	UNDERINSURED MOTORIST COVERAGE AMENDMENTS
	2024 GENERAL SESSION
	STATE OF UTAH
	<b>Chief Sponsor: Anthony E. Loubet</b>
	Senate Sponsor:
]	LONG TITLE
(	General Description:
	This bill modifies provisions related to underinsured and uninsured motorist coverage.
]	Highlighted Provisions:
	This bill:
	<ul> <li>provides that a covered person occupying a motor vehicle furnished by the covered</li> </ul>
ľ	person's employer may recover underinsured and uninsured motorist benefits; and
	<ul> <li>makes technical and conforming changes.</li> </ul>
Ι	Money Appropriated in this Bill:
	None
(	Other Special Clauses:
	None
l	Utah Code Sections Affected:
ł	AMENDS:
	31A-22-305, as last amended by Laws of Utah 2023, Chapters 69, 185 and 327
	31A-22-305.3, as last amended by Laws of Utah 2023, Chapters 69, 327
1	Be it enacted by the Legislature of the state of Utah:
	Section 1. Section <b>31A-22-305</b> is amended to read:
	31A-22-305. Uninsured motorist coverage.
	(1) As used in this section, "covered persons" includes:

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28 (a) the named insured; 29 (b) for a claim arising on or after May 13, 2014, the named insured's dependent minor 30 children; 31 (c) persons related to the named insured by blood, marriage, adoption, or guardianship, 32 who are residents of the named insured's household, including those who usually make their 33 home in the same household but temporarily live elsewhere; 34 (d) any person occupying or using a motor vehicle: 35 (i) referred to in the policy: or 36 (ii) owned by a self-insured; and 37 (e) any person who is entitled to recover damages against the owner or operator of the 38 uninsured or underinsured motor vehicle because of bodily injury to or death of persons under 39 Subsection (1)(a), (b), (c), or (d). 40 (2) As used in this section. "uninsured motor vehicle" includes: (a) (i) a motor vehicle, the operation, maintenance, or use of which is not covered 41 42 under a liability policy at the time of an injury-causing occurrence; or 43 (ii) (A) a motor vehicle covered with lower liability limits than required by Section 44 31A-22-304; and 45 (B) the motor vehicle described in Subsection (2)(a)(ii)(A) is uninsured to the extent of 46 the deficiency; (b) an unidentified motor vehicle that left the scene of an accident proximately caused 47 48 by the motor vehicle operator; 49 (c) a motor vehicle covered by a liability policy, but coverage for an accident is 50 disputed by the liability insurer for more than 60 days or continues to be disputed for more than 51 60 days; or (d) (i) an insured motor vehicle if, before or after the accident, the liability insurer of 52 53 the motor vehicle is declared insolvent by a court of competent jurisdiction; and 54 (ii) the motor vehicle described in Subsection (2)(d)(i) is uninsured only to the extent 55 that the claim against the insolvent insurer is not paid by a guaranty association or fund. 56 (3) (a) Uninsured motorist coverage under Subsection 31A-22-302(1)(b) provides 57 coverage for covered persons who are legally entitled to recover damages from owners or 58 operators of uninsured motor vehicles because of bodily injury, sickness, disease, or death.

59 (b) A covered person occupying or using a motor vehicle that is owned, furnished, or 60 leased by the covered person's employer may recover uninsured benefits, notwithstanding any 61 regular use exclusion described in the policy. 62 (4) (a) For new policies written on or after January 1, 2001, the limits of uninsured 63 motorist coverage shall be equal to the lesser of the limits of the named insured's motor vehicle liability coverage or the maximum uninsured motorist coverage limits available by the insurer 64 65 under the named insured's motor vehicle policy, unless a named insured rejects or purchases coverage in a lesser amount by signing an acknowledgment form that: 66 67 (i) is filed with the department; 68 (ii) is provided by the insurer; 69 (iii) waives the higher coverage; 70 (iv) need only state in this or similar language that uninsured motorist coverage 71 provides benefits or protection to you and other covered persons for bodily injury resulting 72 from an accident caused by the fault of another party where the other party has no liability 73 insurance; and 74 (v) discloses the additional premiums required to purchase uninsured motorist 75 coverage with limits equal to the lesser of the limits of the named insured's motor vehicle liability coverage or the maximum uninsured motorist coverage limits available by the insurer 76 77 under the named insured's motor vehicle policy. (b) Any selection or rejection under this Subsection (4) continues for that issuer of the 78 79 liability coverage until the insured requests, in writing, a change of uninsured motorist 80 coverage from that liability insurer. 81 (c) (i) Subsections (4)(a) and (b) apply retroactively to any claim arising on or after January 1, 2001, for which, as of May 14, 2013, an insured has not made a written demand for 82 83 arbitration or filed a complaint in a court of competent jurisdiction. 84 (ii) The Legislature finds that the retroactive application of Subsections (4)(a) and (b) 85 clarifies legislative intent and does not enlarge, eliminate, or destroy vested rights. 86 (d) For purposes of this Subsection (4), "new policy" means: 87 (i) any policy that is issued which does not include a renewal or reinstatement of an 88 existing policy; or 89 (ii) a change to an existing policy that results in:

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90 (A) a named insured being added to or deleted from the policy; or 91 (B) a change in the limits of the named insured's motor vehicle liability coverage. 92 (e) (i) As used in this Subsection (4)(e), "additional motor vehicle" means a change 93 that increases the total number of vehicles insured by the policy, and does not include 94 replacement, substitute, or temporary vehicles. 95 (ii) The adding of an additional motor vehicle to an existing personal lines or 96 commercial lines policy does not constitute a new policy for purposes of Subsection (4)(d). 97 (iii) If an additional motor vehicle is added to a personal lines policy where uninsured 98 motorist coverage has been rejected, or where uninsured motorist limits are lower than the 99 named insured's motor vehicle liability limits, the insurer shall provide a notice to a named 100 insured within 30 days that: 101 (A) in the same manner as described in Subsection (4)(a)(iv), explains the purpose of 102 uninsured motorist coverage: and 103 (B) encourages the named insured to contact the insurance company or insurance 104 producer for quotes as to the additional premiums required to purchase uninsured motorist 105 coverage with limits equal to the lesser of the limits of the named insured's motor vehicle liability coverage or the maximum uninsured motorist coverage limits available by the insurer 106 107 under the named insured's motor vehicle policy. 108 (f) A change in policy number resulting from any policy change not identified under 109 Subsection (4)(d)(ii) does not constitute a new policy. 110 (g) (i) Subsection (4)(d) applies retroactively to any claim arising on or after January 1, 2001, for which, as of May 1, 2012, an insured has not made a written demand for arbitration 111 112 or filed a complaint in a court of competent jurisdiction. 113 (ii) The Legislature finds that the retroactive application of Subsection (4): 114 (A) does not enlarge, eliminate, or destroy vested rights; and 115 (B) clarifies legislative intent. 116 (h) A self-insured, including a governmental entity, may elect to provide uninsured motorist coverage in an amount that is less than its maximum self-insured retention under 117 118 Subsections (4)(a) and (5)(a) by issuing a declaratory memorandum or policy statement from 119 the chief financial officer or chief risk officer that declares the: 120 (i) self-insured entity's coverage level; and

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(ii) process for filing an uninsured motorist claim.

- (i) Uninsured motorist coverage may not be sold with limits that are less than the
  minimum bodily injury limits for motor vehicle liability policies under Section 31A-22-304.
- (j) The acknowledgment under Subsection (4)(a) continues for that issuer of the
   uninsured motorist coverage until the named insured requests, in writing, different uninsured
   motorist coverage from the insurer.
- (k) (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 uninsured motorist coverage in the same manner as described in
  Subsection (4)(a)(iv); and
- (B) a disclosure of the additional premiums required to purchase uninsured motorist
  coverage with limits equal to the lesser of the limits of the named insured's motor vehicle
  liability coverage or the maximum uninsured motorist coverage limits available by the insurer
  under the named insured's motor vehicle policy.
- (ii) The disclosure required under Subsection (4)(k)(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 named insured's motor vehicle policy.
- (1) For purposes of this Subsection (4), a notice or disclosure sent to a named insured ina household constitutes notice or disclosure to all insureds within the household.
- (5) (a) (i) Except as provided in Subsection (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 reasonableexplanation of the purpose of uninsured motorist coverage.
- (iii) This rejection continues for that issuer of the liability coverage until the insured inwriting 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

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152	motor vehicles used for that purpose, by purchase of a policy of insurance or by self-insurance,
153	uninsured motorist coverage of at least \$25,000 per person and \$500,000 per accident.
154	(ii) This coverage is secondary to any other insurance covering an injured covered
155	person.
156	(c) Uninsured motorist coverage:
157	(i) does not cover any benefit paid or payable under Title 34A, Chapter 2, Workers'
158	Compensation Act, except that the covered person is credited an amount described in
159	Subsection 34A-2-106(5);
160	(ii) may not be subrogated by the workers' compensation insurance carrier, workers'
161	compensation insurance, uninsured employer, the Uninsured Employers Fund created in
162	Section 34A-2-704, or the Employers' Reinsurance Fund created in Section 34A-2-702;
163	(iii) may not be reduced by any benefits provided by workers' compensation insurance,
164	uninsured employer, the Uninsured Employers Fund created in Section 34A-2-704, or the
165	Employers' Reinsurance Fund created in Section 34A-2-702;
166	(iv) notwithstanding Subsection $31A-1-103(3)(f)$ , may be reduced by health insurance
167	subrogation only after the covered person has been made whole;
168	(v) may not be collected for bodily injury or death sustained by a person:
169	(A) while committing a violation of Section 41-1a-1314;
170	(B) who, as a passenger in a vehicle, has knowledge that the vehicle is being operated
171	in violation of Section 41-1a-1314; or
172	(C) while committing a felony; and
173	(vi) notwithstanding Subsection (5)(c)(v), may be recovered:
174	(A) for a person under 18 years old who is injured within the scope of Subsection
175	(5)(c)(v) but limited to medical and funeral expenses; or
176	(B) by a law enforcement officer as defined in Section 53-13-103, who is injured
177	within the course and scope of the law enforcement officer's duties.
178	(d) As used in this Subsection (5), "motor vehicle" has the same meaning as under
179	Section 41-1a-102.
180	(6) When a covered person alleges that an uninsured motor vehicle under Subsection
181	(2)(b) proximately caused an accident without touching the covered person or the motor
182	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 coveredperson's testimony.

(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 (7)(a) applies to all persons except a covered person as defined underSubsection (8)(b).

(ii) A covered person as defined under Subsection (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 coveredperson is occupying.

195 (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) through (c)
shall be secondary coverage.

199 (8) (a) Uninsured motorist coverage under this section applies to bodily injury, 200 sickness, disease, or death of covered persons while occupying or using a motor vehicle only if 201 the motor vehicle is described in the policy under which a claim is made, or if the motor 202 vehicle is a newly acquired or replacement motor vehicle covered under the terms of the policy. 203 Except as provided in Subsection (7) or this Subsection (8), a covered person injured in a 204 motor vehicle described in a policy that includes uninsured motorist benefits may not elect to 205 collect uninsured motorist coverage benefits from any other motor vehicle insurance policy 206 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):

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(i) a covered person injured as a pedestrian by an uninsured motor vehicle; and

(ii) except as provided in Subsection (8)(c), a covered person injured while occupying
or using a motor vehicle that is not owned, leased, or furnished:

213 (A) to the covered person;

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214	(B) to the covered person's spouse; or
215	(C) to the covered person's resident parent or resident sibling.
216	(c) (i) A covered person may recover benefits from no more than two additional
217	policies, one additional policy from each parent's household if the covered person is:
218	(A) a dependent minor of parents who reside in separate households; and
219	(B) injured while occupying or using a motor vehicle that is not owned, leased, or
220	furnished:
221	(I) to the covered person;
222	(II) to the covered person's resident parent; or
223	(III) to the covered person's resident sibling.
224	(ii) Each parent's policy under this Subsection (8)(c) is liable only for the percentage of
225	the damages that the limit of liability of each parent's policy of uninsured motorist coverage
226	bears to the total of both parents' uninsured coverage applicable to the accident.
227	(d) A covered person's recovery under any available policies may not exceed the full
228	amount of damages.
229	(e) A covered person in Subsection (8)(b) is not barred against making subsequent
230	elections if recovery is unavailable under previous elections.
231	(f) (i) As used in this section, "interpolicy stacking" means recovering benefits for a
232	single incident of loss under more than one insurance policy.
233	(ii) Except to the extent permitted by Subsection (7) and this Subsection (8),
234	interpolicy stacking is prohibited for uninsured motorist coverage.
235	(9) (a) When a claim is brought by a named insured or a person described in
236	Subsection (1) and is asserted against the covered person's uninsured motorist carrier, the
237	claimant may elect to resolve the claim:
238	(i) by submitting the claim to binding arbitration; or
239	(ii) through litigation.
240	(b) Unless otherwise provided in the policy under which uninsured benefits are
241	claimed, the election provided in Subsection (9)(a) is available to the claimant only, except that
242	if the policy under which insured benefits are claimed provides that either an insured or the
243	insurer may elect arbitration, the insured or the insurer may elect arbitration and that election to
244	arbitrate shall stay the litigation of the claim under Subsection (9)(a)(ii).

245	(c) Once the claimant has elected to commence litigation under Subsection (9)(a)(ii),
246	the claimant may not elect to resolve the claim through binding arbitration under this section
247	without the written consent of the uninsured motorist carrier.
248	(d) For purposes of the statute of limitations applicable to a claim described in
249	Subsection (9)(a), if the claimant does not elect to resolve the claim through litigation, the
250	claim is considered filed when the claimant submits the claim to binding arbitration in
251	accordance with this Subsection (9).
252	(e) (i) Unless otherwise agreed to in writing by the parties, a claim that is submitted to
253	binding arbitration under Subsection (9)(a)(i) shall be resolved by a single arbitrator.
254	(ii) All parties shall agree on the single arbitrator selected under Subsection (9)(e)(i).
255	(iii) If the parties are unable to agree on a single arbitrator as required under Subsection
256	(9)(e)(ii), the parties shall select a panel of three arbitrators.
257	(f) If the parties select a panel of three arbitrators under Subsection (9)(e)(iii):
258	(i) each side shall select one arbitrator; and
259	(ii) the arbitrators appointed under Subsection (9)(f)(i) shall select one additional
260	arbitrator to be included in the panel.
261	(g) Unless otherwise agreed to in writing:
262	(i) each party shall pay an equal share of the fees and costs of the arbitrator selected
263	under Subsection (9)(e)(i); or
264	(ii) if an arbitration panel is selected under Subsection (9)(e)(iii):
265	(A) each party shall pay the fees and costs of the arbitrator selected by that party; and
266	(B) each party shall pay an equal share of the fees and costs of the arbitrator selected
267	under Subsection (9)(f)(ii).
268	(h) Except as otherwise provided in this section or unless otherwise agreed to in
269	writing by the parties, an arbitration proceeding conducted under this section shall be governed
270	by Title 78B, Chapter 11, Utah Uniform Arbitration Act.
271	(i) (i) The arbitration shall be conducted in accordance with Rules 26(a)(4) through (f),
272	27 through 37, 54, and 68 of the Utah Rules of Civil Procedure, once the requirements of
273	Subsections (10)(a) through (c) are satisfied.
274	(ii) The specified tier as defined by Rule $26(c)(3)$ of the Utah Rules of Civil Procedure
275	shall be determined based on the claimant's specific monetary amount in the written demand

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276	for payment of uninsured motorist coverage benefits as required in Subsection (10)(a)(i)(A).
277	(iii) Rules 26.1 and 26.2 of the Utah Rules of Civil Procedure do not apply to
278	arbitration claims under this part.
279	(j) All issues of discovery shall be resolved by the arbitrator or the arbitration panel.
280	(k) A written decision by a single arbitrator or by a majority of the arbitration panel
281	shall constitute a final decision.
282	(l) (i) Except as provided in Subsection (10), the amount of an arbitration award may
283	not exceed the uninsured motorist policy limits of all applicable uninsured motorist policies,
284	including applicable uninsured motorist umbrella policies.
285	(ii) If the initial arbitration award exceeds the uninsured motorist policy limits of all
286	applicable uninsured motorist policies, the arbitration award shall be reduced to an amount
287	equal to the combined uninsured motorist policy limits of all applicable uninsured motorist
288	policies.
289	(m) The arbitrator or arbitration panel may not decide the issues of coverage or
290	extra-contractual damages, including:
291	(i) whether the claimant is a covered person;
292	(ii) whether the policy extends coverage to the loss; or
293	(iii) any allegations or claims asserting consequential damages or bad faith liability.
294	(n) The arbitrator or arbitration panel may not conduct arbitration on a class-wide or
295	class-representative basis.
296	(o) If the arbitrator or arbitration panel finds that the action was not brought, pursued,
297	or defended in good faith, the arbitrator or arbitration panel may award reasonable attorney fees
298	and costs against the party that failed to bring, pursue, or defend the claim in good faith.
299	(p) An arbitration award issued under this section shall be the final resolution of all
300	claims not excluded by Subsection (9)(m) between the parties unless:
301	(i) the award was procured by corruption, fraud, or other undue means;
302	(ii) either party, within 20 days after service of the arbitration award:
303	(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
305	under Subsection (9)(p)(ii)(A).
306	(q) (i) Upon filing a complaint for a trial de novo under Subsection (9)(p), the claim

307	shall proceed through litigation pursuant to the Utah Rules of Civil Procedure and Utah Rules
308	of Evidence in the district court.
309	(ii) In accordance with Rule 38, Utah Rules of Civil Procedure, either party may
310	request a jury trial with a complaint requesting a trial de novo under Subsection (9)(p)(ii)(A).
311	(r) (i) If the claimant, as the moving party in a trial de novo requested under Subsection
312	(9)(p), does not obtain a verdict that is at least \$5,000 and is at least 20% greater than the
313	arbitration award, the claimant is responsible for all of the nonmoving party's costs.
314	(ii) If the uninsured motorist carrier, as the moving party in a trial de novo requested
315	under Subsection (9)(p), does not obtain a verdict that is at least 20% less than the arbitration
316	award, the uninsured motorist carrier is responsible for all of the nonmoving party's costs.
317	(iii) Except as provided in Subsection $(9)(r)(iv)$ , the costs under this Subsection $(9)(r)$
318	shall include:
319	(A) any costs set forth in Rule 54(d), Utah Rules of Civil Procedure; and
320	(B) the costs of expert witnesses and depositions.
321	(iv) An award of costs under this Subsection (9)(r) may not exceed \$2,500 unless
322	Subsection (10)(h)(iii) applies.
323	(s) For purposes of determining whether a party's verdict is greater or less than the
324	arbitration award under Subsection (9)(r), a court may not consider any recovery or other relief
325	granted on a claim for damages if the claim for damages:
326	(i) was not fully disclosed in writing prior to the arbitration proceeding; or
327	(ii) was not disclosed in response to discovery contrary to the Utah Rules of Civil
328	Procedure.
329	(t) If a district court determines, upon a motion of the nonmoving party, that the
330	moving party's use of the trial de novo process was filed in bad faith in accordance with
331	Section 78B-5-825, the district court may award reasonable attorney fees to the nonmoving
332	party.
333	(u) Nothing in this section is intended to limit any claim under any other portion of an
334	applicable insurance policy.
335	(v) If there are multiple uninsured motorist policies, as set forth in Subsection (8), the
336	claimant may elect to arbitrate in one hearing the claims against all the uninsured motorist
337	carriers.

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- 338 (10) (a) Within 30 days after a covered person elects to submit a claim for uninsured 339 motorist benefits to binding arbitration or files litigation, the covered person shall provide to 340 the uninsured motorist carrier:
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(i) a written demand for payment of uninsured motorist coverage benefits, setting forth: 342 (A) subject to Subsection (10)(1), the specific monetary amount of the demand,

- 343 including a computation of the covered person's claimed past medical expenses, claimed past 344 lost wages, and the other claimed past economic damages; and
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(B) the factual and legal basis and any supporting documentation for the demand:

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(ii) a written statement under oath disclosing:

347 (A) (I) the names and last known addresses of all health care providers who have 348 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 349 350 giving rise to the claim for uninsured motorist benefits up to the time the election for 351 arbitration or litigation has been exercised; and

352 (II) the names and last known addresses of the health care providers who have rendered 353 health care services to the covered person, which the covered person claims are immaterial to 354 the claims for which uninsured motorist benefits are sought, for a period of five years 355 preceding the date of the event giving rise to the claim for uninsured motorist benefits up to the 356 time the election for arbitration or litigation has been exercised that have not been disclosed 357 under Subsection (10)(a)(ii)(A)(I);

358 (B) (I) the names and last known addresses of all health insurers or other entities to 359 whom the covered person has submitted claims for health care services or benefits material to 360 the claims for which uninsured motorist benefits are sought, for a period of five years 361 preceding the date of the event giving rise to the claim for uninsured motorist benefits up to the 362 time the election for arbitration or litigation has been exercised; and

363 (II) the names and last known addresses of the health insurers or other entities to whom 364 the covered person has submitted claims for health care services or benefits, which the covered 365 person claims are immaterial to the claims for which uninsured motorist benefits are sought. 366 for a period of five years preceding the date of the event giving rise to the claim for uninsured 367 motorist benefits up to the time the election for arbitration or litigation have not been disclosed; 368 (C) if lost wages, diminished earning capacity, or similar damages are claimed, all

369 employers of the covered person for a period of five years preceding the date of the event 370 giving rise to the claim for uninsured motorist benefits up to the time the election for 371 arbitration or litigation has been exercised;

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(D) other documents to reasonably support the claims being asserted; and 373 (E) all state and federal statutory lienholders including a statement as to whether the 374 covered person is a recipient of Medicare or Medicaid benefits or Utah Children's Health 375 Insurance Program benefits under Title 26B, Chapter 3, Part 9, Utah Children's Health

377 (iii) signed authorizations to allow the uninsured motorist carrier to only obtain records 378 and billings from the individuals or entities disclosed under Subsections (10)(a)(ii)(A)(I), 379 (B)(I), and (C).

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

380 (b) (i) If the uninsured motorist carrier determines that the disclosure of undisclosed 381 health care providers or health care insurers under Subsection (10)(a)(ii) is reasonably 382 necessary, the uninsured motorist carrier may:

383 (A) make a request for the disclosure of the identity of the health care providers or 384 health care insurers; and

385 (B) make a request for authorizations to allow the uninsured motorist carrier to only 386 obtain records and billings from the individuals or entities not disclosed.

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(ii) If the covered person does not provide the requested information within 10 days:

388 (A) the covered person shall disclose, in writing, the legal or factual basis for the 389 failure to disclose the health care providers or health care insurers; and

390 (B) either the covered person or the uninsured motorist carrier may request the 391 arbitrator or arbitration panel to resolve the issue of whether the identities or records are to be 392 provided if the covered person has elected arbitration.

393 (iii) The time periods imposed by Subsection (10)(c)(i) are tolled pending resolution of 394 the dispute concerning the disclosure and production of records of the health care providers or 395 health care insurers.

396 (c) (i) An uninsured motorist carrier that receives an election for arbitration or a notice 397 of filing litigation and the demand for payment of uninsured motorist benefits under Subsection 398 (10)(a)(i) shall have a reasonable time, not to exceed 60 days from the date of the demand and 399 receipt of the items specified in Subsections (10)(a)(i) through (iii), to:

400	(A) provide a written response to the written demand for payment provided for in
401	Subsection (10)(a)(i);
402	(B) except as provided in Subsection (10)(c)(i)(C), tender the amount, if any, of the
403	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 26B, Chapter 3, Part 9, Utah
406	Children's Health Insurance Program, or if the claim is subject to any other state or federal
407	statutory liens, tender the amount, if any, of the uninsured motorist carrier's determination of
408	the amount owed 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 (10)(c)(i)
415	is the total amount of the uninsured motorist policy limits, the tendered amount shall be
416	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 (10)(c)(i), may:
419	(i) elect to accept the amount tendered in Subsection (10)(c)(i) as payment in full of all
420	uninsured motorist claims; or
421	(ii) elect to:
422	(A) accept the amount tendered in Subsection (10)(c)(i) as partial payment of all
423	uninsured motorist claims; and
424	(B) continue to litigate or arbitrate the remaining claim in accordance with the election
425	made under Subsections (9)(a) through (c).
426	(e) If a covered person elects to accept the amount tendered under Subsection $(10)(c)(i)$
427	as partial payment of all uninsured motorist claims, the final award obtained through
428	arbitration, litigation, or later settlement shall be reduced by any payment made by the
429	uninsured motorist carrier under Subsection (10)(c)(i).
430	(f) In an arbitration proceeding on the remaining uninsured claims:

431	(i) the parties may not disclose to the arbitrator or arbitration panel the amount paid
432	under Subsection (10)(c)(i) until after the arbitration award has been rendered; and
433	(ii) the parties may not disclose the amount of the limits of uninsured motorist benefits
434	provided by the policy.
435	(g) If the final award obtained through arbitration or litigation is greater than the
436	average of the covered person's initial written demand for payment provided for in Subsection
437	(10)(a)(i) and the uninsured motorist carrier's initial written response provided for in
438	Subsection (10)(c)(i), the uninsured motorist carrier shall pay:
439	(i) the final award obtained through arbitration or litigation, except that if the award
440	exceeds the policy limits of the subject uninsured motorist policy by more than \$15,000, the
441	amount shall be reduced to an amount equal to the policy limits plus \$15,000; and
442	(ii) any of the following applicable costs:
443	(A) any costs as set forth in Rule 54(d), Utah Rules of Civil Procedure;
444	(B) the arbitrator or arbitration panel's fee; and
445	(C) the reasonable costs of expert witnesses and depositions used in the presentation of
446	evidence during arbitration or litigation.
447	(h) (i) The covered person shall provide an affidavit of costs within five days of an
448	arbitration award.
449	(ii) (A) Objection to the affidavit of costs shall specify with particularity the costs to
450	which the uninsured motorist carrier objects.
451	(B) The objection shall be resolved by the arbitrator or arbitration panel.
452	(iii) The award of costs by the arbitrator or arbitration panel under Subsection
453	(10)(g)(ii) may not exceed \$5,000.
454	(i) (i) A covered person shall disclose all material information, other than rebuttal
455	evidence, within 30 days after a covered person elects to submit a claim for uninsured motorist
456	coverage benefits to binding arbitration or files litigation as specified in Subsection (10)(a).
457	(ii) If the information under Subsection (10)(i)(i) is not disclosed, the covered person
458	may not recover costs or any amounts in excess of the policy under Subsection (10)(g).
459	(j) This Subsection (10) does not limit any other cause of action that arose or may arise
460	against the uninsured motorist carrier from the same dispute.
461	(k) The provisions of this Subsection (10) only apply to motor vehicle accidents that

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462 occur on or after March 30, 2010. 463 (1) (i) (A) The written demand requirement in Subsection (10)(a)(i)(A) does not affect 464 the covered person's requirement to provide a computation of any other economic damages 465 claimed, and the one or more respondents shall have a reasonable time after the receipt of the 466 computation of any other economic damages claimed to conduct fact and expert discovery as to 467 any additional damages claimed. 468 (B) The changes made by Laws of Utah 2014, Chapter 290, Section 10, and 469 Chapter 300, Section 10, to this Subsection (10)(1) and Subsection (10)(a)(i)(A) apply to a 470 claim submitted to binding arbitration or through litigation on or after May 13, 2014. 471 (ii) The changes made by Laws of Utah 2014, Chapter 290, Section 10, and Chapter 472 300, Section 10, to Subsections (10)(a)(ii)(A)(II) and (B)(II) apply to any claim submitted to 473 binding arbitration or through litigation on or after May 13, 2014. 474 (11) (a) A person shall commence an action on a written policy or contract for 475 uninsured motorist coverage within four years after the inception of loss. 476 (b) Subsection (11)(a) shall apply to all claims that have not been time barred by 477 Subsection 31A-21-313(1)(a) as of May 14, 2019. 478 Section 2. Section **31A-22-305.3** is amended to read: 479 31A-22-305.3. Underinsured motorist coverage. 480 (1) As used in this section: 481 (a) "Covered person" [has the same meaning as] means the same as the term is defined 482 in Section 31A-22-305. 483 (b) (i) "Underinsured motor vehicle" includes a motor vehicle, the operation, maintenance, or use of which is covered under a liability policy at the time of an injury-causing 484 485 occurrence, but which has insufficient liability coverage to compensate fully the injured party 486 for all special and general damages. 487 (ii) The term "underinsured motor vehicle" does not include: 488 (A) a motor vehicle that is covered under the liability coverage of the same policy that 489 also contains the underinsured motorist coverage; 490 (B) an uninsured motor vehicle as defined in Subsection 31A-22-305(2); or 491 (C) a motor vehicle owned or leased by: 492 (I) a named insured;

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493	(II) a named insured's spouse; or
494	(III) a dependent of a named insured.
495	(2) (a) Underinsured motorist coverage under Subsection 31A-22-302(1)(c) provides
496	coverage for a covered person who is legally entitled to recover damages from an owner or
497	operator of an underinsured motor vehicle because of bodily injury, sickness, disease, or death.
498	(b) $[A]$ Except as provided in Subsection (2)(c), a covered person occupying or using a
499	motor vehicle owned, leased, or furnished to the covered person, the covered person's spouse,
500	or covered person's resident relative may recover underinsured benefits only if the motor
501	vehicle is:
502	(i) described in the policy under which a claim is made; or
503	(ii) a newly acquired or replacement motor vehicle covered under the terms of the
504	policy.
505	(c) A covered person occupying or using a motor vehicle that is owned, furnished, or
506	leased by the covered person's employer may recover underinsured benefits, notwithstanding
507	any regular use exclusion described in the policy.
508	(3) (a) For purposes of this Subsection (3), "new policy" means:
509	(i) any policy that is issued that does not include a renewal or reinstatement of an
510	existing policy; or
511	(ii) a change to an existing policy that results in:
512	(A) a named insured being added to or deleted from the policy; or
513	(B) a change in the limits of the named insured's motor vehicle liability coverage.
514	(b) For new policies written on or after January 1, 2001, the limits of underinsured
515	motorist coverage shall be equal to the lesser of the limits of the named insured's motor vehicle
516	liability coverage or the maximum underinsured motorist coverage limits available by the
517	insurer under the named insured's motor vehicle policy, unless a named insured rejects or
518	purchases coverage in a lesser amount by signing an acknowledgment form that:
519	(i) is filed with the department;
520	(ii) is provided by the insurer;
521	(iii) waives the higher coverage;
522	(iv) need only state in this or similar language that "underinsured motorist coverage
523	provides benefits or protection to you and other covered persons for bodily injury resulting

from an accident caused by the fault of another party where the other party has insufficientliability insurance"; and

526 (v) discloses the additional premiums required to purchase underinsured motorist 527 coverage with limits equal to the lesser of the limits of the named insured's motor vehicle 528 liability coverage or the maximum underinsured motorist coverage limits available by the 529 insurer under the named insured's motor vehicle policy.

(c) Any selection or rejection under Subsection (3)(b) continues for that issuer of the
liability coverage until the insured requests, in writing, a change of underinsured motorist
coverage from that liability insurer.

(d) (i) Subsections (3)(b) and (c) apply retroactively to any claim arising on or after
January 1, 2001, for which, as of May 14, 2013, an insured has not made a written demand for
arbitration or filed a complaint in a court of competent jurisdiction.

(ii) The Legislature finds that the retroactive application of Subsections (3)(b) and (c)
clarifies legislative intent and does not enlarge, eliminate, or destroy vested rights.

(e) (i) As used in this Subsection (3)(e), "additional motor vehicle" means a change
that increases the total number of vehicles insured by the policy, and does not include
replacement, substitute, or temporary vehicles.

(ii) The adding of an additional motor vehicle to an existing personal lines or
commercial lines policy does not constitute a new policy for purposes of Subsection (3)(a).

(iii) If an additional motor vehicle is added to a personal lines policy where
underinsured motorist coverage has been rejected, or where underinsured motorist limits are
lower than the named insured's motor vehicle liability limits, the insurer shall provide a notice
to a named insured within 30 days that:

547 (A) in the same manner described in Subsection (3)(b)(iv), explains the purpose of548 underinsured motorist coverage; and

(B) encourages the named insured to contact the insurance company or insurance
producer for quotes as to 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.

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(f) A change in policy number resulting from any policy change not identified under

Subsection (3)(a)(ii) does not constitute a new policy. 555 556 (g) (i) Subsection (3)(a) applies retroactively to any claim arising on or after January 1, 557 2001 for which, as of May 1, 2012, an insured has not made a written demand for arbitration or 558 filed a complaint in a court of competent jurisdiction. 559 (ii) The Legislature finds that the retroactive application of Subsection (3)(a): 560 (A) does not enlarge, eliminate, or destroy vested rights; and 561 (B) clarifies legislative intent. 562 (h) A self-insured, including a governmental entity, may elect to provide underinsured 563 motorist coverage in an amount that is less than its maximum self-insured retention under 564 Subsections (3)(b) and (1) by issuing a declaratory memorandum or policy statement from the 565 chief financial officer or chief risk officer that declares the: 566 (i) self-insured entity's coverage level; and 567 (ii) process for filing an underinsured motorist claim. 568 (i) Underinsured motorist coverage may not be sold with limits that are less than: 569 (i) \$10,000 for one person in any one accident; and 570 (ii) at least \$20,000 for two or more persons in any one accident. 571 (j) An acknowledgment under Subsection (3)(b) continues for that issuer of the 572 underinsured motorist coverage until the named insured, in writing, requests different 573 underinsured motorist coverage from the insurer. 574 (k) (i) The named insured's underinsured motorist coverage, as described in Subsection 575 (2), is secondary to the liability coverage of an owner or operator of an underinsured motor 576 vehicle, as described in Subsection (1). 577 (ii) Underinsured motorist coverage may not be set off against the liability coverage of 578 the owner or operator of an underinsured motor vehicle, but shall be added to, combined with, 579 or stacked upon the liability coverage of the owner or operator of the underinsured motor 580 vehicle to determine the limit of coverage available to the injured person. 581 (1) (i) In conjunction with the first two renewal notices sent after January 1, 2001, for 582 policies existing on that date, the insurer shall disclose in the same medium as the premium 583 renewal notice, an explanation of: 584 (A) the purpose of underinsured motorist coverage in the same manner as described in 585 Subsection (3)(b)(iv); and

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- 586 (B) a disclosure of the additional premiums required to purchase underinsured motorist 587 coverage with limits equal to the lesser of the limits of the named insured's motor vehicle 588 liability coverage or the maximum underinsured motorist coverage limits available by the 589 insurer under the named insured's motor vehicle policy. 590 (ii) The disclosure required under this Subsection (3)(1) shall be sent to all named 591 insureds that carry underinsured motorist coverage limits in an amount less than the named 592 insured's motor vehicle liability policy limits or the maximum underinsured motorist coverage 593 limits available by the insurer under the named insured's motor vehicle policy. 594 (m) For purposes of this Subsection (3), a notice or disclosure sent to a named insured 595 in a household constitutes notice or disclosure to all insureds within the household. 596 (4) (a) (i) Except as provided in this Subsection (4), a covered person injured in a 597 motor vehicle described in a policy that includes underinsured motorist benefits may not elect 598 to collect underinsured motorist coverage benefits from another motor vehicle insurance policy. 599 (ii) The limit of liability for underinsured motorist coverage for two or more motor 600 vehicles may not be added together, combined, or stacked to determine the limit of insurance 601 coverage available to an injured person for any one accident. 602 (iii) Subsection (4)(a)(ii) applies to all persons except a covered person described 603 under Subsections (4)(b)(i) and (ii). 604 (b) (i) A covered person injured as a pedestrian by an underinsured motor vehicle may recover underinsured motorist benefits under any one other policy in which they are described 605 606 as a covered person. (ii) Except as provided in Subsection (4)(b)(iii), a covered person injured while 607 608 occupying, using, or maintaining a motor vehicle that is not owned, leased, or furnished to the 609 covered person, the covered person's spouse, or the covered person's resident parent or resident 610 sibling, may also recover benefits under any one other policy under which the covered person is 611 also a covered person.
- 612 (iii) (A) A covered person may recover benefits from no more than two additional
  613 policies, one additional policy from each parent's household if the covered person is:
- 614

(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

617 resident sibling.

(B) Each parent's policy under this Subsection (4)(b)(iii) 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.

622 (iv) A covered person's recovery under any available policies may not exceed the full623 amount of damages.

(v) 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), (b), and (c) is secondary coverage.

627 (vi) The primary and the secondary coverage may not be set off against the other.

(vii) A covered person as described under Subsection (4)(b)(i) or 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.

(viii) A covered injured person is not barred against making subsequent elections if
 recovery is unavailable under previous elections.

(ix) (A) As used in this section, "interpolicy stacking" means recovering benefits for a
 single incident of loss under more than one insurance policy.

635 (B) Except to the extent permitted by this Subsection (4), interpolicy stacking is636 prohibited for underinsured motorist coverage.

637 (c) Underinsured motorist coverage:

(i) does not cover any benefit paid or payable under Title 34A, Chapter 2, Workers'
Compensation Act, except that the covered person is credited an amount described in
Subsection 34A-2-106(5);

(ii) may not be subrogated by a workers' compensation insurance carrier, workers'
compensation insurance, uninsured employer, the Uninsured Employers Fund created in
Section 34A-2-704, or the Employers' Reinsurance Fund created in Section 34A-2-702;

(iii) may not be reduced by benefits provided by workers' compensation insurance,
uninsured employer, the Uninsured Employers Fund created in Section 34A-2-704, or the
Employers' Reinsurance Fund created in Section 34A-2-702;

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(iv) notwithstanding Subsection 31A-1-103(3)(f) may be reduced by health insurance

648	subrogation only after the covered person is made whole;
649	(v) may not be collected for bodily injury or death sustained by a person:
650	(A) while committing a violation of Section 41-1a-1314;
651	(B) who, as a passenger in a vehicle, has knowledge that the vehicle is being operated
652	in violation of Section 41-1a-1314; or
653	(C) while committing a felony; and
654	(vi) notwithstanding Subsection (4)(c)(v), may be recovered:
655	(A) for a person younger than 18 years old who is injured within the scope of
656	Subsection (4)(c)(v), but is limited to medical and funeral expenses; or
657	(B) by a law enforcement officer as defined in Section 53-13-103, who is injured
658	within the course and scope of the law enforcement officer's duties.
659	(5) (a) Notwithstanding Section 31A-21-313, an action on a written policy or contract
660	for underinsured motorist coverage shall be commenced within four years after the inception of
661	loss.
662	(b) The inception of the loss under Subsection 31A-21-313(1) for underinsured
663	motorist claims occurs upon the date of the settlement check representing the last liability
664	policy payment.
665	(6) An underinsured motorist insurer does not have a right of reimbursement against a
666	person liable for the damages resulting from an injury-causing occurrence if the person's
667	liability insurer has tendered the policy limit and the limits have been accepted by the claimant.
668	(7) Except as otherwise provided in this section, a covered person may seek, subject to
669	the terms and conditions of the policy, additional coverage under any policy:
670	(a) that provides coverage for damages resulting from motor vehicle accidents; and
671	(b) that is not required to conform to Section 31A-22-302.
672	(8) (a) When a claim is brought by a named insured or a person described in
673	Subsection 31A-22-305(1) and is asserted against the covered person's underinsured motorist
674	carrier, the claimant may elect to resolve the claim:
675	(i) by submitting the claim to binding arbitration; or
676	(ii) through litigation.
677	(b) Unless otherwise provided in the policy under which underinsured benefits are
678	claimed, the election provided in Subsection (8)(a) is available to the claimant only, except that

679	if the policy under which insured benefits are claimed provides that either an insured or the
680	insurer may elect arbitration, the insured or the insurer may elect arbitration and that election to
681	arbitrate shall stay the litigation of the claim under Subsection (8)(a)(ii).
682	(c) Once a claimant elects to commence litigation under Subsection (8)(a)(ii), the
683	claimant may not elect to resolve the claim through binding arbitration under this section
684	without the written consent of the underinsured motorist coverage carrier.
685	(d) For purposes of the statute of limitations applicable to a claim described in
686	Subsection (8)(a), if the claimant does not elect to resolve the claim through litigation, the
687	claim is considered filed when the claimant submits the claim to binding arbitration in
688	accordance with this Subsection (8).
689	(e) (i) Unless otherwise agreed to in writing by the parties, a claim that is submitted to
690	binding arbitration under Subsection (8)(a)(i) shall be resolved by a single arbitrator.
691	(ii) All parties shall agree on the single arbitrator selected under Subsection (8)(e)(i).
692	(iii) If the parties are unable to agree on a single arbitrator as required under Subsection
693	(8)(e)(ii), the parties shall select a panel of three arbitrators.
694	(f) If the parties select a panel of three arbitrators under Subsection (8)(e)(iii):
695	(i) each side shall select one arbitrator; and
696	(ii) the arbitrators appointed under Subsection (8)(f)(i) shall select one additional
697	arbitrator to be included in the panel.
698	(g) Unless otherwise agreed to in writing:
699	(i) each party shall pay an equal share of the fees and costs of the arbitrator selected
700	under Subsection (8)(e)(i); or
701	(ii) if an arbitration panel is selected under Subsection (8)(e)(iii):
702	(A) each party shall pay the fees and costs of the arbitrator selected by that party; and
703	(B) each party shall pay an equal share of the fees and costs of the arbitrator selected
704	under Subsection (8)(f)(ii).
705	(h) Except as otherwise provided in this section or unless otherwise agreed to in
706	writing by the parties, an arbitration proceeding conducted under this section is governed by
707	Title 78B, Chapter 11, Utah Uniform Arbitration Act.
708	(i) (i) The arbitration shall be conducted in accordance with Rules 26(a)(4) through (f),
709	27 through 37, 54, and 68 of the Utah Rules of Civil Procedure, once the requirements of

710	Subsections (9)(a) through (c) are satisfied.
711	(ii) The specified tier as defined by Rule 26(c)(3) of the Utah Rules of Civil Procedure
712	shall be determined based on the claimant's specific monetary amount in the written demand
713	for payment of uninsured motorist coverage benefits as required in Subsection (9)(a)(i)(A).
714	(iii) Rules 26.1 and 26.2 of the Utah Rules of Civil Procedure do not apply to
715	arbitration claims under this part.
716	(j) An issue of discovery shall be resolved by the arbitrator or the arbitration panel.
717	(k) A written decision by a single arbitrator or by a majority of the arbitration panel
718	constitutes a final decision.
719	(1) (i) Except as provided in Subsection (9), the amount of an arbitration award may not
720	exceed the underinsured motorist policy limits of all applicable underinsured motorist policies,
721	including applicable underinsured motorist umbrella policies.
722	(ii) If the initial arbitration award exceeds the underinsured motorist policy limits of all
723	applicable underinsured motorist policies, the arbitration award shall be reduced to an amount
724	equal to the combined underinsured motorist policy limits of all applicable underinsured
725	motorist policies.
726	(m) The arbitrator or arbitration panel may not decide an issue of coverage or
727	extra-contractual damages, including:
728	(i) whether the claimant is a covered person;
729	(ii) whether the policy extends coverage to the loss; or
730	(iii) an allegation or claim asserting consequential damages or bad faith liability.
731	(n) The arbitrator or arbitration panel may not conduct arbitration on a class-wide or
732	class-representative basis.
733	(o) If the arbitrator or arbitration panel finds that the arbitration is not brought, pursued,
734	or defended in good faith, the arbitrator or arbitration panel may award reasonable attorney fees
735	and costs against the party that failed to bring, pursue, or defend the arbitration in good faith.
736	(p) An arbitration award issued under this section shall be the final resolution of all
737	claims not excluded by Subsection (8)(m) between the parties unless:
738	(i) the award is procured by corruption, fraud, or other undue means; or
739	(ii) either party, within 20 days after service of the arbitration award:
740	(A) files a complaint requesting a trial de novo in the district court; and

741	(B) serves the nonmoving party with a copy of the complaint requesting a trial de novo
742	under Subsection (8)(p)(ii)(A).
743	(q) (i) Upon filing a complaint for a trial de novo under Subsection (8)(p), a claim shall
744	proceed through litigation pursuant to the Utah Rules of Civil Procedure and Utah Rules of
745	Evidence in the district court.
746	(ii) In accordance with Rule 38, Utah Rules of Civil Procedure, either party may
747	request a jury trial with a complaint requesting a trial de novo under Subsection (8)(p)(ii)(A).
748	(r) (i) If the claimant, as the moving party in a trial de novo requested under Subsection
749	(8)(p), does not obtain a verdict that is at least \$5,000 and is at least 20% greater than the
750	arbitration award, the claimant is responsible for all of the nonmoving party's costs.
751	(ii) If the underinsured motorist carrier, as the moving party in a trial de novo requested
752	under Subsection (8)(p), does not obtain a verdict that is at least 20% less than the arbitration
753	award, the underinsured motorist carrier is responsible for all of the nonmoving party's costs.
754	(iii) Except as provided in Subsection $(8)(r)(iv)$ , the costs under this Subsection $(8)(r)$
755	shall include:
756	(A) any costs set forth in Rule 54(d), Utah Rules of Civil Procedure; and
757	(B) the costs of expert witnesses and depositions.
758	(iv) An award of costs under this Subsection (8)(r) may not exceed \$2,500 unless
759	Subsection (9)(h)(iii) applies.
760	(s) For purposes of determining whether a party's verdict is greater or less than the
761	arbitration award under Subsection (8)(r), a court may not consider any recovery or other relief
762	granted on a claim for damages if the claim for damages:
763	(i) was not fully disclosed in writing prior to the arbitration proceeding; or
764	(ii) was not disclosed in response to discovery contrary to the Utah Rules of Civil
765	Procedure.
766	(t) If a district court determines, upon a motion of the nonmoving party, that a moving
767	party's use of the trial de novo process is filed in bad faith in accordance with Section
768	78B-5-825, the district court may award reasonable attorney fees to the nonmoving party.
769	(u) Nothing in this section is intended to limit a claim under another portion of an
770	applicable insurance policy.
771	(v) If there are multiple underinsured motorist policies, as set forth in Subsection (4),

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- the claimant may elect to arbitrate in one hearing the claims against all the underinsured
  motorist carriers.
  (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 tothe underinsured motorist carrier:
- (i) a written demand for payment of underinsured motorist coverage benefits, settingforth:
- (A) subject to Subsection (9)(1), the specific monetary amount of the demand,
  including a computation of the covered person's claimed past medical expenses, claimed past
  lost wages, and all other claimed past economic damages; and
- 782 (B) the factual and legal basis and any supporting documentation for the demand;
- 783 (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) the names and last known addresses of the 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 (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) the names and last known addresses of the 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;

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(D) other documents to reasonably support the claims being asserted; and

811 (E) all state and federal statutory lienholders including a statement as to whether the

812 covered person is a recipient of Medicare or Medicaid benefits or Utah Children's Health

813 Insurance Program benefits under Title 26B, Chapter 3, Part 9, Utah Children's Health

814 Insurance Program, or if the claim is subject to any other state or federal statutory liens; and

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

817 (9)(a)(ii)(A)(I), (B)(I), and (C).

(b) (i) If the underinsured motorist carrier determines that the disclosure of undisclosed
health care providers or health care insurers under Subsection (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 orhealth care insurers; and

(B) make a request for authorizations to allow the underinsured motorist carrier to onlyobtain records and billings from the individuals or entities not disclosed.

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(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 thefailure 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 (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.

834	(c) (i) An underinsured motorist carrier that receives an election for arbitration or a
835	notice of filing litigation and the demand for payment of underinsured motorist benefits under
836	Subsection (9)(a)(i) shall have a reasonable time, not to exceed 60 days from the date of the
837	demand and receipt of the items specified in Subsections (9)(a)(i) through (iii), to:
838	(A) provide a written response to the written demand for payment provided for in
839	Subsection (9)(a)(i);
840	(B) except as provided in Subsection (9)(c)(i)(C), tender the amount, if any, of the
841	underinsured motorist carrier's determination of the amount owed to the covered person; and
842	(C) if the covered person is a recipient of Medicare or Medicaid benefits or Utah
843	Children's Health Insurance Program benefits under Title 26B, Chapter 3, Part 9, Utah
844	Children's Health Insurance Program, or if the claim is subject to any other state or federal
845	statutory liens, tender the amount, if any, of the underinsured motorist carrier's determination of
846	the amount owed to the covered person less:
847	(I) if the amount of the state or federal statutory lien is established, the amount of the
848	lien; or
849	(II) if the amount of the state or federal statutory lien is not established, two times the
850	amount of the medical expenses subject to the state or federal statutory lien until such time as
851	the amount of the state or federal statutory lien is established.
852	(ii) If the amount tendered by the underinsured motorist carrier under Subsection
853	(9)(c)(i) is the total amount of the underinsured motorist policy limits, the tendered amount
854	shall be accepted by the covered person.
855	(d) A covered person who receives a written response from an underinsured motorist
856	carrier as provided for in Subsection (9)(c)(i), may:
857	(i) elect to accept the amount tendered in Subsection (9)(c)(i) as payment in full of all
858	underinsured motorist claims; or
859	(ii) elect to:
860	(A) accept the amount tendered in Subsection $(9)(c)(i)$ as partial payment of all
861	underinsured motorist claims; and
862	(B) continue to litigate or arbitrate the remaining claim in accordance with the election
863	made under Subsections (8)(a) through (c).
864	(e) If a covered person elects to accept the amount tendered under Subsection $(9)(c)(i)$

865	as partial payment of all underinsured motorist claims, the final award obtained through
866	arbitration, litigation, or later settlement shall be reduced by any payment made by the
867	underinsured motorist carrier under Subsection (9)(c)(i).
868	(f) In an arbitration proceeding on the remaining underinsured claims:
869	(i) the parties may not disclose to the arbitrator or arbitration panel the amount paid
870	under Subsection (9)(c)(i) until after the arbitration award has been rendered; and
871	(ii) the parties may not disclose the amount of the limits of underinsured motorist
872	benefits provided by the policy.
873	(g) If the final award obtained through arbitration or litigation is greater than the
874	average of the covered person's initial written demand for payment provided for in Subsection
875	(9)(a)(i) and the underinsured motorist carrier's initial written response provided for in
876	Subsection (9)(c)(i), the underinsured motorist carrier shall pay:
877	(i) the final award obtained through arbitration or litigation, except that if the award
878	exceeds the policy limits of the subject underinsured motorist policy by more than \$15,000, the
879	amount shall be reduced to an amount equal to the policy limits plus \$15,000; and
880	(ii) any of the following applicable costs:
881	(A) any costs as set forth in Rule 54(d), Utah Rules of Civil Procedure;
882	(B) the arbitrator or arbitration panel's fee; and
883	(C) the reasonable costs of expert witnesses and depositions used in the presentation of
884	evidence during arbitration or litigation.
885	(h) (i) The covered person shall provide an affidavit of costs within five days of an
886	arbitration award.
887	(ii) (A) Objection to the affidavit of costs shall specify with particularity the costs to
888	which the underinsured motorist carrier objects.
889	(B) The objection shall be resolved by the arbitrator or arbitration panel.
890	(iii) The award of costs by the arbitrator or arbitration panel under Subsection (9)(g)(ii)
891	may not exceed \$5,000.
892	(i) (i) A covered person shall disclose all material information, other than rebuttal
893	evidence, within 30 days after a covered person elects to submit a claim for underinsured
894	motorist coverage benefits to binding arbitration or files litigation as specified in Subsection
895	(9)(a).

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896 (ii) If the information under Subsection (9)(i)(i) is not disclosed, the covered person 897 may not recover costs or any amounts in excess of the policy under Subsection (9)(g). 898 (i) This Subsection (9) does not limit any other cause of action that arose or may arise 899 against the underinsured motorist carrier from the same dispute. 900 (k) The provisions of this Subsection (9) only apply to motor vehicle accidents that 901 occur on or after March 30, 2010. 902 (1) (i) The written demand requirement in Subsection (9)(a)(i)(A) does not affect the 903 covered person's requirement to provide a computation of any other economic damages 904 claimed, and the one or more respondents shall have a reasonable time after the receipt of the 905 computation of any other economic damages claimed to conduct fact and expert discovery as to 906 any additional damages claimed. The changes made by Laws of Utah 2014, Chapter 290, 907 Section 11, and Chapter 300, Section 11, to this Subsection (9)(1) and Subsection (9)(a)(i)(A) 908 apply to a claim submitted to binding arbitration or through litigation on or after May 13, 2014. 909 (ii) The changes made by Laws of Utah 2014, Chapter 290, Section 11, and Chapter 910 300, Section 11, under Subsections (9)(a)(ii)(A)(II) and (B)(II) apply to a claim submitted to 911 binding arbitration or through litigation on or after May 13, 2014. 912 Section 3. Effective date.

913 This bill takes effect on May 1, 2024.