♣ Approved for Filing: S.C. Halverson
 ♣ 02-17-12 2:50 PM

1	reasonal injury projection insurance
2	AMENDMENTS
3	2012 GENERAL SESSION
4	STATE OF UTAH
5	Chief Sponsor: Allen M. Christensen
6	House Sponsor:
7	
8	LONG TITLE
9	General Description:
10	This bill modifies the Insurance Code by amending provisions relating to personal
11	injury protection insurance.
12	Highlighted Provisions:
13	This bill:
14	 provides that an insurer that provides personal injury protection coverage under this
15	section may not discount the reimbursement for a medical expense in excess of the
16	amount of the reasonable value of that medical expense as determined by the
17	relative value study unless the increased discount is allowed through a contract
18	between:
19	• the medical provider; and
20	• the insurer that provides the personal injury protection coverage Ŝ→ [-];
20a	 provides that the medical provider will accept the payments made pursuant to the
20b	Utah RVS fee schedule for covered services as full and final payment and may not submit the
20c	balance of the bill to the patient; and
20d	provides that the original amount of the medical provider's bill shall be used for
20e	purposes of determining whether a person who has or is required to have direct benefit
20f	coverage under a policy which includes personal injury protection may maintain a cause of
20g	action for general damages arising out of personal injuries alleged to have been caused by an
20h	<u>automobile accident.</u> ←Ŝ



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90	not discount the reimbursement for a medical expense in excess of the amount of the
91	reasonable value of the medical expense as determined by the relative value study under
92	Subsection (2)(b) unless the increased discount is allowed through a contract between:
93	(i) the medical provider; and
94	(ii) the insurer that provides the personal injury protection coverage.
94a	$\hat{S} \rightarrow \underline{(g)(i)}$ The medical provider will accept the payments made pursuant to the Utah
94b	RVS fee schedule for covered services as full and final payment and may not submit the
94c	balance of the bill to the patient.
94d	(ii) The original amount of the medical provider's bill shall be used for purposes of
94e	determining whether the requirement of Section 31A-22-309(1)(a)(v) has been met. \leftarrow \$
95	(3) Medical expenses as provided for in Subsection (1)(a) and in Subsection
96	31A-22-309(1)(a)(v) include expenses for any nonmedical remedial care and treatment
97	rendered in accordance with a recognized religious method of healing.
98	(4) The insured may waive for the named insured and the named insured's spouse only
99	the loss of gross income benefits of Subsection (1)(b)(i) if the insured states in writing that:
100	(a) within 31 days of applying for coverage, neither the insured nor the insured's spouse
101	received any earned income from regular employment; and
102	(b) for at least 180 days from the date of the writing and during the period of insurance,
103	neither the insured nor the insured's spouse will receive earned income from regular
104	employment.
105	(5) This section does not:
106	(a) prohibit the issuance of a policy of insurance providing coverages greater than the
107	minimum coverage required under this chapter; or
108	(b) require the segregation of those minimum coverages from other coverages in the
109	same policy.
110	(6) Deductibles are not permitted with respect to the insurance coverages required
111	under this section.

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Legislative Review Note as of 2-16-12 5:05 PM

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