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- AN ACT relating to the motor vehicle reparations act.
 Be it enacted by the General Assembly of the Commonwealth of Kentucky:
 → Section 1. KRS 304.39-020 is amended to read as follows:
 As used in this subtitle <u>unless context requires otherwise</u>:
 (1) "Added reparation benefits" means[mean] benefits provided by op
- 5 (1) "Added reparation benefits" <u>means</u>[mean] benefits provided by optional added
 6 reparation insurance.

7 (2)"Basic reparation benefits" *means*[mean] benefits providing reimbursement for net 8 loss suffered through injury arising out of the operation, maintenance, or use of a 9 motor vehicle, subject, where applicable, to the limits, deductibles, exclusions, 10 disqualifications, and other conditions provided in this subtitle. The maximum 11 amount of basic reparation benefits payable for all economic loss resulting from 12 injury to any one (1) person as the result of one (1) accident shall be ten thousand 13 dollars (\$10,000), regardless of the number of persons entitled to *the*[such] benefits 14 or the number of providers of security obligated to pay *the*[such] benefits. Basic 15 reparation benefits consist of one (1) or more of the elements defined as "loss."

- 16 (3) "Basic reparation insured" means:
- 17 (a) A person identified by name as an insured in a contract of basic reparation
 18 insurance complying with this subtitle; and
- (b) While residing in the same household with a named insured, the following
 persons not identified by name as an insured in any other contract of basic
 reparation insurance complying with this subtitle: a spouse or other relative of
 a named insured; and a minor in the custody of a named insured or of a
 relative residing in the same household with the named insured if he usually
 makes his home in the same family unit, even though he temporarily lives
 elsewhere.
- 26 (4) <u>"Current Procedural Terminology" or "CPT" means a system developed by the</u>

American Medical Association for standardizing the terminology and coding to

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1		describe medical services and procedures.
2	<u>(5)</u>	''Health care provider'' or ''provider'' means a health facility, as defined in KRS
3		216B.015, or an individual who is licensed to practice in Kentucky under KRS
4		Chapter 311, 311A, 311B, 312, 313, 314, 314A, 315, 319, 319A, 319B, 320, or
5		327, or is similarly licensed in another jurisdiction.
6	<u>(6)</u>	"Injury" and "injury to person" means [mean] bodily harm, sickness, disease, or
7		death.
8	<u>(7)</u>	"International Statistical Classification of Diseases" or "ICD" means the system
9		of medical coding used to classify hospital care in the United States.
10	<u>(8)</u> [((5)] "Loss" means accrued economic loss consisting only of medical
11		expenses[expense], work loss, replacement services loss, and, if injury causes
12		death, survivor's economic loss and survivor's replacement services loss.
13		Noneconomic detriment is not loss. However, economic loss is loss although caused
14		by pain and suffering or physical impairment.
15		(a) ["Medical expense" means reasonable charges incurred for reasonably needed
16		products, services, and accommodations, including those for medical care,
17		physical rehabilitation, rehabilitative occupational training, licensed
18		ambulance services, and other remedial treatment and care. "Medical expense"
19		may include non-medical remedial treatment rendered in accordance with a
20		recognized religious method of healing. The term includes a total charge not
21		in excess of one thousand dollars (\$1,000) per person for expenses in any way
22		related to funeral, cremation, and burial. It does not include that portion of a
23		charge for a room in a hospital, clinic, convalescent or nursing home, or any
24		other institution engaged in providing nursing care and related services, in
25		excess of a reasonable and customary charge for semi-private
26		accommodations, unless intensive care is medically required. Medical expense
27		shall include all healing arts professions licensed by the Commonwealth of

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- Kentucky. There shall be a presumption that any medical bill submitted is
 reasonable.
- 3 (b)]"Work loss" means loss of income from work the injured person would
 4 probably have performed if he had not been injured, and expenses reasonably
 5 incurred by him in obtaining services in lieu of those he would have
 6 performed for income, reduced by any income from substitute work actually
 7 performed by him.
- 8 (b)[(c)] "Replacement services loss" means expenses reasonably incurred in
 9 obtaining ordinary and necessary services in lieu of those the injured person
 10 would have performed, not for income but for the benefit of himself or his
 11 family, if he had not been injured.
- (c)[(d)] "Survivor's economic loss" means loss after decedent's death of
 contributions of things of economic value to his survivors, not including
 services they would have received from the decedent if he had not suffered the
 fatal injury, less expenses of the survivors avoided by reason of decedent's
 death.
- 17 (d)[(e)] "Survivor's replacement services loss" means expenses reasonably
 18 incurred by survivors after decedent's death in obtaining ordinary and
 19 necessary services in lieu of those the decedent would have performed for
 20 their benefit if he had not suffered the fatal injury, less expenses of the
 21 survivors avoided by reason of the decedent's death and not subtracted in
 22 calculating survivor's economic loss.
- 23 (9)[(6)] "Use of a motor vehicle" means any utilization of the motor vehicle as a
 24 vehicle including occupying, entering into, and alighting from it. It does not
 25 include:
- 26 (a) Conduct within the course of a business of repairing, servicing, or otherwise
 27 maintaining motor vehicles unless the conduct occurs off the business

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1	premises; or
2	(b) Conduct in the course of loading and unloading the vehicle unless the conduct
3	occurs while occupying, entering into, or alighting from it.
4	(10) "Medical expenses" means charges incurred for reasonably needed products,
5	services, and accommodations, including those for medical care, physical
6	rehabilitation, rehabilitative occupational training, licensed ambulance services,
7	massage therapy, and other remedial treatment and care. Medical expenses:
8	(a) Includes:
9	1. A total charge not in excess of one thousand dollars (\$1,000) per
10	person for expenses in any way related to funeral, cremation, and
11	<u>burial;</u>
12	2. Only charges incurred for:
13	a. Services rendered by a provider, as defined in subsection (5) of
14	this section, which are within the provider's legally authorized
15	scope of practice; or
16	b. Nonmedical remedial treatment rendered in accordance with a
17	recognized religious method of healing; and
18	3. Charges incurred for services provided by an individual licensed
19	under KRS 309.353, which are rendered in coordination with a
20	provider or at a provider's business location;
21	(b) Shall be limited to:
22	1. The respective fee set forth for that medical expense in the Kentucky
23	workers' compensation medical fee schedule established in KRS
24	342.035 and in any administrative regulation adopted pursuant to
25	KRS 342.035(1), including any billing requirements; or
26	2. If no fee is set by the Kentucky workers' compensation medical fee
27	schedule, the usual and customary rate charged for the product,

1	service, or accommodation. Reparation obligors may consult
2	independent services in order to determine the usual and customary
3	rate; and
4	(c) Shall be deemed to be reasonably needed only if they are:
5	<u>1.</u> Commonly and customarily recognized in accordance with generally
6	accepted standards of medical practice as appropriate for the purpose
7	of preventing, diagnosing, or treatment of the injury; and
8	2. Clinically appropriate in terms of type, frequency, extent, site, and
9	duration.
10	(11) [(7)] "Motor vehicle" means any vehicle which transports persons or property upon
11	the public highways of the Commonwealth, propelled by other than muscular power
12	except road rollers, road graders, farm tractors, vehicles on which power shovels are
13	mounted, [such] other construction equipment customarily used only on the site of
14	construction and which is not practical for the transportation of persons or property
15	upon the highways, <u>any[such]</u> vehicles <u>that[as]</u> travel exclusively upon rails, and
16	any[such] vehicles that[as] are propelled by electrical power obtained from
17	overhead wires while being operated within any municipality or where said vehicles
18	do not travel more than five (5) miles beyond the said limits of any municipality.
19	Motor vehicle shall not mean moped as defined in this section.
20	(12) [(8)] "Moped" means either a motorized bicycle whose frame design may include
21	one (1) or more horizontal crossbars supporting a fuel tank so long as it also has

- pedals, or a motorized bicycle with a step-through type frame which may or may not
 have pedals rated no more than two (2) brake horsepower, a cylinder capacity not
 exceeding fifty (50) cubic centimeters, an automatic transmission not requiring
 clutching or shifting by the operator after the drive system is engaged, and capable
 of a maximum speed of not more than thirty (30) miles per hour.
- 27 (13)[(9)] "Public roadway" means a way open to the use of the public for purposes of

1	motor vehicle travel.
2	(14)[(10)] "Net loss" means loss less benefits or advantages, from sources other than
3	basic and added reparation insurance, required to be subtracted from loss in
4	calculating net loss.
5	(15)[(11)] "Noneconomic detriment" means pain, suffering, inconvenience, physical
6	impairment, and other nonpecuniary damages recoverable under the tort law of this
7	Commonwealth. The term does not include punitive or exemplary damages.
8	(16) [(12)] "Owner" means a person, other than a lienholder or secured party, who owns
9	or has title to a motor vehicle or is entitled to the use and possession of a motor
10	vehicle subject to a security interest held by another person. The term does not
11	include a lessee under a lease not intended as security.
12	(17)[(13)] "Reparation obligor" means an insurer, self-insurer, or obligated government
13	providing basic or added reparation benefits under this subtitle.
14	(18)[(14)] "Survivor" means a person identified in KRS 411.130 as one entitled to
15	receive benefits by reason of the death of another person.
16	(19)[(15)] A "User" means a person who resides in a household in which any person
17	owns or maintains a motor vehicle.
18	(20)[(16)] "Maintaining a motor vehicle" means having legal custody, possession or
19	responsibility for a motor vehicle by one other than an owner or operator.
20	(21) [(17)] "Security" means any continuing undertaking complying with this subtitle, for
21	payment of tort liabilities, basic reparation benefits, and all other obligations
22	imposed by this subtitle.
23	(22) "Usual and customary rate" means the average amount of all charges for a
24	particular health care service performed by the same category of licensed hospital
25	and provided in the same geographical area, as defined by Metropolitan Service
26	Areas and Core Based Statistical Areas, as reported pursuant to Section 2 of this
27	Act.

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1	→SECTION 2. A NEW SECTION OF SUBTITLE 39 OF KRS CHAPTER 304
2	IS CREATED TO READ AS FOLLOWS:
3	(1) The commissioner shall, by promulgating administrative regulations:
4	(a) Specify a nonprofit organization that maintains a database of billed charges
5	submitted by hospitals for health care services to be used as a benchmark
6	for determining the usual and customary rate for health care services
7	provided by hospitals. The nonprofit shall not be affiliated with an insurer
8	offering health benefit plans in Kentucky or a reparation obligor in
9	<u>Kentucky; and</u>
10	(b) Require all health benefit plans to submit to the department annually, but
11	no later than March 1 of each year, all of the billed charges it receives from
12	both in-network and out-of-network hospitals for each health care service
13	<u>billed by a hospital.</u>
14	(2) Any information required to be reported under this section shall:
15	(a) Be reported on in a standardized manner by ICD or CPT codes as
16	determined by the department;
17	(b) Not include any personally identifying information of an insured; and
18	(c) Include appropriate geographical information of the billing provider.
19	(3) The department shall provide information reported pursuant to this section to the
20	nonprofit identified in subsection (1) of this section, or if no nonprofit exists
21	meeting the requirements of subsection (1) of this section, then the department
22	shall publish this information in a report on its Web site by June 1 of each year.
23	→Section 3. KRS 304.39-130 is amended to read as follows:
24	Basic reparation benefits payable for work loss, survivor's economic loss, replacement
25	services loss, and survivor's replacement services loss arising from injury to one (1)
26	person and attributable to the calendar week during which the accident causing injury
27	occurs and to each calendar week thereafter may not exceed <i>four</i> [two] hundred dollars

1 (\$400[\$200]), provided for any lesser period. If the injured person's earnings or work are 2 seasonal or irregular, the weekly limit shall be equitably adjusted or apportioned on an 3 annual basis. 4 Section 4. KRS 304.39-241 is amended to read as follows: 5 An insured may direct the payment of benefits among the different elements of loss, if the 6 direction is provided in writing to the reparation obligor. A reparation obligor shall honor 7 the written direction of benefits provided by an insured on a prospective basis *following* 8 its receipt of the direction of benefits. The insured may also explicitly direct the payment 9 of benefits for related medical expenses already paid arising from a covered loss to reimburse: 10 A health benefit plan as defined by KRS 304.17A-005(22); 11 (1)12 (2)A limited health service benefit plan as defined by KRS 304.17C-010; 13 (3) Medicaid; 14 (4) Medicare; or 15 A Medicare supplement provider. (5)16 → Section 5. KRS 304.39-245 is amended to read as follows: 17 A reparation obligor may request or negotiate a reduction or modification of charges (1) 18 from a provider [of services] to a secured person. In no event shall a provider [of

19 services] which agrees to a reduction or modification of the charges bill the secured 20 person for the amount of the reduction or modification.

- 21 (2) A provider shall not knowingly collect, attempt to collect, coerce, or attempt to
- 22 <u>coerce, directly or indirectly, the payment of any charge for a medical expense</u>
- 23 under this subtitle covered by reparation benefits in excess of the amount allowed
- 24 <u>under Section 1 of this Act, nor cause the consumer report, as defined in KRS</u>
- 25 <u>367.363, of any person entitled to basic reparations benefits to be impaired by</u>
- 26 reason of that person's failure to pay the excess charge.
- 27 (3) Nothing in this section is intended to prohibit a provider of services from billing

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- 1 charges to a secured party if the charges are not paid by a reparation obligor because
- 2 the reparation benefits have been exhausted.
- \Rightarrow Section 6. The provisions of this Act apply to loss, as defined in Section 1 of
- 4 this Act, incurred on or after January 1, 2019.
- 5 \rightarrow Section 7. This Act takes effect January 1, 2019.