. (1) Personal injury protection benefits, 667 other than those for medical expenses, are exempt from 668 garnishment, attachment, execution, and any other process or claim 669 to the extent that wages or earnings are exempt under any 670 applicable law exempting wages or earnings from process or claims. 671 (2) An agreement for assignment of any right to personal 672 injury protection benefits payable in the future other than 673 medical expenses is unenforceable except to the extent that such 674 benefits are for the cost of products, services, or accommodations 675 provided or to be provided by the assignee or that benefits for 676 loss of income from work or replacement services are assigned to 677 secure payment of alimony, maintenance, or child support. Pain 678 and suffering coverage benefits may also be assigned. 679 SECTION 19. No penalty for claims for personal injury

protection benefits. An insurer shall not cancel, fail to renew,

or increase the premium of its insured solely on account of the

insured or any other injured person making a claim for personal

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injury protection benefits or for collision damage to the insured vehicle. Violation of this section is punishable by a fine of One Thousand Dollars (\$1,000.00) per offense, such punishment to be exclusive of all other remedies permitted by law.

687 SECTION 20. Limitation of actions. Subject to the 688 arbitration provisions which follow, if no personal injury 689 protection benefits have been paid, an action therefor may be 690 commenced against the personal injury protection insurer not later 691 than two (2) years after the injured person suffers accidental 692 bodily injury. If personal injury protection benefits have been 693 paid, an action for recovery of further benefits by either the injured person or another claimant may be commenced not later than 694 695 two (2) years after the last payment of benefits.

SECTION 21. Mental and physical examinations. (1) Whenever the mental or physical condition of an injured person is material to any claim that has been made or may be made for past or future personal injury protection benefits, the insured person shall submit to reasonable mental or physical examinations by a physician or physicians designated by the insurer at a reasonably convenient time and location, subject to regulations, if any, promulgated by the commissioner. Personal injury protection insurers are authorized to include provisions of this nature in 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.
- SECTION 22. Verification of entitlement to benefits. (1)
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715 claim for personal injury protection benefits if a request is made 716 by an insurer providing such benefits under this section.

Every physician, hospital, clinic, or other medical institution providing, before or after an injury resulting from a motor vehicle accident upon which a claim for personal injury protection benefits is based, any products, services, or accommodations in relation to that or any other injury, or in relation to a condition claimed to be connected with that or any other injury shall, if requested to do so by the personal injury protection insurer against whom the claim has been made, furnish a written report of the history, condition, and treatment, and the dates and costs of such treatment of the injured person. information shall be provided together with a sworn statement that the treatment or services rendered were reasonable and necessary with respect to the injury sustained and identifying which portion of the expenses for such treatment or services were incurred as a result of such injury. Every such physician, hospital, clinic, or other medical institution shall also promptly produce and permit the inspection and copying of its records regarding such history, condition, and treatment, and the dates and costs of treatment. The sworn statement required under this section reads as follows: "Under penalty of perjury, I declare that I have

the best of 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)

read the foregoing and the facts alleged are true, to

744 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 H. B. No. 232

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748 under Section 31 of this act, a court of record may enter an order 749 for such discovery as justice requires.

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SECTION 23. Assigned claims plan. Insurers and qualified self-insurers authorized to provide personal injury protection insurance under this act shall organize, participate in, and maintain an assigned claims plan to provide basic personal injury protection benefits to any person who is injured as a result of a motor vehicle accident if:

- 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 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.
- 769 (c) The assigned claims plan shall provide such rules 770 and agreements for the operation of the plan and for the equitable 771 distribution of costs as approved by the commissioner. Any claim 772 brought through the assigned claims plan is assigned to an insurer 773 in accordance with such rules and agreements, and that insurer, 774 after such assignment, has the rights and obligations it would 775 have had if, prior to such assignment, it had issued a policy providing personal injury protection applicable to the loss. 776 777 person accepting personal injury protection benefits under the 778 assigned claims plan has such rights and obligations as he or she 779 would have had under a policy issued to him or her providing 780 personal injury protection benefits.

781	(d) If a claim qualifies for assignment under this
782	section, the assigned claims plan and any insurer to whom the
783	claim is assigned is subrogated to all of the rights of the
784	claimant against any person liable for such loss and against any
785	insurer, its successor in interest, or any other person or
786	organization legally obligated to provide personal injury
787	protection benefits to the insured person for benefits provided by
788	the assignment.
789	<b>SECTION 24.</b> Fraudulent claims. Any person, including an
790	insurer, who, with intent to defraud or deceive any other person
791	in connection with a claim for payment or other benefit pursuant
792	to an insurance policy providing benefits under this act, does or
793	attempts to do either of the following, knowing that such
794	statement contains any false, incomplete, or misleading
795	information concerning any fact or thing material to such claim:
796	(a) Presents or causes to be presented, or conspires to
797	present or cause to be presented, any written or oral statements
798	in connection with a claim for payment or other benefit; or
799	(b) Prepares or makes any written or oral statement
800	that is intended to be presented to any person in connection with
801	or in support of any claim for payment or other benefit, shall be
802	guilty of a felony punishable by a fine of not more than Ten
803	Thousand Dollars (\$10,000.00).
804	SECTION 25. Nondiscrimination in fees for medical services.
805	A physician, hospital, clinic, or other person or institution
806	lawfully rendering treatment to an injured person, and a person or
807	institution providing medical rehabilitation services following ar
808	injury to an injured person, may charge only a reasonable amount
809	for the products, services, and accommodations rendered. The
810	charge shall not exceed the amount the person or institution
811	customarily charges for like products, services, and

812 accommodations in cases not involving insurance.

SECTION 26. Managed care. A personal injury protection insurer, with the approval of the commissioner, may utilize, for the payment of medical expenses provided under personal injury protection, managed care systems, including but not limited to, health maintenance and preferred provider organizations, and may require an injured person to obtain health care through a managed care system designated by the personal injury protection insurer if such injured person has opted to be subject to such a managed care system at the time of purchase of personal injury protection coverage at an appropriately reduced premium. SECTION 27. Safety equipment. Each personal injury

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SECTION 27. Safety equipment. Each personal injury protection insurer shall adopt an actuarially sound program which provides incentives, in the form of increased benefits, reduced premiums, or other means, for personal injury protection insureds to install, maintain, and make use of injury reducing devices such as, but not necessarily limited to, seat and harness belts, air bags, and child restraint systems.

SECTION 28. Regulations. (1) The commissioner may adopt additional regulations to provide effective administration of this act that are consistent with its purposes and are fair and equitable, including regulations which authorize personal injury protection insurers to write personal injury protection insurance with reasonable deductibles higher or lower in amount than that provided in Section 3(c) of this act, and regulations to permit the offering of pain and suffering coverage.

(2) 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 (1) option over the other.

The commissioner shall establish, within the Department of

Insurance, a compliance unit which shall monitor all complaints

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against insurers, health care providers, and attorneys arising out 846 847 of the provision of personal injury protection benefits. 848 commissioner shall report to the Legislature, at least annually, 849 on the nature of the complaints, the penalties levied against 850 insurers, and the final disposition of complaints. The report, 851 which will identify parties by name, will be a public record 852 available on request by any member of the public. SECTION 29. Limitation of liability for advising on options. 853 854 No insurer or any agent or employee of such insurer, no insurance 855 producer representing a motor vehicle insurer or any automobile 856 residual market plan, and no attorney licensed to practice law within this state shall be liable in an action for damages on 857 858 account of an election of the tort liability insurance option, an 859 election of the personal injury protection option, or a failure to make a required election, unless such person has willfully 860 861 misrepresented the available choices or has fraudulently induced 862 the election of one (1) system over the other. 863 **SECTION 30.** Cost of living adjustment. Every two (2) years, 864 on the anniversary of the effective date of this act, the 865 commissioner shall report in writing to the Legislature on the 866 effect of changes in the relevant components of the cost of living 867 on levels of benefits, limits of liability, and deductibles 868 mentioned in this act. 869 SECTION 31. Arbitration. Any dispute with respect to 870 personal injury protection coverage between a personal injury 871 protection insurer and an injured person, or the dependents of 872 such person, shall be submitted to arbitration. Such dispute 873 either shall be submitted to the American Arbitration Association, 874 or be submitted for determination in the following manner: Upon 875 the request for arbitration being made by either party, each party to the dispute shall select an arbitrator and the two (2) 876 877 arbitrators so named shall select a third arbitrator. The written 878 decision of any two (2) arbitrators is binding on each party.

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arbitrators are not selected within forty-five (45) days from such request, either party may require that such arbitration be submitted to the American Arbitration Association.

882 SECTION 32. Out-of-state vehicles. Each insurer authorized 883 to transact or transacting business in this state shall file with 884 the commissioner, as a condition of its continued transaction of 885 business within this state, a form approved by the commissioner declaring that any contract of motor vehicle liability insurance, 886 887 wherever issued, covering the maintenance or use of a motor 888 vehicle while the motor vehicle is in this state, is deemed to 889 provide the insurance required by Section 5 of this act unless the 890 named insured, prior to a motor vehicle accident within this state, has elected the personal injury protection option pursuant 891 892 to Section 4 of this act. Any nonadmitted insurer may also file such form. In the event a person is entitled to personal injury 893 894 protection benefits or their equivalent under the requirements of 895 more than one (1) state, such person shall elect to recover under 896 the laws of any one such state and such election shall represent 897 the exclusive source of recovery of all personal injury protection 898 benefits, or their equivalent, paid or payable under the financial 899 responsibility requirements of that or any other state.

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

SECTION 34. Applicable provisions to tort maintenance coverage. As to matters covered in Sections 12, 15, 16, 18, 21, 22, 23, 26, 27, 29 and 32 of this act, and other related matters, where appropriate laws and regulations of this state applicable to uninsured motorist coverage are applicable to tort maintenance coverage, except that the commissioner may by regulation apply pertinent provisions applicable to personal injury protection to tort maintenance coverage.

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912 SECTION 35. Severability and constitutionality. If any 913 provision of this act or the application thereof to any person or 914 circumstance is held to be unconstitutional or otherwise invalid, 915 the remainder of this act and the application of such provision to 916 other persons or circumstances are not affected thereby, and it is 917 to be conclusively presumed that the Legislature would have enacted the remainder of this act without such invalid or 918 unconstitutional provision, except that if Section 14 of this act 919 is found to be unconstitutional or invalid, it is to be 920 921 conclusively presumed that the Legislature would not have enacted 922 the remainder of this act without such limitations, and the entire act is invalid. If Section 14 of this act is found to be 923 unconstitutional or invalid, personal injury protection insurers 924 925 have no obligation to pay personal injury protection benefits with respect to accidents occurring on or after the date of the finding 926 927 of such unconstitutionality or invalidity and, in addition, are 928 subrogated to all of the rights of personal injury protection insureds for all previous such benefits paid. 929 930 SECTION 36. Declaratory judgment. In addition to the provisions of Section 35 of this act, because the Legislature 931 finds and declares that questions of law may exist with respect to 932 933 the constitutionality of some of the sections of this act, the 934 public welfare requires that such questions with respect to this 935 act be resolved with expedition prior to such time as its 936 mandatory provisions take effect in order to avoid disruption of 937 the orderly implementation of its provisions. Therefore, the 938 Legislature finds that the remedy of declaratory judgment to determine the constitutionality of the provisions of this act 939 940 should immediately be made available to determine those important 941 questions, in order to avoid utter confusion by the public in the event this act is declared unconstitutional. Therefore, any 942 943 resident of the state is authorized to forthwith bring an action 944 for a declaratory judgment against the commissioner to determine 

- the constitutionality of this act's provisions. Such court shall reserve the questions of law for the advice of the Supreme Court as provided by law. In the interest of expediting a decision, the Supreme Court may suspend its rules as provided therein.
- 949 **SECTION 37.** This act shall take effect and be in force from 950 and after July 1, 2007.