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By: Delegate Donoghue

Introduced and read first time: February 8, 2013 Assigned to: Economic Matters

A BILL ENTITLED

1 AN ACT concerning

Motor Vehicle Liability Insurance – Mandatory Coverage – Medical and Hospital Benefits

- 4 FOR the purpose of requiring each insurer that provides motor vehicle liability $\mathbf{5}$ insurance in the State to provide certain medical and hospital benefits to 6 certain individuals under certain circumstances; establishing the minimum 7 amount of certain coverage and the qualifying expenses that may be claimed under the coverage; authorizing the exclusion of certain benefits from coverage 8 9 for certain individuals under certain circumstances; providing for certain 10 coordination of benefits of certain coverage with certain other motor vehicle liability insurance; prohibiting certain surcharges and retiering of certain 11 12coverage under certain circumstances; providing for the payment of certain 13 benefits in a certain manner; requiring an insurer to provide certain notice under certain circumstances; providing for certain interest on certain overdue 14payments; and generally relating to motor vehicle liability insurance. 15
- 16 BY adding to
- 17 Article Insurance
- 18 Section 19–505.1
- 19 Annotated Code of Maryland
- 20 (2011 Replacement Volume and 2012 Supplement)
- 21 BY repealing and reenacting, with amendments,
- 22 Article Insurance
- 23 Section 19–507 and 19–508
- 24 Annotated Code of Maryland
- 25 (2011 Replacement Volume and 2012 Supplement)
- 26 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 27 MARYLAND, That the Laws of Maryland read as follows:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



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1	Article – Insurance
2	19–505.1.
3	(A) EACH INSURER THAT ISSUES, SELLS, OR DELIVERS A MOTOR
4	VEHICLE LIABILITY INSURANCE POLICY IN THE STATE SHALL PROVIDE
5	COVERAGE FOR THE MEDICAL AND HOSPITAL BENEFITS DESCRIBED IN THIS
6	SECTION FOR EACH OF THE FOLLOWING INDIVIDUALS:
7	(1) THE FIRST NAMED INSURED, AND ANY FAMILY MEMBER OF
8	THE FIRST NAMED INSURED WHO RESIDES IN THE HOUSEHOLD OF THE FIRST
9	NAMED INSURED, WHO IS INJURED IN A MOTOR VEHICLE ACCIDENT, INCLUDING
10	AN ACCIDENT THAT INVOLVES AN UNINSURED MOTOR VEHICLE OR A MOTOR
11	VEHICLE THE IDENTITY OF WHICH CANNOT BE ASCERTAINED;
12	(2) ANY OTHER INDIVIDUAL WHO IS INJURED IN A MOTOR
13	VEHICLE ACCIDENT WHILE USING THE INSURED MOTOR VEHICLE WITH THE
14	EXPRESS OR IMPLIED PERMISSION OF THE NAMED INSURED; AND
15 10	(3) AN INDIVIDUAL WHO IS INJURED IN A MOTOR VEHICLE
$\frac{16}{17}$	ACCIDENT WHILE OCCUPYING THE INSURED MOTOR VEHICLE AS A GUEST OR PASSENGER.
11	I ASSENCE.
18	(B) THE MINIMUM MEDICAL AND HOSPITAL BENEFITS PROVIDED BY AN
19	INSURER UNDER THIS SECTION SHALL INCLUDE UP TO \$1,000 FOR PAYMENT OF
20	ALL REASONABLE AND NECESSARY EXPENSES THAT ARISE FROM A MOTOR
21	VEHICLE ACCIDENT AND THAT ARE INCURRED WITHIN 3 YEARS AFTER THE
$\frac{22}{23}$	ACCIDENT FOR NECESSARY PROSTHETIC DEVICES AND AMBULANCE, DENTAL, HOSPITAL, MEDICAL, PROFESSIONAL NURSING, SURGICAL, AND X-RAY
$\frac{20}{24}$	SERVICES.
25	(C) AN INSURER MAY EXCLUDE FROM THE COVERAGE UNDER THIS
26	SECTION BENEFITS FOR:
27	(1) AN INDIVIDUAL, OTHERWISE INSURED UNDER THE POLICY,
28	WHO:
29	(I) INTENTIONALLY CAUSES THE MOTOR VEHICLE
30	ACCIDENT THAT RESULTS IN THE INJURY FOR WHICH BENEFITS ARE CLAIMED;
91	(II) IS INTUDED IN A MOTOR VEHICLE ACCIDENT WHILE
$\frac{31}{32}$	(II) IS INJURED IN A MOTOR VEHICLE ACCIDENT WHILE OPERATING OR VOLUNTARILY RIDING IN A MOTOR VEHICLE THAT THE
33	INDIVIDUAL KNOWS IS STOLEN; OR

WHILE

(III) IS INJURED IN A MOTOR VEHICLE ACCIDENT WHILE

VIOLATING

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OR

3 **TRANSPORTATION ARTICLE; OR** (2) 4 THE NAMED INSURED OR A FAMILY MEMBER OF THE NAMED $\mathbf{5}$ INSURED WHO RESIDES IN THE HOUSEHOLD OF THE NAMED INSURED FOR AN 6 INJURY THAT OCCURS WHILE THE NAMED INSURED OR FAMILY MEMBER IS 7 OCCUPYING AN UNINSURED MOTOR VEHICLE THAT IS OWNED BY: 8 **(I)** THE NAMED INSURED; OR 9 **(II)** AN IMMEDIATE FAMILY MEMBER OF THE NAMED INSURED WHO RESIDES IN THE HOUSEHOLD OF THE NAMED INSURED. 10 11 19 - 507.The benefits described in § 19–505 OR § 19–505.1 of this subtitle shall be 12(a) 13 payable without regard to: 14the fault or nonfault of the named insured or the recipient of (1)15benefits in causing or contributing to the motor vehicle accident; and 16(2)any collateral source of medical, hospital, or wage continuation 17benefits. 18(b)Subject to paragraph (2) of this subsection, if the insured has both (1)coverage for the benefits described in § 19-505 OR § 19-505.1 of this subtitle and a 1920collateral source of medical, hospital, or wage continuation benefits, the insurer or 21insurers may coordinate the policies to provide for nonduplication of benefits, subject 22to appropriate reductions in premiums for one or both of the policies approved by the 23Commissioner. 24(2)The named insured may: 25(i) elect to coordinate the policies by indicating in writing which 26policy is to be the primary policy; or 27reject the coordination of policies and nonduplication of (ii) 28benefits. 29An insurer that issues a policy that contains the coverage described in § (c)30 19-505 OR § 19-505.1 of this subtitle may not impose a surcharge or retier the policy for a claim or payment made under that coverage and, at the time the policy is issued, 31

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shall notify the policyholder in writing that a surcharge may not be imposed and the
 policy may not be retiered for a claim or payment made under that coverage.

3 (d) An insurer that provides the benefits described in § 19–505 OR § 4 19–505.1 of this subtitle does not have a right of subrogation and does not have a 5 claim against any other person or insurer to recover any benefits paid because of the 6 alleged fault of the other person in causing or contributing to a motor vehicle accident.

7 19–508.

8 (a) (1) Subject to paragraphs (2) and (3) of this subsection, an insurer 9 shall make all payments of the benefits described in § 19–505 OR § 19–505.1 of this 10 subtitle periodically as claims for the benefits arise and within 30 days after the 11 insurer receives satisfactory proof of claim.

12 (2) A policy that contains the coverage described in § 19-505 OR § 13 **19-505.1** of this subtitle may:

(i) set a period of not less than 12 months after the date of the
motor vehicle accident within which the original claim for benefits must be filed with
the insurer; and

17 (ii) provide that if, after a lapse in the period of total disability 18 or in the medical treatment of an injured individual who has received benefits under 19 that coverage, the individual claims additional benefits based on an alleged recurrence 20 of the injury for which the original claim for benefits was made, the insurer may 21 require reasonable medical proof of the alleged recurrence.

(3) The aggregate benefits payable to an individual under this
subsection may not exceed the maximum limits stated in the policy.

(b) (1) When an insurer that provides the benefits described in § 19–505 OR § 19–505.1 of this subtitle receives written notice from an insured of the occurrence of a motor vehicle accident for which benefits may be available under § 19–505 OR § 19–505.1 of this subtitle, the insurer shall notify the insured by mail of the latest date on which a claim may be filed for benefits under § 19–505 OR § 19–505.1 of this subtitle as provided in subsection (a)(2)(i) of this section.

30 (2) An insurer is not required under paragraph (1) of this subsection to 31 send any notice to the insured as to any first party claim for benefits other than the 32 benefits under § 19–505 **OR § 19–505.1** of this subtitle.

33 (c) Payments of benefits that are not made in accordance with this section 34 and that are overdue shall bear simple interest at the rate of 1.5% per month.

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- $\frac{1}{2}$ SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
- October 1, 2013.