1	MOTOR VEHICLE INSURANCE MODIFICATIONS
2	2012 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Todd E. Kiser
5	Senate Sponsor: John L. Valentine
6 7	LONG TITLE
8	General Description:
9	This bill modifies the Insurance Code by amending provisions relating to uninsured and
10	underinsured motorist coverage.
11	Highlighted Provisions:
12	This bill:
13	<ul> <li>provides a definition of new policy for purposes of determining the limits of</li> </ul>
14	uninsured or underinsured motorist coverage;
15	<ul> <li>provides that the definition of new policy applies retroactively to any claim arising</li> </ul>
16	on or after January 1, 2001 for which, as of May 1, 2012, an insured has not made a
17	written demand for arbitration or filed a complaint in a court of competent
18	jurisdiction;
19	<ul> <li>amends provisions relating to renewal notices for underinsured motorist coverage;</li> </ul>
20	and
21	<ul><li>makes technical changes.</li></ul>
22	Money Appropriated in this Bill:
23	None
24	Other Special Clauses:
25	None
26	<b>Utah Code Sections Affected:</b>
27	AMENDS:



31A-22-302, as last amended by Laws of Utah 2008, Chapter 36
<b>31A-22-305</b> , as last amended by Laws of Utah 2011, Chapters 297 and 431
<b>31A-22-305.3</b> , as last amended by Laws of Utah 2011, Chapter 431
Be it enacted by the Legislature of the state of Utah:
Section 1. Section 31A-22-302 is amended to read:
31A-22-302. Required components of motor vehicle insurance policies
Exceptions.
(1) Every policy of insurance or combination of policies purchased to satisfy the
owner's or operator's security requirement of Section 41-12a-301 shall include:
(a) motor vehicle liability coverage under Sections 31A-22-303 and 31A-22-304;
(b) uninsured motorist coverage under Section 31A-22-305, unless affirmatively
waived under Subsection $31A-22-305[(4+)](5)$ ;
(c) underinsured motorist coverage under Section 31A-22-305.3, unless affirmatively
waived under Subsection $31A-22-305.3[\frac{(2)}{(3)}]$ ; and
(d) except as provided in Subsection (2) and subject to Subsection (3), personal injury
protection under Sections 31A-22-306 through 31A-22-309.
(2) A policy of insurance or combination of policies, purchased to satisfy the owner's
or operator's security requirement of Section 41-12a-301 for a motorcycle, off-highway vehicle,
street-legal all-terrain vehicle, trailer, or semitrailer is not required to have personal injury
protection under Sections 31A-22-306 through 31A-22-309.
(3) (a) First party medical coverages may be offered or included in policies issued to
motorcycle, off-highway vehicle, street-legal all-terrain vehicle, trailer, and semitrailer owners
or operators.
(b) Owners and operators of motorcycles, off-highway vehicles, street-legal all-terrain
vehicles, trailers, and semitrailers are not covered by personal injury protection coverages in
connection with injuries incurred while operating any of these vehicles.
(4) First party medical coverage expenses shall be governed by the relative value study
provisions under Subsections 31A-22-307(2) and (3).
Section 2. Section <b>31A-22-305</b> is amended to read:
31A-22-305. Uninsured motorist coverage.

59	(1) As used in this section, "covered persons" includes:
60	(a) the named insured;
61	(b) persons related to the named insured by blood, marriage, adoption, or guardianship,
62	who are residents of the named insured's household, including those who usually make their
63	home in the same household but temporarily live elsewhere;
64	(c) any person occupying or using a motor vehicle:
65	(i) referred to in the policy; or
66	(ii) owned by a self-insured; and
67	(d) any person who is entitled to recover damages against the owner or operator of the
68	uninsured or underinsured motor vehicle because of bodily injury to or death of persons under
69	Subsection (1)(a), (b), or (c).
70	(2) As used in this section, "uninsured motor vehicle" includes:
71	(a) (i) a motor vehicle, the operation, maintenance, or use of which is not covered
72	under a liability policy at the time of an injury-causing occurrence; or
73	(ii) (A) a motor vehicle covered with lower liability limits than required by Section
74	31A-22-304; and
75	(B) the motor vehicle described in Subsection (2)(a)(ii)(A) is uninsured to the extent of
76	the deficiency;
77	(b) an unidentified motor vehicle that left the scene of an accident proximately caused
78	by the motor vehicle operator;
79	(c) a motor vehicle covered by a liability policy, but coverage for an accident is
80	disputed by the liability insurer for more than 60 days or continues to be disputed for more than
81	60 days; or
82	(d) (i) an insured motor vehicle if, before or after the accident, the liability insurer of
83	the motor vehicle is declared insolvent by a court of competent jurisdiction; and
84	(ii) the motor vehicle described in Subsection (2)(d)(i) is uninsured only to the extent
85	that the claim against the insolvent insurer is not paid by a guaranty association or fund.
86	(3) [(a)] Uninsured motorist coverage under Subsection 31A-22-302(1)(b) provides
87	coverage for covered persons who are legally entitled to recover damages from owners or
88	operators of uninsured motor vehicles because of bodily injury, sickness, disease, or death.

[(b)] (4) (a) For new policies written on or after January 1, 2001, the limits of

90	uninsured motorist coverage shall be equal to the lesser of the limits of the <u>named</u> insured's
91	motor vehicle liability coverage or the maximum uninsured motorist coverage limits available
92	by the insurer under the <u>named</u> insured's motor vehicle policy, unless [the] <u>a named</u> insured
93	rejects or purchases coverage in a lesser amount by signing an acknowledgment form that:
94	(i) is filed with the department;
95	(ii) is provided by the insurer;
96	(iii) waives the higher coverage;
97	(iv) reasonably explains the purpose of uninsured motorist coverage; and
98	(v) discloses the additional premiums required to purchase uninsured motorist
99	coverage with limits equal to the lesser of the limits of the <u>named</u> insured's motor vehicle
100	liability coverage or the maximum uninsured motorist coverage limits available by the insurer
101	under the <u>named</u> insured's motor vehicle policy.
102	(b) For purposes of this Subsection (4), "new policy" means:
103	(i) any policy that is issued which does not include a renewal or reinstatement of an
104	existing policy; or
105	(ii) a change to an existing policy that results in:
106	(A) a named insured being added to or deleted from the policy; or
107	(B) a change in the limits of the named insured's motor vehicle liability coverage.
108	(c) (i) As used in this Subsection (4)(c), "additional motor vehicle" means a change
109	that increases the total number of vehicles insured by the policy, and does not include
110	replacement, substitute, or temporary vehicles.
111	(ii) The adding of an additional motor vehicle to an existing personal lines or
112	commercial lines policy does not constitute a "new policy" for purposes of Subsection (4)(b).
113	(iii) If an additional motor vehicle is added to a personal lines policy where uninsured
114	motorist coverage has been rejected, or where uninsured motorist limits are lower than the
115	named insured's motor vehicle liability limits, the insurer shall provide a notice to a named
116	insured within thirty days that:
117	(A) reasonably explains the purpose of uninsured motorist coverage; and
118	(B) encourages the named insured to contact the insurance company or insurance
119	producer for quotes as to the additional premiums required to purchase uninsured motorist
120	coverage with limits equal to the lesser of the limits of the named insured's motor vehicle

121	liability coverage or the maximum uninsured motorist coverage limits available by the insurer
122	under the named insured's motor vehicle policy.
123	(d) A change in policy number resulting from any policy change not identified under
124	Subsection (4)(b)(ii) does not constitute a new policy.
125	(e) (i) Subsection (4)(b) applies retroactively to any claim arising on or after January 1
126	2001 for which, as of May 1, 2012, an insured has not made a written demand for arbitration of
127	filed a complaint in a court of competent jurisdiction.
128	(ii) The Legislature finds that the retroactive application of Subsection (4):
129	(A) does not enlarge, eliminate, or destroy vested rights; and
130	(B) clarifies legislative intent.
131	[(c)] (f) A self-insured, including a governmental entity, may elect to provide
132	uninsured motorist coverage in an amount that is less than its maximum self-insured retention
133	under Subsections $[\frac{(3)(b)}{(4)(a)}]$ and $[\frac{(4)}{(5)}]$ (a) by issuing a declaratory memorandum or
134	policy statement from the chief financial officer or chief risk officer that declares the:
135	(i) self-insured entity's coverage level; and
136	(ii) process for filing an uninsured motorist claim.
137	[(d)] (g) Uninsured motorist coverage may not be sold with limits that are less than the
138	minimum bodily injury limits for motor vehicle liability policies under Section 31A-22-304.
139	[(e)] (h) The acknowledgment under Subsection [(3)(b)] (4)(a) continues for that issue
140	of the uninsured motorist coverage until the <u>named</u> insured <u>requests</u> , in writing, [requests]
141	different uninsured motorist coverage from the insurer.
142	[(f)] (i) In conjunction with the first two renewal notices sent after January 1, 2001,
143	for policies existing on that date, the insurer shall disclose in the same medium as the premium
144	renewal notice, an explanation of:
145	(A) the purpose of uninsured motorist coverage; and
146	[(B) the costs associated with increasing the coverage in amounts up to and including
147	the maximum amount available by the insurer under the insured's motor vehicle policy.]
148	(B) a disclosure of the additional premiums required to purchase uninsured motorist
149	coverage with limits equal to the lesser of the limits of the named insured's motor vehicle
150	liability coverage or the maximum uninsured motorist coverage limits available by the insurer
151	under the named insured's motor vehicle policy.

in violation of Section 41-1a-1314; or

(ii) The disclosure required under [this] Subsection [(3)(f)] (4)(i)(i) shall be sent to all
named insureds that carry uninsured motorist coverage limits in an amount less than the named
insured's motor vehicle liability policy limits or the maximum uninsured motorist coverage
limits available by the insurer under the <u>named</u> insured's motor vehicle policy.
(j) For purposes of this Subsection (4), a notice or disclosure sent to a named insured in
a household constitutes notice or disclosure to all insureds within the household.
[4] (5) (a) (i) Except as provided in Subsection $[4]$ (5)(b), the named insured may
reject uninsured motorist coverage by an express writing to the insurer that provides liability
coverage under Subsection 31A-22-302(1)(a).
(ii) This rejection shall be on a form provided by the insurer that includes a reasonable
explanation of the purpose of uninsured motorist coverage.
(iii) This rejection continues for that issuer of the liability coverage until the insured in
writing requests uninsured motorist coverage from that liability insurer.
(b) (i) All persons, including governmental entities, that are engaged in the business of,
or that accept payment for, transporting natural persons by motor vehicle, and all school
districts that provide transportation services for their students, shall provide coverage for all
motor vehicles used for that purpose, by purchase of a policy of insurance or by self-insurance,
uninsured motorist coverage of at least \$25,000 per person and \$500,000 per accident.
(ii) This coverage is secondary to any other insurance covering an injured covered
person.
(c) Uninsured motorist coverage:
(i) is secondary to the benefits provided by Title 34A, Chapter 2, Workers'
Compensation Act;
(ii) may not be subrogated by the workers' compensation insurance carrier;
(iii) may not be reduced by any benefits provided by workers' compensation insurance;
(iv) may be reduced by health insurance subrogation only after the covered person has
been made whole;
(v) may not be collected for bodily injury or death sustained by a person:
(A) while committing a violation of Section 41-1a-1314;
(B) who, as a passenger in a vehicle, has knowledge that the vehicle is being operated

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- (vi) notwithstanding Subsection  $\left[\frac{(4)(c)(v)}{(c)(v)}\right]$  (5)(c)(v), may be recovered:
- (A) for a person under 18 years of age who is injured within the scope of Subsection [(4)(c)(v)] (5)(c)(v) but limited to medical and funeral expenses; or
  - (B) by a law enforcement officer as defined in Section 53-13-103, who is injured within the course and scope of the law enforcement officer's duties.
  - (d) As used in this Subsection [<del>(4)</del>] (5), "motor vehicle" has the same meaning as under Section 41-1a-102.
  - [(5)] (6) When a covered person alleges that an uninsured motor vehicle under Subsection (2)(b) proximately caused an accident without touching the covered person or the motor vehicle occupied by the covered person, the covered person shall show the existence of the uninsured motor vehicle by clear and convincing evidence consisting of more than the covered person's testimony.
  - [(6)] (7) (a) The limit of liability for uninsured motorist coverage for two or more motor vehicles may not be added together, combined, or stacked to determine the limit of insurance coverage available to an injured person for any one accident.
  - (b) (i) Subsection [ $\frac{(6)}{(7)}$ (a) applies to all persons except a covered person as defined under Subsection [ $\frac{(7)}{(8)}$ (b)(ii).
  - (ii) A covered person as defined under Subsection [<del>(7)</del>] (8)(b)(ii) is entitled to the highest limits of uninsured motorist coverage afforded for any one motor vehicle that the covered person is the named insured or an insured family member.
  - (iii) This coverage shall be in addition to the coverage on the motor vehicle the covered person is occupying.
    - (iv) Neither the primary nor the secondary coverage may be set off against the other.
  - (c) Coverage on a motor vehicle occupied at the time of an accident shall be primary coverage, and the coverage elected by a person described under Subsections (1)(a) and (b) shall be secondary coverage.
  - [(7)] (8) (a) Uninsured motorist coverage under this section applies to bodily injury, sickness, disease, or death of covered persons while occupying or using a motor vehicle only if the motor vehicle is described in the policy under which a claim is made, or if the motor vehicle is a newly acquired or replacement motor vehicle covered under the terms of the policy.

Except as provided in Subsection [(6)] (7) or this Subsection [(7)] (8), a covered person injured in a motor vehicle described in a policy that includes uninsured motorist benefits may not elect to collect uninsured motorist coverage benefits from any other motor vehicle insurance policy under which the person is a covered person.

- (b) Each of the following persons may also recover uninsured motorist benefits under any one other policy in which they are described as a "covered person" as defined in Subsection (1):
  - (i) a covered person injured as a pedestrian by an uninsured motor vehicle; and
- 222 (ii) except as provided in Subsection [<del>(7)</del>] <u>(8)</u>(c), a covered person injured while occupying or using a motor vehicle that is not owned, leased, or furnished:
  - (A) to the covered person;

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- (B) to the covered person's spouse; or
- (C) to the covered person's resident parent or resident sibling.
- (c) (i) A covered person may recover benefits from no more than two additional policies, one additional policy from each parent's household if the covered person is:
  - (A) a dependent minor of parents who reside in separate households; and
  - (B) injured while occupying or using a motor vehicle that is not owned, leased, or furnished:
  - (I) to the covered person;
    - (II) to the covered person's resident parent; or
    - (III) to the covered person's resident sibling.
  - (ii) Each parent's policy under this Subsection [<del>(7)</del>] (8)(c) is liable only for the percentage of the damages that the limit of liability of each parent's policy of uninsured motorist coverage bears to the total of both parents' uninsured coverage applicable to the accident.
  - (d) A covered person's recovery under any available policies may not exceed the full amount of damages.
  - (e) A covered person in Subsection [<del>(7)</del>] <u>(8)</u>(b) is not barred against making subsequent elections if recovery is unavailable under previous elections.
- 243 (f) (i) As used in this section, "interpolicy stacking" means recovering benefits for a 244 single incident of loss under more than one insurance policy.

245	(ii) Except to the extent permitted by Subsection [(6)] (7) and this Subsection [(7)] (8),
246	interpolicy stacking is prohibited for uninsured motorist coverage.
247	[(8)] (9) (a) When a claim is brought by a named insured or a person described in
248	Subsection (1) and is asserted against the covered person's uninsured motorist carrier, the
249	claimant may elect to resolve the claim:
250	(i) by submitting the claim to binding arbitration; or
251	(ii) through litigation.
252	(b) Unless otherwise provided in the policy under which uninsured benefits are
253	claimed, the election provided in Subsection [ $(8)$ ] $(9)$ (a) is available to the claimant only.
254	(c) Once the claimant has elected to commence litigation under Subsection [ <del>(8)</del> ]
255	(9)(a)(ii), the claimant may not elect to resolve the claim through binding arbitration under this
256	section without the written consent of the uninsured motorist carrier.
257	(d) (i) Unless otherwise agreed to in writing by the parties, a claim that is submitted to
258	binding arbitration under Subsection [(8)] (9)(a)(i) shall be resolved by a single arbitrator.
259	(ii) All parties shall agree on the single arbitrator selected under Subsection [(8)]
260	( <u>9)(</u> d)(i).
261	(iii) If the parties are unable to agree on a single arbitrator as required under Subsection
262	[(8)] (9)(d)(ii), the parties shall select a panel of three arbitrators.
263	(e) If the parties select a panel of three arbitrators under Subsection [(8)] (9)(d)(iii):
264	(i) each side shall select one arbitrator; and
265	(ii) the arbitrators appointed under Subsection [(8)] (9)(e)(i) shall select one additional
266	arbitrator to be included in the panel.
267	(f) Unless otherwise agreed to in writing:
268	(i) each party shall pay an equal share of the fees and costs of the arbitrator selected
269	under Subsection [ $\frac{(8)}{(9)}$ ] $\frac{(9)}{(0)}$ (i); or
270	(ii) if an arbitration panel is selected under Subsection [(8)] (9)(d)(iii):
271	(A) each party shall pay the fees and costs of the arbitrator selected by that party; and
272	(B) each party shall pay an equal share of the fees and costs of the arbitrator selected
273	under Subsection [ <del>(8)</del> ] <u>(9)</u> (e)(ii).
274	(g) Except as otherwise provided in this section or unless otherwise agreed to in

writing by the parties, an arbitration proceeding conducted under this section shall be governed

by Title 78B, Chapter 11, Utah Uniform Arbitration Act.

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- 277 (h) The arbitration shall be conducted in accordance with Rules 26 through 37, 54, and 278 68 of the Utah Rules of Civil Procedure.
  - (i) All issues of discovery shall be resolved by the arbitrator or the arbitration panel.
  - (j) A written decision by a single arbitrator or by a majority of the arbitration panel shall constitute a final decision.
  - (k) (i) Except as provided in Subsection [<del>(9)</del>] (10), the amount of an arbitration award may not exceed the uninsured motorist policy limits of all applicable uninsured motorist policies, including applicable uninsured motorist umbrella policies.
  - (ii) If the initial arbitration award exceeds the uninsured motorist policy limits of all applicable uninsured motorist policies, the arbitration award shall be reduced to an amount equal to the combined uninsured motorist policy limits of all applicable uninsured motorist policies.
  - (l) The arbitrator or arbitration panel may not decide the issues of coverage or extra-contractual damages, including:
    - (i) whether the claimant is a covered person;
    - (ii) whether the policy extends coverage to the loss; or
    - (iii) any allegations or claims asserting consequential damages or bad faith liability.
  - (m) The arbitrator or arbitration panel may not conduct arbitration on a class-wide or class-representative basis.
  - (n) If the arbitrator or arbitration panel finds that the action was not brought, pursued, or defended in good faith, the arbitrator or arbitration panel may award reasonable attorney fees and costs against the party that failed to bring, pursue, or defend the claim in good faith.
  - (o) An arbitration award issued under this section shall be the final resolution of all claims not excluded by Subsection [(8)] (9)(1) between the parties unless:
    - (i) the award was procured by corruption, fraud, or other undue means;
    - (ii) either party, within 20 days after service of the arbitration award:
    - (A) files a complaint requesting a trial de novo in the district court; and
- 304 (B) serves the nonmoving party with a copy of the complaint requesting a trial de novo under Subsection [(8)] (9)(o)(ii)(A).
  - (p) (i) Upon filing a complaint for a trial de novo under Subsection [<del>(8)</del>] (9)(o), the

claim shall proceed through litigation pursuant to the Utah Rules of Civil Procedure and Utah Rules of Evidence in the district court.

- (ii) In accordance with Rule 38, Utah Rules of Civil Procedure, either party may request a jury trial with a complaint requesting a trial de novo under Subsection [<del>(8)</del>] (9)(o)(ii)(A).
- (q) (i) If the claimant, as the moving party in a trial de novo requested under Subsection [(8)] (9)(o), does not obtain a verdict that is at least \$5,000 and is at least 20% greater than the arbitration award, the claimant is responsible for all of the nonmoving party's costs.
- (ii) If the uninsured motorist carrier, as the moving party in a trial de novo requested under Subsection [(8)] (9)(0), does not obtain a verdict that is at least 20% less than the arbitration award, the uninsured motorist carrier is responsible for all of the nonmoving party's costs.
- (iii) Except as provided in Subsection [(8)] (9)(q)(iv), the costs under this Subsection [(8)] (9)(q) shall include:
  - (A) any costs set forth in Rule 54(d), Utah Rules of Civil Procedure; and
  - (B) the costs of expert witnesses and depositions.

- (iv) An award of costs under this Subsection [ $\frac{(8)}{(9)}$ ]  $\frac{(9)}{(q)}$  may not exceed \$2,500 unless Subsection [ $\frac{(9)}{(10)}$ ]  $\frac{(10)}{(h)}$ (iii) applies.
- (r) For purposes of determining whether a party's verdict is greater or less than the arbitration award under Subsection [(8)] (9)(q), a court may not consider any recovery or other relief granted on a claim for damages if the claim for damages:
  - (i) was not fully disclosed in writing prior to the arbitration proceeding; or
- (ii) was not disclosed in response to discovery contrary to the Utah Rules of Civil Procedure.
- (s) If a district court determines, upon a motion of the nonmoving party, that the moving party's use of the trial de novo process was filed in bad faith in accordance with Section 78B-5-825, the district court may award reasonable attorney fees to the nonmoving party.
- (t) Nothing in this section is intended to limit any claim under any other portion of an applicable insurance policy.

(u) If there are multiple uninsured motorist policies, as set forth in Subsection [<del>(7)</del>] (8), the claimant may elect to arbitrate in one hearing the claims against all the uninsured motorist carriers.

- [(9)] (10) (a) Within 30 days after a covered person elects to submit a claim for uninsured motorist benefits to binding arbitration or files litigation, the covered person shall provide to the uninsured motorist carrier:
  - (i) a written demand for payment of uninsured motorist coverage benefits, setting forth:
  - (A) the specific monetary amount of the demand; and
  - (B) the factual and legal basis and any supporting documentation for the demand;
  - (ii) a written statement under oath disclosing:

- (A) (I) the names and last known addresses of all health care providers who have rendered health care services to the covered person that are material to the claims for which uninsured motorist benefits are sought for a period of five years preceding the date of the event giving rise to the claim for uninsured motorist benefits up to the time the election for arbitration or litigation has been exercised; and
- (II) whether the covered person has seen other health care providers who have rendered health care services to the covered person, which the covered person claims are immaterial to the claims for which uninsured motorist benefits are sought, for a period of five years preceding the date of the event giving rise to the claim for uninsured motorist benefits up to the time the election for arbitration or litigation has been exercised that have not been disclosed under Subsection [(9)] (10)(a)(ii)(A)(I);
- (B) (I) the names and last known addresses of all health insurers or other entities to whom the covered person has submitted claims for health care services or benefits material to the claims for which uninsured motorist benefits are sought, for a period of five years preceding the date of the event giving rise to the claim for uninsured motorist benefits up to the time the election for arbitration or litigation has been exercised; and
- (II) whether the identity of any health insurers or other entities to whom the covered person has submitted claims for health care services or benefits, which the covered person claims are immaterial to the claims for which uninsured motorist benefits are sought, for a period of five years preceding the date of the event giving rise to the claim for uninsured motorist benefits up to the time the election for arbitration or litigation have not been disclosed;

(C) if lost wages, diminished earning capacity, or similar damages are claimed, all employers of the covered person for a period of five years preceding the date of the event giving rise to the claim for uninsured motorist benefits up to the time the election for arbitration or litigation has been exercised;

- (D) other documents to reasonably support the claims being asserted; and
- (E) all state and federal statutory lienholders including a statement as to whether the covered person is a recipient of Medicare or Medicaid benefits or Utah Children's Health Insurance Program benefits under Title 26, Chapter 40, Utah Children's Health Insurance Act, or if the claim is subject to any other state or federal statutory liens; and
- (iii) signed authorizations to allow the uninsured motorist carrier to only obtain records and billings from the individuals or entities disclosed.
- (b) (i) If the uninsured motorist carrier determines that the disclosure of undisclosed health care providers or health care insurers under Subsection [<del>(9)</del>] (10)(a)(ii) is reasonably necessary, the uninsured motorist carrier may:
- (A) make a request for the disclosure of the identity of the health care providers or health care insurers; and
- (B) make a request for authorizations to allow the uninsured motorist carrier to only obtain records and billings from the individuals or entities not disclosed.
  - (ii) If the covered person does not provide the requested information within 10 days:
- (A) the covered person shall disclose, in writing, the legal or factual basis for the failure to disclose the health care providers or health care insurers; and
- (B) either the covered person or the uninsured motorist carrier may request the arbitrator or arbitration panel to resolve the issue of whether the identities or records are to be provided if the covered person has elected arbitration.
- (iii) The time periods imposed by Subsection [(9)] (10)(c)(i) are tolled pending resolution of the dispute concerning the disclosure and production of records of the health care providers or health care insurers.
- (c) (i) An uninsured motorist carrier that receives an election for arbitration or a notice of filing litigation and the demand for payment of uninsured motorist benefits under Subsection [(9)] (10)(a)(i) shall have a reasonable time, not to exceed 60 days from the date of the demand and receipt of the items specified in Subsections [(9)] (10)(a)(i) through (iii), to:

400 (A) provide a written response to the written demand for payment provided for in 401 Subsection [(9)] (10)(a)(i); 402 (B) except as provided in Subsection [(9)] (10)(c)(i)(C), tender the amount, if any, of 403 the uninsured motorist carrier's determination of the amount owed to the covered person; and 404 (C) if the covered person is a recipient of Medicare or Medicaid benefits or Utah 405 Children's Health Insurance Program benefits under Title 26, Chapter 40, Utah Children's 406 Health Insurance Act, or if the claim is subject to any other state or federal statutory liens, 407 tender the amount, if any, of the uninsured motorist carrier's determination of the amount owed 408 to the covered person less: 409 (I) if the amount of the state or federal statutory lien is established, the amount of the 410 lien; or 411 (II) if the amount of the state or federal statutory lien is not established, two times the 412 amount of the medical expenses subject to the state or federal statutory lien until such time as 413 the amount of the state or federal statutory lien is established. 414 (ii) If the amount tendered by the uninsured motorist carrier under Subsection [<del>(9)</del>] 415 (10)(c)(i) is the total amount of the uninsured motorist policy limits, the tendered amount shall 416 be accepted by the covered person. 417 (d) A covered person who receives a written response from an uninsured motorist 418 carrier as provided for in Subsection [(9)] (10)(c)(i), may: 419 (i) elect to accept the amount tendered in Subsection [(9)] (10)(c)(i) as payment in full 420 of all uninsured motorist claims; or 421 (ii) elect to: 422 (A) accept the amount tendered in Subsection [(9)] (10)(c)(i) as partial payment of all 423 uninsured motorist claims; and 424 (B) litigate or arbitrate the remaining claim. 425 (e) If a covered person elects to accept the amount tendered under Subsection [<del>(9)</del>] 426 (10)(c)(i) as partial payment of all uninsured motorist claims, the final award obtained through 427 arbitration, litigation, or later settlement shall be reduced by any payment made by the 428 uninsured motorist carrier under Subsection [(9)] (10)(c)(i). 429 (f) In an arbitration proceeding on the remaining uninsured claims:

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(i) the parties may not disclose to the arbitrator or arbitration panel the amount paid

under Subsection [(9)] (10)(c)(i) until after the arbitration award has been rendered; and

- (ii) the parties may not disclose the amount of the limits of uninsured motorist benefits provided by the policy.
- (g) If the final award obtained through arbitration or litigation is greater than the average of the covered person's initial written demand for payment provided for in Subsection [(9)] (10)(a)(i) and the uninsured motorist carrier's initial written response provided for in Subsection [(9)] (10)(c)(i), the uninsured motorist carrier shall pay:
- (i) the final award obtained through arbitration or litigation, except that if the award exceeds the policy limits of the subject uninsured motorist policy by more than \$15,000, the amount shall be reduced to an amount equal to the policy limits plus \$15,000; and
  - (ii) any of the following applicable costs:
  - (A) any costs as set forth in Rule 54(d), Utah Rules of Civil Procedure;
- (B) the arbitrator or arbitration panel's fee; and

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- 444 (C) the reasonable costs of expert witnesses and depositions used in the presentation of 445 evidence during arbitration or litigation.
  - (h) (i) The covered person shall provide an affidavit of costs within five days of an arbitration award.
  - (ii) (A) Objection to the affidavit of costs shall specify with particularity the costs to which the uninsured motorist carrier objects.
    - (B) The objection shall be resolved by the arbitrator or arbitration panel.
  - (iii) The award of costs by the arbitrator or arbitration panel under Subsection [(9)] (10)(g)(ii) may not exceed \$5,000.
  - (i) (i) A covered person shall disclose all material information, other than rebuttal evidence, as specified in Subsection [(9)] (10)(a).
  - (ii) If the information under Subsection [(9)] (10)(i)(i) is not disclosed, the covered person may not recover costs or any amounts in excess of the policy under Subsection [(9)] (10)(g).
  - (j) This Subsection [<del>(9)</del>] (10) does not limit any other cause of action that arose or may arise against the uninsured motorist carrier from the same dispute.
  - (k) The provisions of this Subsection [(9)] (10) only apply to motor vehicle accidents that occur on or after March 30, 2010.

462	Section 3. Section 31A-22-305.3 is amended to read:
463	31A-22-305.3. Underinsured motorist coverage.
464	(1) As used in this section:
465	(a) "Covered person" has the same meaning as defined in Section 31A-22-305.
466	(b) (i) "Underinsured motor vehicle" includes a motor vehicle, the operation,
467	maintenance, or use of which is covered under a liability policy at the time of an injury-causing
468	occurrence, but which has insufficient liability coverage to compensate fully the injured party
469	for all special and general damages.
470	(ii) The term "underinsured motor vehicle" does not include:
471	(A) a motor vehicle that is covered under the liability coverage of the same policy that
472	also contains the underinsured motorist coverage;
473	(B) an uninsured motor vehicle as defined in Subsection 31A-22-305(2); or
474	(C) a motor vehicle owned or leased by:
475	(I) a named insured;
476	(II) a named insured's spouse; or
477	(III) a dependent of a named insured.
478	(2) (a) [ <del>(i)</del> ] Underinsured motorist coverage under Subsection 31A-22-302(1)(c)
479	provides coverage for a covered person who is legally entitled to recover damages from an
480	owner or operator of an underinsured motor vehicle because of bodily injury, sickness, disease,
481	or death.
482	[(ii)] (b) A covered person occupying or using a motor vehicle owned, leased, or
483	furnished to the covered person, the covered person's spouse, or covered person's resident
484	relative may recover underinsured benefits only if the motor vehicle is:
485	[(A)] (i) described in the policy under which a claim is made; or
486	[(B)] (ii) a newly acquired or replacement motor vehicle covered under the terms of the
487	policy.
488	[(b)] (3) (a) For new policies written on or after January 1, 2001, the limits of
489	underinsured motorist coverage shall be equal to the lesser of the limits of the <u>named</u> insured's
490	motor vehicle liability coverage or the maximum underinsured motorist coverage limits
491	available by the insurer under the <u>named</u> insured's motor vehicle policy, unless [the] <u>a named</u>
492	insured rejects or purchases coverage in a lesser amount by signing an acknowledgment form

493	that:
494	(i) is filed with the department;
495	(ii) is provided by the insurer;
496	(iii) waives the higher coverage;
497	(iv) reasonably explains the purpose of underinsured motorist coverage; and
498	(v) discloses the additional premiums required to purchase underinsured motorist
499	coverage with limits equal to the lesser of the limits of the <u>named</u> insured's motor vehicle
500	liability coverage or the maximum underinsured motorist coverage limits available by the
501	insurer under the <u>named</u> insured's motor vehicle policy.
502	(b) For purposes of this Subsection (3), "new policy" means:
503	(i) any policy that is issued which does not include a renewal or reinstatement of an
504	existing policy; or
505	(ii) a change to an existing policy that results in:
506	(A) a named insured being added to or deleted from the policy; or
507	(B) a change in the limits of the named insured's motor vehicle liability coverage.
508	(c) (i) As used in this Subsection (3)(c), "additional motor vehicle" means a change
509	that increases the total number of vehicles insured by the policy, and does not include
510	replacement, substitute, or temporary vehicles.
511	(ii) The adding of an additional motor vehicle to an existing personal lines or
512	commercial lines policy does not constitute a "new policy" for purposes of Subsection (3)(b).
513	(iii) If an additional motor vehicle is added to a personal lines policy where
514	underinsured motorist coverage has been rejected, or where underinsured motorist limits are
515	lower than the named insured's motor vehicle liability limits, the insurer shall provide a notice
516	to a named insured within thirty days that:
517	(A) reasonably explains the purpose of underinsured motorist coverage; and
518	(B) encourages the named insured to contact the insurance company or insurance
519	producer for quotes as to the additional premiums required to purchase underinsured motorist
520	coverage with limits equal to the lesser of the limits of the named insured's motor vehicle
521	liability coverage or the maximum underinsured motorist coverage limits available by the
522	insurer under the named insured's motor vehicle policy.
523	(d) A change in policy number resulting from any policy change not identified under

524	Subsection (3)(b)(ii) does not constitute a new policy.
525	(e) (i) Subsection (3)(b) applies retroactively to any claim arising on or after January 1,
526	2001 for which, as of May 1, 2012, an insured has not made a written demand for arbitration or
527	filed a complaint in a court of competent jurisdiction.
528	(ii) The Legislature finds that the retroactive application of Subsection (3):
529	(A) does not enlarge, eliminate, or destroy vested rights; and
530	(B) clarifies legislative intent.
531	[(c)] (f) A self-insured, including a governmental entity, may elect to provide
532	underinsured motorist coverage in an amount that is less than its maximum self-insured
533	retention under Subsections $[\frac{(2)(b)}{(3)(a)}]$ and $[\frac{(2)(g)}{(3)(j)}]$ by issuing a declaratory
534	memorandum or policy statement from the chief financial officer or chief risk officer that
535	declares the:
536	(i) self-insured entity's coverage level; and
537	(ii) process for filing an underinsured motorist claim.
538	[(d)] (g) Underinsured motorist coverage may not be sold with limits that are less than:
539	(i) \$10,000 for one person in any one accident; and
540	(ii) at least \$20,000 for two or more persons in any one accident.
541	$[\underline{(e)}]$ (h) An acknowledgment under Subsection $[\underline{(2)(b)}]$ (3)(a) continues for that issuer
542	of the underinsured motorist coverage until the <u>named</u> insured, in writing, requests different
543	underinsured motorist coverage from the insurer.
544	[(f)] (i) The named insured's underinsured motorist coverage, as described in
545	Subsection (2)[(a)], is secondary to the liability coverage of an owner or operator of an
546	underinsured motor vehicle, as described in Subsection (1).
547	(ii) Underinsured motorist coverage may not be set off against the liability coverage of
548	the owner or operator of an underinsured motor vehicle, but shall be added to, combined with,
549	or stacked upon the liability coverage of the owner or operator of the underinsured motor
550	vehicle to determine the limit of coverage available to the injured person.
551	[(g) (i) A named insured may reject underinsured motorist coverage by an express
552	writing to the insurer that provides liability coverage under Subsection 31A-22-302(1)(a).]
553	[(ii) A written rejection under this Subsection (2)(g) shall be on a form provided by the
554	insurer that includes a reasonable explanation of the nurnose of underinsured motorist coverage

and when it would be applicable.

[(iii) A written rejection under this Subsection (2)(g) continues for that issuer of the liability coverage until the insured in writing requests underinsured motorist coverage from that liability insurer.]

- (j) (i) In conjunction with the first two renewal notices sent after January 1, 2001, for policies existing on that date, the insurer shall disclose in the same medium as the premium renewal notice, an explanation of:
  - (A) the purpose of underinsured motorist coverage; and
- (B) a disclosure of the additional premiums required to purchase underinsured motorist coverage with limits equal to the lesser of the limits of the named insured's motor vehicle liability coverage or the maximum underinsured motorist coverage limits available by the insurer under the named insured's motor vehicle policy.
- (ii) The disclosure required under this Subsection (3)(j) shall be sent to all named insureds that carry underinsured motorist coverage limits in an amount less than the named insured's motor vehicle liability policy limits or the maximum underinsured motorist coverage limits available by the insurer under the named insured's motor vehicle policy.
- (k) For purposes of this Subsection (3), a notice or disclosure sent to a named insured in a household constitutes notice or disclosure to all insureds within the household.
- [(3)] (4) (a) (i) Except as provided in this Subsection [(3)] (4), a covered person injured in a motor vehicle described in a policy that includes underinsured motorist benefits may not elect to collect underinsured motorist coverage benefits from another motor vehicle insurance policy.
- (ii) The limit of liability for underinsured motorist coverage for two or more motor vehicles may not be added together, combined, or stacked to determine the limit of insurance coverage available to an injured person for any one accident.
- (iii) Subsection [(3)] (4)(a)(ii) applies to all persons except a covered person described under Subsections [(3)] (4)(b)(i) and (ii).
- (b) (i) Except as provided in Subsection [(3)] (4)(b)(ii), a covered person injured while occupying, using, or maintaining a motor vehicle that is not owned, leased, or furnished to the covered person, the covered person's spouse, or the covered person's resident parent or resident sibling, may also recover benefits under any one other policy under which the covered person is

also a covered person.

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(ii) (A) A covered person may recover benefits from no more than two additional policies, one additional policy from each parent's household if the covered person is:

- (I) a dependent minor of parents who reside in separate households; and
- (II) injured while occupying or using a motor vehicle that is not owned, leased, or furnished to the covered person, the covered person's resident parent, or the covered person's resident sibling.
- (B) Each parent's policy under this Subsection [(3)] (4)(b)(ii) is liable only for the percentage of the damages that the limit of liability of each parent's policy of underinsured motorist coverage bears to the total of both parents' underinsured coverage applicable to the accident.
- (iii) A covered person's recovery under any available policies may not exceed the full amount of damages.
- (iv) Underinsured coverage on a motor vehicle occupied at the time of an accident is primary coverage, and the coverage elected by a person described under Subsections 31A-22-305(1)(a) and (b) is secondary coverage.
  - (v) The primary and the secondary coverage may not be set off against the other.
- (vi) A covered person as described under Subsection [(3)] (4)(b)(i) is entitled to the highest limits of underinsured motorist coverage under only one additional policy per household applicable to that covered person as a named insured, spouse, or relative.
- (vii) A covered injured person is not barred against making subsequent elections if recovery is unavailable under previous elections.
- (viii) (A) As used in this section, "interpolicy stacking" means recovering benefits for a single incident of loss under more than one insurance policy.
- (B) Except to the extent permitted by this Subsection [(3)] (4), interpolicy stacking is prohibited for underinsured motorist coverage.
  - (c) Underinsured motorist coverage:
- (i) is secondary to the benefits provided by Title 34A, Chapter 2, Workers'Compensation Act;
  - (ii) may not be subrogated by a workers' compensation insurance carrier;
- (iii) may not be reduced by benefits provided by workers' compensation insurance;

61/	(iv) may be reduced by health insurance subrogation only after the covered person is
618	made whole;
619	(v) may not be collected for bodily injury or death sustained by a person:
620	(A) while committing a violation of Section 41-1a-1314;
621	(B) who, as a passenger in a vehicle, has knowledge that the vehicle is being operated
622	in violation of Section 41-1a-1314; or
623	(C) while committing a felony; and
624	(vi) notwithstanding Subsection [ $\frac{(3)}{(4)}$ ] $\frac{(4)}{(c)}$ (v), may be recovered:
625	(A) for a person under 18 years of age who is injured within the scope of Subsection
626	[(3)] $(4)$ (c)(v), but is limited to medical and funeral expenses; or
627	(B) by a law enforcement officer as defined in Section 53-13-103, who is injured
628	within the course and scope of the law enforcement officer's duties.
629	[4) (5) The inception of the loss under Subsection 31A-21-313(1) for underinsured
630	motorist claims occurs upon the date of the last liability policy payment.
631	$[\underbrace{(5)}]$ (a) Within five business days after notification that all liability insurers have
632	tendered their liability policy limits, the underinsured carrier shall either:
633	(i) waive any subrogation claim the underinsured carrier may have against the person
634	liable for the injuries caused in the accident; or
635	(ii) pay the insured an amount equal to the policy limits tendered by the liability carrier.
636	(b) If neither option is exercised under Subsection $[(5)]$ $(6)$ (a), the subrogation claim is
637	considered to be waived by the underinsured carrier.
638	[(6)] (7) Except as otherwise provided in this section, a covered person may seek,
639	subject to the terms and conditions of the policy, additional coverage under any policy:
640	(a) that provides coverage for damages resulting from motor vehicle accidents; and
641	(b) that is not required to conform to Section 31A-22-302.
642	$[\frac{7}{2}]$ (8) (a) When a claim is brought by a named insured or a person described in
643	Subsection 31A-22-305(1) and is asserted against the covered person's underinsured motorist
644	carrier, the claimant may elect to resolve the claim:
645	(i) by submitting the claim to binding arbitration; or
646	(ii) through litigation.
647	(b) Unless otherwise provided in the policy under which underinsured benefits are

claimed, the election provided in Subsection [(7)] (8)(a) is available to the claimant only.

- (c) Once a claimant elects to commence litigation under Subsection [<del>(7)</del>] (8)(a)(ii), the claimant may not elect to resolve the claim through binding arbitration under this section without the written consent of the underinsured motorist coverage carrier.
- (d) (i) Unless otherwise agreed to in writing by the parties, a claim that is submitted to binding arbitration under Subsection  $[\frac{7}{2}]$  (8)(a)(i) shall be resolved by a single arbitrator.
- (ii) All parties shall agree on the single arbitrator selected under Subsection  $[\frac{7}{(7)}]$  (8)(d)(i).
- (iii) If the parties are unable to agree on a single arbitrator as required under Subsection [<del>(7)</del>] (8)(d)(ii), the parties shall select a panel of three arbitrators.
  - (e) If the parties select a panel of three arbitrators under Subsection  $[\frac{7}{2}]$  (8)(d)(iii):
  - (i) each side shall select one arbitrator; and

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- 660 (ii) the arbitrators appointed under Subsection [<del>(7)</del>] (8)(e)(i) shall select one additional arbitrator to be included in the panel.
  - (f) Unless otherwise agreed to in writing:
  - (i) each party shall pay an equal share of the fees and costs of the arbitrator selected under Subsection  $[\frac{7}{8}]$  (8)(d)(i); or
    - (ii) if an arbitration panel is selected under Subsection [<del>(7)</del>] (8)(d)(iii):
    - (A) each party shall pay the fees and costs of the arbitrator selected by that party; and
    - (B) each party shall pay an equal share of the fees and costs of the arbitrator selected under Subsection [(7)] (8)(e)(ii).
    - (g) Except as otherwise provided in this section or unless otherwise agreed to in writing by the parties, an arbitration proceeding conducted under this section is governed by Title 78B, Chapter 11, Utah Uniform Arbitration Act.
  - (h) An arbitration shall be conducted in accordance with Rules 26 through 37, 54, and 68 of the Utah Rules of Civil Procedure.
    - (i) An issue of discovery shall be resolved by the arbitrator or the arbitration panel.
  - (j) A written decision by a single arbitrator or by a majority of the arbitration panel constitutes a final decision.
- 677 (k) (i) Except as provided in Subsection [<del>(8)</del>] <u>(9)</u>, the amount of an arbitration award 678 may not exceed the underinsured motorist policy limits of all applicable underinsured motorist

policies, including applicable underinsured motorist umbrella policies.

- (ii) If the initial arbitration award exceeds the underinsured motorist policy limits of all applicable underinsured motorist policies, the arbitration award shall be reduced to an amount equal to the combined underinsured motorist policy limits of all applicable underinsured motorist policies.
- (l) The arbitrator or arbitration panel may not decide an issue of coverage or extra-contractual damages, including:
  - (i) whether the claimant is a covered person;
  - (ii) whether the policy extends coverage to the loss; or
  - (iii) an allegation or claim asserting consequential damages or bad faith liability.
- (m) The arbitrator or arbitration panel may not conduct arbitration on a class-wide or class-representative basis.
- (n) If the arbitrator or arbitration panel finds that the arbitration is not brought, pursued, or defended in good faith, the arbitrator or arbitration panel may award reasonable attorney fees and costs against the party that failed to bring, pursue, or defend the arbitration in good faith.
- (o) An arbitration award issued under this section shall be the final resolution of all claims not excluded by Subsection  $[\frac{7}{2}]$  (8)(1) between the parties unless:
  - (i) the award is procured by corruption, fraud, or other undue means;
  - (ii) either party, within 20 days after service of the arbitration award:
  - (A) files a complaint requesting a trial de novo in the district court; and
- (B) serves the nonmoving party with a copy of the complaint requesting a trial de novo under Subsection [(7)] (8)(o)(ii)(A).
- (p) (i) Upon filing a complaint for a trial de novo under Subsection [<del>(7)</del>] (8)(o), a claim shall proceed through litigation pursuant to the Utah Rules of Civil Procedure and Utah Rules of Evidence in the district court.
- (ii) In accordance with Rule 38, Utah Rules of Civil Procedure, either party may request a jury trial with a complaint requesting a trial de novo under Subsection [<del>(7)</del>] (8)(o)(ii)(A).
- (q) (i) If the claimant, as the moving party in a trial de novo requested under Subsection [<del>(7)</del>] (8)(o), does not obtain a verdict that is at least \$5,000 and is at least 20% greater than the arbitration award, the claimant is responsible for all of the nonmoving party's

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(ii) If the underinsured motorist carrier, as the moving party in a trial de novo requested under Subsection [<del>(7)</del>] (8)(0), does not obtain a verdict that is at least 20% less than the arbitration award, the underinsured motorist carrier is responsible for all of the nonmoving party's costs.

- (iii) Except as provided in Subsection [(7)] (8)(q)(iv), the costs under this Subsection [(7)] (8)(q) shall include:
  - (A) any costs set forth in Rule 54(d), Utah Rules of Civil Procedure; and
  - (B) the costs of expert witnesses and depositions.
- 719 (iv) An award of costs under this Subsection [<del>(7)</del>] (8)(q) may not exceed \$2,500 unless 720 Subsection [<del>(8)</del>] (9)(h)(iii) applies.
  - (r) For purposes of determining whether a party's verdict is greater or less than the arbitration award under Subsection [(7)] (8)(q), a court may not consider any recovery or other relief granted on a claim for damages if the claim for damages:
    - (i) was not fully disclosed in writing prior to the arbitration proceeding; or
  - (ii) was not disclosed in response to discovery contrary to the Utah Rules of Civil Procedure.
  - (s) If a district court determines, upon a motion of the nonmoving party, that a moving party's use of the trial de novo process is filed in bad faith in accordance with Section 78B-5-825, the district court may award reasonable attorney fees to the nonmoving party.
  - (t) Nothing in this section is intended to limit a claim under another portion of an applicable insurance policy.
  - (u) If there are multiple underinsured motorist policies, as set forth in Subsection [(3)] (4), the claimant may elect to arbitrate in one hearing the claims against all the underinsured motorist carriers.
  - [(8)] (9) (a) Within 30 days after a covered person elects to submit a claim for underinsured motorist benefits to binding arbitration or files litigation, the covered person shall provide to the underinsured motorist carrier:
- 738 (i) a written demand for payment of underinsured motorist coverage benefits, setting forth:
  - (A) the specific monetary amount of the demand; and

(B) the factual and legal basis and any supporting documentation for the demand;

(ii) a written statement under oath disclosing:

- (A) (I) the names and last known addresses of all health care providers who have rendered health care services to the covered person that are material to the claims for which the underinsured motorist benefits are sought for a period of five years preceding the date of the event giving rise to the claim for underinsured motorist benefits up to the time the election for arbitration or litigation has been exercised; and
- (II) whether the covered person has seen other health care providers who have rendered health care services to the covered person, which the covered person claims are immaterial to the claims for which underinsured motorist benefits are sought, for a period of five years preceding the date of the event giving rise to the claim for underinsured motorist benefits up to the time the election for arbitration or litigation has been exercised that have not been disclosed under Subsection [(8)] (9)(a)(ii)(A)(I);
- (B) (I) the names and last known addresses of all health insurers or other entities to whom the covered person has submitted claims for health care services or benefits material to the claims for which underinsured motorist benefits are sought, for a period of five years preceding the date of the event giving rise to the claim for underinsured motorist benefits up to the time the election for arbitration or litigation has been exercised; and
- (II) whether the identity of any health insurers or other entities to whom the covered person has submitted claims for health care services or benefits, which the covered person claims are immaterial to the claims for which underinsured motorist benefits are sought, for a period of five years preceding the date of the event giving rise to the claim for underinsured motorist benefits up to the time the election for arbitration or litigation have not been disclosed;
- (C) if lost wages, diminished earning capacity, or similar damages are claimed, all employers of the covered person for a period of five years preceding the date of the event giving rise to the claim for underinsured motorist benefits up to the time the election for arbitration or litigation has been exercised;
  - (D) other documents to reasonably support the claims being asserted; and
- (E) all state and federal statutory lienholders including a statement as to whether the covered person is a recipient of Medicare or Medicaid benefits or Utah Children's Health Insurance Program benefits under Title 26, Chapter 40, Utah Children's Health Insurance Act,

or if the claim is subject to any other state or federal statutory liens; and

(iii) signed authorizations to allow the underinsured motorist carrier to only obtain records and billings from the individuals or entities disclosed.

- (b) (i) If the underinsured motorist carrier determines that the disclosure of undisclosed health care providers or health care insurers under Subsection [(8)] (9)(a)(ii) is reasonably necessary, the underinsured motorist carrier may:
- (A) make a request for the disclosure of the identity of the health care providers or health care insurers; and
- (B) make a request for authorizations to allow the underinsured motorist carrier to only obtain records and billings from the individuals or entities not disclosed.
  - (ii) If the covered person does not provide the requested information within 10 days:
- (A) the covered person shall disclose, in writing, the legal or factual basis for the failure to disclose the health care providers or health care insurers; and
- (B) either the covered person or the underinsured motorist carrier may request the arbitrator or arbitration panel to resolve the issue of whether the identities or records are to be provided if the covered person has elected arbitration.
- (iii) The time periods imposed by Subsection [(8)] (9)(c)(i) are tolled pending resolution of the dispute concerning the disclosure and production of records of the health care providers or health care insurers.
- (c) (i) An underinsured motorist carrier that receives an election for arbitration or a notice of filing litigation and the demand for payment of underinsured motorist benefits under Subsection [<del>(8)</del>] (9)(a)(i) shall have a reasonable time, not to exceed 60 days from the date of the demand and receipt of the items specified in Subsections [<del>(8)</del>] (9)(a)(i) through (iii), to:
- (A) provide a written response to the written demand for payment provided for in Subsection [(8)] (9)(a)(i);
- (B) except as provided in Subsection [(8)] (9)(c)(i)(C), tender the amount, if any, of the underinsured motorist carrier's determination of the amount owed to the covered person; and
- (C) if the covered person is a recipient of Medicare or Medicaid benefits or Utah Children's Health Insurance Program benefits under Title 26, Chapter 40, Utah Children's Health Insurance Act, or if the claim is subject to any other state or federal statutory liens, tender the amount, if any, of the underinsured motorist carrier's determination of the amount

owed to the covered person less:

(I) if the amount of the state or federal statutory lien is established, the amount of the lien; or

- (II) if the amount of the state or federal statutory lien is not established, two times the amount of the medical expenses subject to the state or federal statutory lien until such time as the amount of the state or federal statutory lien is established.
- (ii) If the amount tendered by the underinsured motorist carrier under Subsection [(8)] (9)(c)(i) is the total amount of the underinsured motorist policy limits, the tendered amount shall be accepted by the covered person.
- (d) A covered person who receives a written response from an underinsured motorist carrier as provided for in Subsection [(8)] (9)(c)(i), may:
- (i) elect to accept the amount tendered in Subsection [(8)] (9)(c)(i) as payment in full of all underinsured motorist claims; or
  - (ii) elect to:
- (A) accept the amount tendered in Subsection [(8)] (9)(c)(i) as partial payment of all underinsured motorist claims; and
  - (B) litigate or arbitrate the remaining claim.
- (e) If a covered person elects to accept the amount tendered under Subsection [(8)] (9)(c)(i) as partial payment of all underinsured motorist claims, the final award obtained through arbitration, litigation, or later settlement shall be reduced by any payment made by the underinsured motorist carrier under Subsection [(8)] (9)(c)(i).
  - (f) In an arbitration proceeding on the remaining underinsured claims:
- (i) the parties may not disclose to the arbitrator or arbitration panel the amount paid under Subsection [(8)] (9)(c)(i) until after the arbitration award has been rendered; and
- (ii) the parties may not disclose the amount of the limits of underinsured motorist benefits provided by the policy.
- (g) If the final award obtained through arbitration or litigation is greater than the average of the covered person's initial written demand for payment provided for in Subsection [(8)] (9)(a)(i) and the underinsured motorist carrier's initial written response provided for in Subsection [(8)] (9)(c)(i), the underinsured motorist carrier shall pay:
- (i) the final award obtained through arbitration or litigation, except that if the award

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834	exceeds the policy limits of the subject underinsured motorist policy by more than \$15,000, the
835	amount shall be reduced to an amount equal to the policy limits plus \$15,000; and
836	(ii) any of the following applicable costs:
837	(A) any costs as set forth in Rule 54(d), Utah Rules of Civil Procedure;
838	(B) the arbitrator or arbitration panel's fee; and
839	(C) the reasonable costs of expert witnesses and depositions used in the presentation of
840	evidence during arbitration or litigation.
841	(h) (i) The covered person shall provide an affidavit of costs within five days of an
842	arbitration award.
843	(ii) (A) Objection to the affidavit of costs shall specify with particularity the costs to
844	which the underinsured motorist carrier objects.
845	(B) The objection shall be resolved by the arbitrator or arbitration panel.
846	(iii) The award of costs by the arbitrator or arbitration panel under Subsection [(8)]
847	(9)(g)(ii) may not exceed \$5,000.
848	(i) (i) A covered person shall disclose all material information, other than rebuttal
849	evidence, as specified in Subsection [ $(8)$ ] $(9)$ (a).
850	(ii) If the information under Subsection [(8)] (9)(i)(i) is not disclosed, the covered
851	person may not recover costs or any amounts in excess of the policy under Subsection [(8)]
852	<u>(9)(g).</u>

(j) This Subsection [(8)] (9) does not limit any other cause of action that arose or may arise against the underinsured motorist carrier from the same dispute.

(k) The provisions of this Subsection [(8)] (9) only apply to motor vehicle accidents that occur on or after March 30, 2010.

Legislative Review Note as of 2-21-12 5:21 PM

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- 28 -