SUBSTITUTE FOR HOUSE BILL NO. 4612

"The insurance code of 1956,"

by amending the title and sections 102, 3101, 3104, 3107, 3107a,
3109, 3109a, 3113, 3114, 3115, 3135, 3148, 3157, 3163, 3172, 3301,
3310, 3330, 4501, and 6107 (MCL 500.102, 500.3101, 500.3104,
500.3107, 500.3107a, 500.3109, 500.3109a, 500.3113, 500.3114,
500.3115, 500.3135, 500.3148, 500.3157, 500.3163, 500.3172,
500.3301, 500.3310, 500.3330, 500.4501, and 500.6107), the title as
amended by 2002 PA 304, section 102 as amended by 2000 PA 252,
section 3101 as amended by 2008 PA 241, section 3104 as amended by
2002 PA 662, section 3107 as amended by 2012 PA 542, section 3107a

as amended by 1991 PA 191, sections 3109 and 3109a as amended by

A bill to amend 1956 PA 218, entitled

2012 PA 454, section 3113 as amended by 1986 PA 93, section 3114 as amended by 2002 PA 38, section 3135 as amended by 2012 PA 158, section 3163 as amended by 2002 PA 697, sections 3172 and 3330 as amended by 2012 PA 204, section 3310 as amended by 2001 PA 228, section 4501 as amended by 2012 PA 39, and section 6107 as added by 1992 PA 174, and by adding sections 3107c and 3181 and chapters 21B, 32A, and 63.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

TITLE

2 An act to revise, consolidate, and classify the laws relating 3 to the insurance and surety business; to regulate the incorporation

4 or formation of domestic insurance and surety companies and

5 associations and OTHER CORPORATIONS TO PROVIDE BENEFITS UNDER THIS

6 ACT AND the admission of foreign and alien companies and

7 associations; to provide their rights, powers, and immunities and

8 to prescribe the conditions on which companies and associations

9 organized, existing, or authorized under this act may exercise

10 their powers; to provide the rights, powers, and immunities and to

11 prescribe the conditions on which other persons, firms,

12 corporations, associations, risk retention groups, and purchasing

13 groups engaged in an insurance or surety business may exercise

14 their powers; to provide for the imposition of a privilege fee on

15 domestic insurance companies and associations; and the state

16 accident fund; to provide for the imposition of a tax on the

17 business of foreign and alien companies and associations; to

18 provide for the imposition of a tax on risk retention groups and

19 purchasing groups; to provide for the imposition of a tax on the

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1 business of surplus line agents; to provide for the imposition of 2 regulatory fees on certain insurers; to provide for assessment fees on certain health maintenance organizations; to modify tort 3 liability arising out of certain accidents; to provide for limited 5 actions with respect to that modified tort liability and to 6 prescribe certain procedures for maintaining those actions; to require security for losses arising out of certain accidents; to 7 provide for the continued availability and affordability of 8 automobile insurance and homeowners insurance in this state and to 9 facilitate the purchase of that insurance by all residents of this 10 11 state at fair and reasonable rates; to provide for certain 12 reporting with respect to insurance and with respect to certain 13 claims against uninsured or self-insured persons; to prescribe 14 duties for certain state departments and officers with respect to that reporting; to provide for certain assessments AND FEES; to 15 establish and continue certain state insurance funds; to modify and 16 17 clarify the status, rights, powers, duties, and operations of the 18 nonprofit malpractice insurance fund; to provide for the 19 departmental supervision and regulation of the insurance and surety 20 business within this state; to provide for regulation over OF 21 worker's compensation self-insurers; to provide for the 22 conservation, rehabilitation, or liquidation of unsound or 23 insolvent insurers; to provide for the protection of policyholders, 24 claimants, and creditors of unsound or insolvent insurers; to provide for associations of insurers to protect policyholders and 25 claimants in the event of insurer insolvencies; to prescribe 26 27 educational requirements for insurance agents and solicitors; to

- 1 provide for the regulation of multiple employer welfare
- 2 arrangements; to create an automobile theft prevention authority 1
- 3 OR MORE AUTHORITIES to reduce INSURANCE FRAUD AND the number of
- 4 automobile thefts in this state :- AND to prescribe the powers and
- 5 duties of the automobile theft prevention authority; AUTHORITIES;
- 6 to provide certain FOR THE powers and duties upon OF certain
- 7 officials, departments, and authorities of this state; to provide
- 8 for an appropriation; to repeal acts and parts of acts; and to
- 9 provide penalties for the violation of this act.
- 10 Sec. 102. AS USED IN THIS ACT:
- 11 (A) (1) "Commissioner" as used in this act means the
- 12 commissioner of the office of financial and insurance
- 13 services.DIRECTOR.
- 14 (B) (2) "Department" as used in this act means the office
- 15 DEPARTMENT of INSURANCE AND financial and insurance—services.
- 16 (C) "DIRECTOR" MEANS THE DIRECTOR OF THE DEPARTMENT.
- 17 CHAPTER 21B
- 18 MANAGED CARE
- 19 SEC. 2171. AS USED IN THIS CHAPTER, "MANAGED CARE OPTION"
- 20 MEANS AN OPTIONAL COVERAGE SELECTED BY AN INSURED AT THE TIME A
- 21 POLICY IS ISSUED THAT INCLUDES, BUT IS NOT LIMITED TO, THE
- 22 MONITORING AND ADJUDICATION OF AN INJURED PERSON'S CARE, THE USE OF
- 23 A PREFERRED PROVIDER PROGRAM OR OTHER NETWORK, OR ANOTHER SIMILAR
- 24 OPTION.
- 25 SEC. 2173. THIS CHAPTER APPLIES TO ALL AUTOMOBILE INSURANCE
- 26 WHETHER WRITTEN ON AN INDIVIDUAL, GROUP, FRANCHISE, BLANKET POLICY,
- 27 OR SIMILAR BASIS.



- 1 SEC. 2175. AN AUTOMOBILE INSURER MAY OFFER A MANAGED CARE
- 2 OPTION THAT PROVIDES FOR THE PAYMENT OF ALLOWABLE EXPENSES
- 3 CONSISTING OF ALL REASONABLE CHARGES INCURRED FOR REASONABLY
- 4 NECESSARY PRODUCTS, SERVICES, AND ACCOMMODATIONS FOR AN INJURED
- 5 PERSON'S CARE, RECOVERY, OR REHABILITATION. A MANAGED CARE OPTION
- 6 IS SUBJECT TO ALL OF THE FOLLOWING:
- 7 (A) THE OPTION MUST BE UNIFORMLY OFFERED IN ALL AREAS WHERE
- 8 THE MANAGED CARE OPTION IS AVAILABLE.
- 9 (B) THE OPTION MUST PROVIDE A DISCOUNT THAT REFLECTS
- 10 REASONABLY ANTICIPATED REDUCTIONS IN LOSSES OR EXPENSES.
- 11 (C) THE OPTION MUST NOT APPLY TO EMERGENCY CARE. EMERGENCY
- 12 CARE INCLUDES, BUT IS NOT LIMITED TO, ALL CARE NECESSARY TO THE
- 13 POINT WHERE NO MATERIAL DETERIORATION OF A CONDITION IS LIKELY,
- 14 WITHIN REASONABLE MEDICAL PROBABILITY, TO RESULT FROM OR OCCUR
- 15 DURING TRANSFER OF THE PATIENT.
- 16 SEC. 2176. AN AUTOMOBILE INSURER THAT OFFERS A MANAGED CARE
- 17 OPTION UNDER THIS CHAPTER SHALL ALSO OFFER PERSONAL PROTECTION
- 18 INSURANCE BENEFITS UNDER SECTION 3107(1)(A) OR (B) THAT ARE NOT
- 19 SUBJECT TO THE MANAGED CARE OPTION.
- 20 SEC. 2177. A MANAGED CARE OPTION APPLIES TO THE INSURED WHO
- 21 SELECTS THE MANAGED CARE OPTION AND ANY PERSON WHO RESIDES IN AN
- 22 AREA WHERE THE MANAGED CARE OPTION IS AVAILABLE AND WHO IS CLAIMING
- 23 PERSONAL PROTECTION INSURANCE BENEFITS UNDER THE POLICY WITH THE
- 24 MANAGED CARE OPTION.
- 25 SEC. 2181. A MANAGED CARE OPTION MAY PROVIDE FOR DEDUCTIBLES,
- 26 COPAYMENTS, OR BOTH DEDUCTIBLES AND COPAYMENTS.
- 27 SEC. 2183. A MANAGED CARE OPTION MUST PROVIDE FOR ALL OF THE



- 1 FOLLOWING:
- 2 (A) THAT PERSONAL PROTECTION INSURANCE BENEFITS ARE PRIMARY
- 3 AND WILL NOT BE COORDINATED WITH OTHER HEALTH AND ACCIDENT COVERAGE
- 4 AVAILABLE TO THE INDIVIDUAL CLAIMING PERSONAL PROTECTION INSURANCE
- 5 BENEFITS UNDER THE POLICY WITH THE MANAGED CARE OPTION.
- 6 (B) THAT PERSONAL PROTECTION INSURANCE BENEFITS MUST BE
- 7 EXHAUSTED BY THE INDIVIDUAL CLAIMING THOSE BENEFITS UNDER THE
- 8 POLICY WITH THE MANAGED CARE OPTION BEFORE THE INDIVIDUAL MAY SEEK
- 9 BENEFITS FROM ANOTHER HEALTH OR ACCIDENT COVERAGE PROVIDER.
- 10 (C) THAT DEDUCTIBLES, CO-PAYS, OR OTHER SIMILAR SANCTIONS WILL
- 11 NOT BE ASSESSED OR COLLECTED FROM OTHER HEALTH AND ACCIDENT
- 12 COVERAGE PROVIDERS FOR THE INDIVIDUAL CLAIMING PERSONAL PROTECTION
- 13 INSURANCE BENEFITS UNDER THE POLICY WITH THE MANAGED CARE OPTION.
- 14 SEC. 2185. AT THE TIME OF THE INITIAL SELECTION OF A MANAGED
- 15 CARE OPTION BY AN INSURED, AN AUTOMOBILE INSURER SHALL OBTAIN A
- 16 SIGNED ACKNOWLEDGMENT THAT THE INSURED RECEIVED A WRITTEN
- 17 DISCLOSURE STATEMENT APPROVED BY THE DIRECTOR OR A WRITTEN
- 18 DISCLOSURE STATEMENT THAT INCLUDES ALL OF THE FOLLOWING:
- 19 (A) A SUMMARY OF THE PROVISIONS OF THE MANAGED CARE OPTION.
- 20 (B) THE ESTIMATED RANGE OF THE PERCENTAGE OF THE DISCOUNT
- 21 PROVIDED BY THE MANAGED CARE OPTION.
- 22 (C) A GENERAL DESCRIPTION OF THE DIFFERENCES BETWEEN A MANAGED
- 23 CARE OPTION UNDER THIS CHAPTER AND PERSONAL PROTECTION INSURANCE
- 24 BENEFITS UNDER SECTION 3107(1)(A) OR (B) THAT ARE NOT SUBJECT TO
- 25 THE MANAGED CARE OPTION, INCLUDING ANY PROCEDURAL DIFFERENCES IN
- 26 SEEKING TREATMENT AND FILING A CLAIM.
- 27 (D) THE CONSEQUENCES FOR VIOLATING ANY PROVISIONS OF THE



- 1 MANAGED CARE OPTION, INCLUDING THE POSSIBILITY OF A CLAIM DENIAL,
- 2 THE PAYMENT OF A DEDUCTIBLE AND THE AMOUNT OF THE DEDUCTIBLE, AND
- 3 ANY ADDITIONAL OUT-OF-POCKET EXPENSES THAT MAY BE INCURRED.
- 4 (E) AN EXPLANATION OF WHETHER THE INSURER OFFERS AN OPT-OUT
- 5 PROVISION THAT WOULD ENABLE THE INSURED TO CHANGE HIS OR HER POLICY
- 6 FROM THE MANAGED CARE OPTION TO PERSONAL PROTECTION INSURANCE
- 7 BENEFITS UNDER SECTION 3107(1)(A) OR (B) THAT ARE NOT SUBJECT TO
- 8 THE MANAGED CARE OPTION AND ANY RESTRICTIONS PLACED ON THE INSURED
- 9 IN REGARD TO OPTING OUT OF THE MANAGED CARE OPTION.
- 10 SEC. 2187. THE DISCLOSURE STATEMENT UNDER SECTION 2185 MUST
- 11 INCLUDE A POSTAL MAILING ADDRESS AND EITHER A TOLL-FREE TELEPHONE
- 12 NUMBER OR AN INTERNET WEBSITE ADDRESS THAT INSUREDS OR APPLICANTS
- 13 FOR INSURANCE MAY WRITE, CALL, OR OTHERWISE ACCESS FOR INFORMATION
- 14 ON THE MANAGED CARE OPTION.
- Sec. 3101. (1) The SUBJECT TO CHAPTER 32A, THE owner or
- 16 registrant of a motor vehicle required to be registered in this
- 17 state shall maintain security for payment of benefits under
- 18 personal protection insurance -AS REQUIRED UNDER SECTION 3107,
- 19 property protection insurance, and residual liability insurance AS
- 20 REQUIRED UNDER SECTION 3009. Security shall only be required BY
- 21 THIS SUBSECTION IS ONLY REQUIRED to be in effect during the period
- 22 the motor vehicle is driven or moved upon—ON a highway.
- 23 Notwithstanding any other provision in this act, an insurer that
- 24 has issued an automobile insurance policy on a motor vehicle that
- 25 is not driven or moved upon ON a highway may allow the insured
- 26 owner or registrant of the motor vehicle to delete a portion of the
- 27 coverages under the policy and maintain the comprehensive coverage

- 1 portion of the policy in effect.
- 2 (2) As used in this chapter:
- 3 (a) "Automobile insurance" means that term as defined in
- 4 section 2102.
- 5 (B) "CONSUMER PRICE INDEX" MEANS THE PERCENTAGE OF CHANGE IN
- 6 THE CONSUMER PRICE INDEX FOR ALL URBAN CONSUMERS IN THE UNITED
- 7 STATES CITY AVERAGE FOR ALL ITEMS, AS REPORTED BY THE UNITED STATES
- 8 DEPARTMENT OF LABOR, BUREAU OF LABOR STATISTICS, AND AS CERTIFIED
- 9 BY THE DIRECTOR.
- 10 (C) (b) "Highway" means "HIGHWAY OR STREET" AS that term as IS
- 11 defined in section 20 of the Michigan vehicle code, 1949 PA 300,
- **12** MCL 257.20.
- (D) (c) "Motorcycle" means a vehicle having THAT HAS a saddle
- 14 or seat for the use of the rider, IS designed to travel on not more
- 15 than 3 wheels in contact with the ground, which AND is equipped
- 16 with a motor that exceeds 50 cubic centimeters piston displacement.
- 17 The wheels on any attachment to the vehicle shall not be considered
- 18 as wheels in contact with the ground. Motorcycle does not include a
- 19 moped, as defined in section 32b of the Michigan vehicle code, 1949
- 20 PA 300, MCL 257.32b. Motorcycle does not include an ORV.
- 21 (E) (d)—"Motorcycle accident" means a loss involving the
- 22 ownership, operation, maintenance, or use of a motorcycle as a
- 23 motorcycle, but not involving the ownership, operation,
- 24 maintenance, or use of a motor vehicle as a motor vehicle.
- 25 (F) (e)—"Motor vehicle" means a vehicle, including a trailer,
- 26 operated or designed for operation upon a public highway by power
- 27 other than muscular power which THAT has more than 2 wheels. Motor



- 1 vehicle does not include a motorcycle or a moped, as defined in
- 2 section 32b of the Michigan vehicle code, 1949 PA 300, MCL 257.32b.
- 3 Motor vehicle does not include a farm tractor or other implement of
- 4 husbandry which THAT is not subject to the registration
- 5 requirements of the Michigan vehicle code pursuant to section 216
- 6 of the Michigan vehicle code, 1949 PA 300, MCL 257.216. Motor
- 7 vehicle does not include an ORV.
- 8 (G) (f) "Motor vehicle accident" means a loss involving the
- 9 ownership, operation, maintenance, or use of a motor vehicle as a
- 10 motor vehicle regardless of whether the accident also involves the
- 11 ownership, operation, maintenance, or use of a motorcycle as a
- **12** motorcycle.
- (H) (g) "ORV" means a motor-driven recreation vehicle designed
- 14 for off-road use and capable of cross-country travel without
- 15 benefit of road or trail, on or immediately over land, snow, ice,
- 16 marsh, swampland, or other natural terrain. ORV includes, but is
- 17 not limited to, a multitrack or multiwheel drive vehicle, a
- 18 motorcycle or related 2-wheel, 3-wheel, or 4-wheel vehicle, an
- 19 amphibious machine, a ground effect air cushion vehicle, an ATV as
- 20 defined in section 81101 of the natural resources and environmental
- 21 protection act, 1994 PA 451, MCL 324.81101, or other means of
- 22 transportation deriving motive power from a source other than
- 23 muscle or wind. ORV does not include a vehicle described in this
- 24 subdivision that is registered for use upon a public highway and
- 25 has the security described in section 3101 or REQUIRED UNDER
- 26 SUBSECTION (1), SECTION 3103, OR CHAPTER 32A in effect.
- 27 (I) (h) "Owner" means any of the following:



- (i) A person renting a motor vehicle or having the use thereof,
 OF A MOTOR VEHICLE, under a lease or otherwise, for a period that
 is greater than 30 days.
- 4 (ii) A person who holds the legal title to a vehicle, other
 5 than a person engaged in the business of leasing motor vehicles who
 6 is the lessor of a motor vehicle pursuant to a lease providing for
 7 the use of the motor vehicle by the lessee for a period that is
 8 greater than 30 days.
- 9 (iii) A person who has the immediate right of possession of a
 10 motor vehicle under an installment sale contract.
- 11 (J) (i) "Registrant" does not include a person engaged in the
 12 business of leasing motor vehicles who is the lessor of a motor
 13 vehicle pursuant to a lease providing for the use of the motor
 14 vehicle by the lessee for a period that is greater than 30 days.
- 15 (3) Security REQUIRED BY SUBSECTION (1) may be provided under
 16 a policy issued by an insurer duly authorized to transact business
 17 in this state which THAT affords insurance for the payment of
 18 benefits described in subsection (1). A policy of insurance
 19 represented or sold as providing security is considered to provide
 20 insurance for the payment of the benefits.
- 21 (4) Security required by subsection (1) may be provided by any
 22 other method approved by the secretary of state as affording
 23 security equivalent to that afforded by a policy of insurance, if
 24 proof of the security is filed and continuously maintained with the
 25 secretary of state throughout the period the motor vehicle is
 26 driven or moved upon a highway. The person filing the security has
 27 all the obligations and rights of an insurer under this chapter.

- 1 When the context permits, "insurer" as used in this chapter,
- 2 includes any person filing the security as provided in this
- 3 section. THIS SUBSECTION DOES NOT APPLY TO A POLICY UNDER CHAPTER
- 4 32A.
- 5 Sec. 3104. (1) An—THE CATASTROPHIC CLAIMS ASSOCIATION IS
- 6 CREATED AS AN unincorporated, nonprofit association. to be known as
- 7 the catastrophic claims association, hereinafter referred to as the
- 8 association, is created. Each—IF AN INCORPORATED ASSOCIATION IS
- 9 ISSUED A CERTIFICATE OF AUTHORITY UNDER SUBSECTION (5), THE
- 10 UNINCORPORATED ASSOCIATION SHALL BE KNOWN AS THE MICHIGAN LEGACY
- 11 CLAIMS ASSOCIATION. UNTIL THE UNINCORPORATED ASSOCIATION IS
- 12 DISSOLVED, AN insurer engaged in writing insurance coverages that
- 13 provide the security required by section 3101(1) within IN this
- 14 state, as a condition of its authority to transact insurance in
- 15 this state, shall be a member of the association—and shall be—IS
- 16 bound by the plan of operation of the UNINCORPORATED association.
- 17 Each Until the Unincorporated Association is dissolved, an insurer
- 18 engaged in writing insurance coverages that provide the security
- 19 required by section 3103(1) within IN this state, as a condition of
- 20 its authority to transact insurance in this state, shall be IS
- 21 considered a member of the UNINCORPORATED association, but only for
- 22 purposes of ACCEPTING INDEMNIFICATION UNDER SUBSECTION (8) AND THE
- 23 CALCULATION AND CHARGING OF premiums under subsection (7)(d). (14).
- 24 Except as expressly provided in this section, the AN UNINCORPORATED
- 25 OR INCORPORATED association is not AN INSURER AN IS NOT subject to
- 26 any laws of this state with respect to insurers, but in all other
- 27 respects the association is subject to the laws of this state to

- 1 the extent that the association would be if it were an insurer
- 2 organized and subsisting under chapter 50.
- 3 (2) TWO OR MORE VOTING DIRECTORS OF THE BOARD OF THE
- 4 UNINCORPORATED ASSOCIATION MAY FORM AN INCORPORATED ASSOCIATION BY
- 5 SUBSCRIBING TO AND FILING WITH THE DIRECTOR OF THE DEPARTMENT
- 6 ARTICLES OF INCORPORATION. IF THE UNINCORPORATED ASSOCIATION HAS
- 7 BEEN DISSOLVED, 2 OR MORE INDIVIDUALS MAY FORM AN INCORPORATED
- 8 ASSOCIATION BY SUBSCRIBING TO AND FILING WITH THE DIRECTOR OF THE
- 9 DEPARTMENT ARTICLES OF INCORPORATION. ARTICLES OF INCORPORATION
- 10 FILED UNDER THIS SUBSECTION MUST INCLUDE ALL OF THE FOLLOWING:
- 11 (A) THE NAMES AND PLACES OF RESIDENCE OF THE INCORPORATORS.
- 12 (B) THE LOCATION OF THE PRINCIPAL OFFICE OF THE INCORPORATED
- 13 ASSOCIATION FOR THE TRANSACTION OF BUSINESS IN THIS STATE.
- 14 (C) THE NAME BY WHICH THE INCORPORATED ASSOCIATION WILL BE
- 15 KNOWN, WHICH MUST INCLUDE THE WORDS "MICHIGAN", "CATASTROPHIC",
- 16 "CLAIMS", AND "ASSOCIATION", BUT MAY NOT INCLUDE THE WORDS
- 17 "LEGACY", "INSURANCE", "CASUALTY", "SURETY", "HEALTH AND ACCIDENT",
- 18 "MUTUAL", OR OTHER WORDS DESCRIPTIVE OF THE INSURANCE OR SURETY
- 19 BUSINESS.
- 20 (D) THE PURPOSES OF THE INCORPORATED ASSOCIATION, WHICH MUST
- 21 BE LIMITED TO PURPOSES AUTHORIZED FOR AN INCORPORATED ASSOCIATION
- 22 UNDER THIS SECTION.
- 23 (E) A STATEMENT THAT THE INCORPORATED ASSOCIATION IS ORGANIZED
- 24 ON A NONSTOCK, DIRECTORSHIP BASIS UNDER THIS ACT AND THE NONPROFIT
- 25 CORPORATION ACT, 1982 PA 162, MCL 450.2101 TO 450.3192.
- 26 (F) ANY OTHER TERMS AND CONDITIONS THAT ARE NOT INCONSISTENT
- 27 WITH THIS SECTION OR OTHER APPLICABLE LAW AND THAT THE



- 1 INCORPORATORS CONSIDER TO BE NECESSARY FOR THE CONDUCT OF THE
- 2 AFFAIRS OF THE INCORPORATED ASSOCIATION.
- 3 (3) AT LEAST 1 OF THE INCORPORATORS OF AN INCORPORATED
- 4 ASSOCIATION SHALL SIGN THE ARTICLES OF INCORPORATION BEFORE A
- 5 NOTARY PUBLIC APPOINTED UNDER THE MICHIGAN NOTARY PUBLIC ACT, 2003
- 6 PA 238, MCL 55.261 TO 55.315. THE ARTICLES MUST BE FILED IN THE
- 7 FORM PRESCRIBED BY THE DIRECTOR OF THE DEPARTMENT. IF AT THE TIME
- 8 OF SUBMISSION NO OTHER INCORPORATED ASSOCIATION IS ACTIVE, THE
- 9 DIRECTOR OF THE DEPARTMENT MAY APPROVE AND CERTIFY THE ARTICLES OF
- 10 INCORPORATION AS AUTHORIZED UNDER APPLICABLE LAW. THE DIRECTOR OF
- 11 THE DEPARTMENT SHALL NOT CERTIFY ARTICLES OF INCORPORATION FOR MORE
- 12 THAN 1 INCORPORATED ASSOCIATION TO BE ACTIVE AND OPERATE IN THIS
- 13 STATE AT THE SAME TIME. IF THE DIRECTOR OF THE DEPARTMENT APPROVES
- 14 THE ARTICLES OF INCORPORATION, THE DIRECTOR OF THE DEPARTMENT SHALL
- 15 CERTIFY THE ARTICLES AND TRANSMIT 2 CERTIFIED COPIES OF THE
- 16 ARTICLES TO THE INCORPORATORS. THE INCORPORATORS SHALL FILE 1
- 17 CERTIFIED COPY WITH THE BUREAU OF COMMERCIAL SERVICES OF THE
- 18 DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS AND RETAIN 1
- 19 CERTIFIED COPY WITH THE RECORDS OF THE INCORPORATED ASSOCIATION.
- 20 THE DIRECTOR OF THE DEPARTMENT SHALL RETAIN A CERTIFIED COPY OF THE
- 21 ARTICLES OF INCORPORATION WITH THE RECORDS OF THE DEPARTMENT. THE
- 22 BOARD OF AN INCORPORATED ASSOCIATION, WITH THE APPROVAL OF THE
- 23 DIRECTOR OF THE DEPARTMENT AND IN THE MANNER PROVIDED IN THE
- 24 ARTICLES OF INCORPORATION, MAY DO BOTH OF THE FOLLOWING:
- 25 (A) AMEND THE ARTICLES OF INCORPORATION IN ANY MANNER NOT
- 26 INCONSISTENT WITH THIS SECTION AND OTHER APPLICABLE LAW.
- 27 (B) INTEGRATE INTO A SINGLE INSTRUMENT AS RESTATED ARTICLES OF



- 1 INCORPORATION THE PROVISIONS OF THE INCORPORATED ASSOCIATION'S
- 2 ARTICLES OF INCORPORATION THEN IN EFFECT, INCLUDING PRIOR
- 3 AMENDMENTS.
- 4 (4) BEFORE AN INCORPORATED ASSOCIATION CONDUCTS CLAIMS
- 5 ACTIVITIES AUTHORIZED UNDER THIS SECTION AND WITHIN 90 DAYS AFTER
- 6 THE DIRECTOR OF THE DEPARTMENT CERTIFIES THE ARTICLES OF
- 7 INCORPORATION OF THE INCORPORATED ASSOCIATION UNDER SUBSECTION (3),
- 8 THE INCORPORATED ASSOCIATION SHALL FILE WITH THE DIRECTOR OF THE
- 9 DEPARTMENT IN THE FORM AND MANNER PRESCRIBED BY THE DIRECTOR OF THE
- 10 DEPARTMENT AN APPLICATION FOR A CERTIFICATE OF AUTHORITY DETAILING
- 11 ALL OF THE FOLLOWING:
- 12 (A) THE PLAN OF OPERATION UNDER WHICH THE INCORPORATED
- 13 ASSOCIATION PROPOSES TO CONDUCT ITS AFFAIRS.
- 14 (B) A COPY OF THE INCORPORATED ASSOCIATION'S BYLAWS.
- 15 (C) OTHER INFORMATION AS PRESCRIBED BY THE DIRECTOR OF THE
- 16 DEPARTMENT.
- 17 (5) AFTER REVIEWING AN APPLICATION FOR A CERTIFICATE OF
- 18 AUTHORITY FILED BY AN INCORPORATED ASSOCIATION UNDER SUBSECTION
- 19 (4), IF THE DIRECTOR OF THE DEPARTMENT IS SATISFIED THAT THE
- 20 INCORPORATED ASSOCIATION CAN COMPLY WITH THIS SECTION AND OTHER
- 21 APPLICABLE LAW, THE DIRECTOR OF THE DEPARTMENT SHALL ISSUE TO THE
- 22 INCORPORATED ASSOCIATION A CERTIFICATE OF AUTHORITY TO COMMENCE
- 23 CLAIMS ACTIVITIES AUTHORIZED UNDER THIS SECTION. WHEN ISSUING A
- 24 CERTIFICATE OF AUTHORITY TO AN INCORPORATED ASSOCIATION, THE
- 25 DIRECTOR OF THE DEPARTMENT SHALL ESTABLISH THE INITIAL CATASTROPHIC
- 26 CLAIMS ASSESSMENT TO BE ASSESSED AS PROVIDED IN SUBSECTION (31).
- 27 (6) EXCEPT AS OTHERWISE PROVIDED IN THIS SECTION, AN



- 1 INCORPORATED ASSOCIATION IS SUBJECT TO THE NONPROFIT CORPORATION
- 2 ACT, 1982 PA 162, MCL 450.2101 TO 450.3192. AN INCORPORATED
- 3 ASSOCIATION IS A CHARITABLE AND BENEVOLENT INSTITUTION FOR THE
- 4 PUBLIC BENEFIT AND THE INCORPORATED ASSOCIATION'S MONEY AND
- 5 PROPERTY ARE EXEMPT FROM TAXATION BY THIS STATE OR ANY POLITICAL
- 6 SUBDIVISION OF THIS STATE. AN INCORPORATED ASSOCIATION MAY NOT BE
- 7 INCORPORATED IN THIS STATE EXCEPT UNDER THIS SECTION.
- 8 (7) EXCEPT AS OTHERWISE PROVIDED IN THIS SECTION, AN
- 9 INCORPORATED ASSOCIATION IS NOT SUBJECT TO THE LAWS OF THIS STATE
- 10 APPLICABLE TO INSURERS AND IS NOT REQUIRED TO PARTICIPATE IN A POOL
- 11 OR FUND IN WHICH AN INSURER IS REQUIRED TO PARTICIPATE. AN
- 12 INCORPORATED ASSOCIATION IS SUBJECT TO SUPERVISION BY THE DIRECTOR
- 13 OF THE DEPARTMENT AS PROVIDED IN THIS SECTION. A DISSOLUTION OR
- 14 LIQUIDATION OF AN INCORPORATED ASSOCIATION MUST BE CONDUCTED UNDER
- 15 THE SUPERVISION OF THE DIRECTOR OF THE DEPARTMENT, WHO HAS THE SAME
- 16 POWER RELATING TO THE DISSOLUTION OR LIQUIDATION AS IS GRANTED TO
- 17 THE DIRECTOR OF THE DEPARTMENT UNDER THIS ACT FOR DISSOLUTION OR
- 18 LIQUIDATION OF OTHER TYPES OF ENTITIES.
- 19 (8) (2)—The UNINCORPORATED association shall provide and each
- 20 member shall accept indemnification for 100% of the amount of
- 21 ultimate loss sustained under personal protection insurance
- 22 coverages in excess of the following amounts in each loss
- 23 occurrence:
- 24 (a) For a motor vehicle accident policy issued or renewed
- 25 before July 1, 2002, \$250,000.00.
- (b) For a motor vehicle accident policy issued or renewed
- 27 during the period July 1, 2002 to June 30, 2003, \$300,000.00.



- 1 (c) For a motor vehicle accident policy issued or renewed 2 during the period July 1, 2003 to June 30, 2004, \$325,000.00.
- 3 (d) For a motor vehicle accident policy issued or renewed4 during the period July 1, 2004 to June 30, 2005, \$350,000.00.
- (e) For a motor vehicle accident policy issued or renewedduring the period July 1, 2005 to June 30, 2006, \$375,000.00.
- 7 (f) For a motor vehicle accident policy issued or renewed 8 during the period July 1, 2006 to June 30, 2007, \$400,000.00.
- 9 (g) For a motor vehicle accident policy issued or renewed during the period July 1, 2007 to June 30, 2008, \$420,000.00.
- (h) For a motor vehicle accident policy issued or renewedduring the period July 1, 2008 to June 30, 2009, \$440,000.00.
- (i) For a motor vehicle accident policy issued or renewedduring the period July 1, 2009 to June 30, 2010, \$460,000.00.
- 15 (j) For a motor vehicle accident policy issued or renewed
 16 during the period July 1, 2010 to June 30, 2011, \$480,000.00.
- 17 (k) For a motor vehicle accident policy issued or renewed 18 during the period July 1, 2011 to June 30, 2013, \$500,000.00.
- 19 Beginning July 1, 2013, this \$500,000.00 amount shall be increased
- 20 biennially on July 1 of each odd-numbered year, for policies issued
- 21 or renewed before July 1 of the following odd-numbered year, by the
- 22 lesser of 6% or the consumer price index, and rounded to the
- 23 nearest \$5,000.00. This biennial adjustment shall be calculated by
- 24 the association by January 1 of the year of its July 1 effective
- **25** date.
- 26 (l) FOR A MOTOR VEHICLE ACCIDENT POLICY ISSUED OR RENEWED
- 27 DURING THE PERIOD JULY 1, 2013 TO THE FIRST JUNE 30 AFTER THE

- 1 DIRECTOR OF THE DEPARTMENT ISSUES A CERTIFICATE OF AUTHORITY UNDER
- 2 SUBSECTION (5), \$500,000.00. THE UNINCORPORATED ASSOCIATION IS NOT
- 3 LIABLE OR RESPONSIBLE FOR A LOSS OCCURRENCE ATTRIBUTABLE TO A MOTOR
- 4 VEHICLE ACCIDENT FOR A POLICY ISSUED OR RENEWED AFTER THE FIRST
- 5 JUNE 30 AFTER THE DIRECTOR OF THE DEPARTMENT ISSUES A CERTIFICATE
- 6 OF AUTHORITY UNDER SUBSECTION (5).
- 7 (9) FOR A LOSS OCCURRENCE ATTRIBUTABLE TO A MOTOR VEHICLE
- 8 ACCIDENT FOR A POLICY ISSUED OR RENEWED AFTER THE FIRST JUNE 30
- 9 AFTER THE DIRECTOR OF THE DEPARTMENT ISSUES A CERTIFICATE OF
- 10 AUTHORITY UNDER SUBSECTION (5), THE RESPONSIBLE INSURER SHALL
- 11 RETAIN 100% OF THE AMOUNT OF ULTIMATE LOSS SUSTAINED UNDER PERSONAL
- 12 PROTECTION INSURANCE COVERAGES UP TO \$500,000.00. THE INCORPORATED
- 13 ASSOCIATION IS RESPONSIBLE FOR 100% OF ALL LIABILITY FOR ULTIMATE
- 14 LOSS SUSTAINED WITHIN THE SCOPE OF PERSONAL PROTECTION INSURANCE
- 15 COVERAGES AND CLAIMS EXPENSES IN EXCESS OF \$500,000.00.
- 16 (10) (3)—An insurer may withdraw from the UNINCORPORATED
- 17 association only upon—ON ceasing to write insurance that provides
- 18 the security required by section 3101(1) in this state.
- 19 (11) (4)—An insurer whose membership in the UNINCORPORATED
- 20 association has been terminated by withdrawal shall continue
- 21 CONTINUES to be bound by the plan of operation , and, upon ON
- 22 withdrawal, all unpaid premiums that have been charged to the
- 23 withdrawing member are payable as of ON the effective date of the
- 24 withdrawal.
- 25 (12) (5) An unsatisfied net liability to the UNINCORPORATED
- 26 association of an insolvent member shall be assumed by and
- 27 apportioned among the remaining members of the UNINCORPORATED



- 1 association as provided in the plan of operation. The
- 2 UNINCORPORATED association has all rights allowed by law on behalf
- 3 of the remaining members against the estate or funds of the
- 4 insolvent member for sums MONEY due TO the UNINCORPORATED
- 5 association.
- 6 (13) (6) If a member OF THE UNINCORPORATED ASSOCIATION has
- 7 been merged or consolidated into another insurer or another insurer
- 8 has reinsured a member's entire business that provides the security
- 9 required by section 3101(1) in this state, the member and
- 10 successors in interest of the member remain liable for the member's
- 11 obligations TO THE UNINCORPORATED ASSOCIATION.
- 12 (14) (7)—The UNINCORPORATED association shall do all of the
- 13 following on behalf of the members of the UNINCORPORATED
- **14** association:
- 15 (a) Assume 100% of all liability as provided in subsection
- 16 (2). (8) FOR A LOSS OCCURRENCE ATTRIBUTABLE TO A MOTOR VEHICLE
- 17 ACCIDENT FOR A POLICY ISSUED OR RENEWED BEFORE THE FIRST JULY 1
- 18 AFTER THE DIRECTOR OF THE DEPARTMENT ISSUES A CERTIFICATE OF
- 19 AUTHORITY UNDER SUBSECTION (5).
- 20 (b) Establish procedures by which members shall promptly
- 21 report to the UNINCORPORATED association each claim that, on the
- 22 basis of the injuries or damages sustained, may reasonably be
- 23 anticipated to involve the UNINCORPORATED association if the member
- 24 is ultimately held legally liable for the injuries or damages.
- 25 Solely for the purpose of reporting claims, the member shall in all
- 26 instances consider itself legally liable for the injuries or
- 27 damages. The member shall also advise the UNINCORPORATED



- 1 association of subsequent developments likely to materially affect
- 2 the interest of the UNINCORPORATED association in the claim.
- 3 (c) Maintain relevant loss and expense data relative to all
- 4 liabilities of the UNINCORPORATED association and require each
- 5 member to furnish statistics, in connection with liabilities of the
- 6 UNINCORPORATED association, at the times and in the form and detail
- 7 as may be required by the plan of operation.
- 8 (d) In a manner provided for in the plan of operation,
- 9 calculate and charge to members of the association a total premium
- 10 sufficient to cover the expected losses and expenses of the
- 11 UNINCORPORATED association that the UNINCORPORATED association will
- 12 likely incur during the period for which the premium is applicable.
- 13 The premium shall MUST include an amount to cover incurred but not
- 14 reported losses for the period and may be adjusted for any excess
- 15 or deficient premiums from previous periods. A PREMIUM MAY NOT BE
- 16 CHARGED UNDER THIS SECTION FOR POLICIES ISSUED OR RENEWED AFTER THE
- 17 FIRST JUNE 30 AFTER THE DIRECTOR OF THE DEPARTMENT ISSUES A
- 18 CERTIFICATE OF AUTHORITY UNDER SUBSECTION (5). Excesses or
- 19 deficiencies from previous periods may be fully adjusted in a
- 20 single period or may be adjusted over several periods in a manner
- 21 provided for in the plan of operation. Each member shall be charged
- 22 an amount equal to that member's total written car years of
- 23 insurance providing the security required by section 3101(1) or
- 24 3103(1), or both, written in this state during the period to which
- 25 the premium applies, multiplied by the average premium per car. The
- 26 average premium per car shall be IS the total premium calculated
- 27 divided by the total written car years of insurance providing the

- 1 security required by section 3101(1) or 3103(1) written in this
- 2 state of all members during the period to which the premium
- 3 applies. A member shall be charged a premium for a historic vehicle
- 4 that is insured with the member of 20% of the premium charged for a
- 5 car insured with the member. As used in this subdivision:
- 6 (i) "Car" includes a motorcycle but does not include a historic
- 7 vehicle.
- 8 (ii) "Historic vehicle" means a vehicle that is a registered
- 9 historic vehicle under section 803a or 803p of the Michigan vehicle
- 10 code, 1949 PA 300, MCL 257.803a and 257.803p.
- 11 (e) Require and accept the payment of premiums from members of
- 12 the association as provided for in the plan of operation. The
- 13 UNINCORPORATED association shall do either of the following:
- 14 (i) Require payment of the premium in full within 45 days after
- 15 the premium charge.
- 16 (ii) Require payment of the premiums to be made periodically to
- 17 cover the actual cash obligations of the UNINCORPORATED
- 18 association.
- 19 (f) Receive and distribute all sums MONEY required by the
- 20 operation of the UNINCORPORATED association.
- 21 (g) Establish procedures for reviewing claims procedures and
- 22 practices of members. of the association. If the claims procedures
- 23 or practices of a member are considered inadequate to properly
- 24 service the liabilities of the UNINCORPORATED association, the
- 25 UNINCORPORATED association may undertake or may contract with
- 26 another person, including another member, to adjust or assist in
- 27 the adjustment of claims for the member on claims that create a

- 1 potential liability to the UNINCORPORATED association and may
- 2 charge the cost of the adjustment to the member.
- 3 (15) AN INCORPORATED ASSOCIATION SHALL DO ALL OF THE
- 4 FOLLOWING:
- 5 (A) ASSUME LIABILITY FOR CLAIMS AS PROVIDED IN SUBSECTION (9).
- 6 (B) ESTABLISH PROCEDURES FOR THE OWNER OR REGISTRANT OF A
- 7 MOTOR VEHICLE THAT MAINTAINS THE SECURITY REQUIRED UNDER SECTION
- 8 3101(1), AN AGENT OF THE OWNER OR REGISTRANT, A CLAIMANT, OR AN
- 9 INSURER, TO REPORT TO THE INCORPORATED ASSOCIATION EACH CLAIM UNDER
- 10 THE SECURITY THAT ON THE BASIS OF THE INJURIES OR DAMAGES SUSTAINED
- 11 REASONABLY MAY BE ANTICIPATED TO INVOLVE THE INCORPORATED
- 12 ASSOCIATION.
- 13 (C) MAINTAIN RELEVANT LOSS AND EXPENSE DATA RELATIVE TO ALL
- 14 LIABILITIES OF THE INCORPORATED ASSOCIATION AND REQUIRE INSURERS TO
- 15 FURNISH STATISTICS AT THE TIMES AND IN THE FORM AND DETAIL AS
- 16 REQUIRED BY THE PLAN OF OPERATION OF THE INCORPORATED ASSOCIATION.
- 17 (D) BEFORE THE SECOND JULY 1 AFTER THE DIRECTOR OF THE
- 18 DEPARTMENT ISSUES A CERTIFICATE OF AUTHORITY UNDER SUBSECTION (5)
- 19 AND BEFORE JULY 1 OF EACH FOLLOWING YEAR, DETERMINE THE ANNUAL PER-
- 20 MOTOR-VEHICLE ASSESSMENT TO BE IMPOSED UNDER SUBSECTION (31). THE
- 21 TOTAL OF ALL ASSESSMENTS IMPOSED UNDER SUBSECTION (31) MUST BE
- 22 SUFFICIENT TO COVER THE EXPECTED LOSSES AND EXPENSES THAT THE
- 23 INCORPORATED ASSOCIATION LIKELY WILL INCUR IN THE PERIOD FOR WHICH
- 24 THE ASSESSMENTS ARE APPLICABLE, INCLUDING, BUT NOT LIMITED TO, ANY
- 25 ASSESSMENT IMPOSED ON THE INCORPORATED ASSOCIATION UNDER SUBSECTION
- 26 (32). THE INCORPORATED ASSOCIATION SHALL CALCULATE THE ASSESSMENT
- 27 UNDER THIS SUBDIVISION BY DIVIDING THE TOTAL EXPECTED LOSSES AND



- 1 EXPENSES OF THE INCORPORATED ASSOCIATION FOR THE PERIOD BY THE
- 2 TOTAL WRITTEN CAR YEARS OF INSURANCE PROVIDING THE SECURITY
- 3 REQUIRED BY SECTION 3101(1) WRITTEN IN THIS STATE DURING THE
- 4 PREVIOUS PERIOD. TOTAL EXPECTED LOSSES AND EXPENSES MUST INCLUDE AN
- 5 AMOUNT TO COVER INCURRED BUT NOT REPORTED LOSSES FOR THE PERIOD.
- 6 THE ASSESSMENT CALCULATED UNDER THIS SUBDIVISION MAY BE ADJUSTED
- 7 FOR ANY EXCESS OR DEFICIENT AMOUNTS FROM PREVIOUS PERIODS. EXCESSES
- 8 OR DEFICIENCIES FROM A PREVIOUS PERIOD MAY BE FULLY ADJUSTED IN A
- 9 SINGLE PERIOD OR MAY BE ADJUSTED OVER SEVERAL PERIODS AS PROVIDED
- 10 IN THE PLAN OF OPERATION OF THE INCORPORATED ASSOCIATION. THE
- 11 INCORPORATED ASSOCIATION SHALL DETERMINE A SEPARATE ASSESSMENT
- 12 AMOUNT TO BE CHARGED TO AN OWNER OR REGISTRANT OF AN INSURED
- 13 HISTORIC VEHICLE EQUAL TO 20% OF THE ASSESSMENT CHARGED FOR A MOTOR
- 14 VEHICLE OTHER THAN A HISTORIC VEHICLE. AS USED IN THIS SUBDIVISION:
- 15 (i) "CAR" INCLUDES A MOTORCYCLE BUT DOES NOT INCLUDE A HISTORIC
- 16 VEHICLE.
- 17 (ii) "HISTORIC VEHICLE" MEANS A VEHICLE THAT IS A REGISTERED
- 18 HISTORIC VEHICLE UNDER SECTION 803A OR 803P OF THE MICHIGAN VEHICLE
- 19 CODE, 1949 PA 300, MCL 257.803A AND 257.803P.
- 20 (E) REQUIRE AND ACCEPT THE PAYMENT OF ASSESSMENTS TO THE
- 21 INCORPORATED ASSOCIATION AUTHORIZED UNDER THIS SECTION.
- 22 (16) (8) In addition to other powers granted to it by UNDER
- 23 this section, the UNINCORPORATED ASSOCIATION OR AN INCORPORATED
- 24 association may do all of the following:
- 25 (a) Sue and be sued in the name of the association. A judgment
- 26 against the UNINCORPORATED association shall DOES not create any
- 27 direct liability against the individual members of the



- 1 UNINCORPORATED association. The UNINCORPORATED association may
- 2 provide for the indemnification of its members, AND THE
- 3 UNINCORPORATED ASSOCIATION OR AN INCORPORATED ASSOCIATION MAY
- 4 PROVIDE FOR THE INDEMNIFICATION OF THE members of the ITS board of
- 5 directors, of the association, and officers, AND employees, and
- 6 other persons lawfully acting on behalf of the association.
- 7 (b) Reinsure all or any portion of its potential liability
- 8 with reinsurers licensed to transact insurance in this state or
- 9 approved by the commissioner.DIRECTOR OF THE DEPARTMENT.
- 10 (c) Provide for appropriate housing, equipment, and personnel
- 11 as may be necessary to assure the efficient operation of the
- 12 association.
- 13 (d) Pursuant to the plan of operation OF THE ASSOCIATION,
- 14 adopt reasonable rules for the administration of the association,
- 15 enforce those rules, and delegate authority, as the board OF THE
- 16 ASSOCIATION considers necessary, to assure the proper
- 17 administration and operation of the association consistent with the
- 18 plan of operation.
- 19 (e) Contract for goods and services WITH OTHER PERSONS
- 20 RELATING TO ALL OR A PORTION OF THE GOODS AND SERVICES NECESSARY
- 21 FOR THE MANAGEMENT AND OPERATION OF THE ASSOCIATION, including, BUT
- 22 NOT LIMITED TO, independent claims management, actuarial,
- 23 investment, and legal services. , from others within or without
- 24 this state to assure the efficient operation of the association.ALL
- 25 OF THE FOLLOWING APPLY TO A CONTRACT FOR GOODS OR SERVICES BETWEEN
- 26 THE UNINCORPORATED ASSOCIATION AND AN INCORPORATED ASSOCIATION:
- 27 (i) THE TERMS MUST BE FAIR AND REASONABLE.



- 1 (ii) THE CHARGES OR FEES FOR SERVICES PERFORMED MUST BE
- 2 REASONABLE.
- 3 (iii) THE EXPENSES INCURRED AND PAYMENT RECEIVED MUST BE
- 4 ALLOCATED IN CONFORMITY WITH CUSTOMARY ACCOUNTING PRACTICES
- 5 CONSISTENTLY APPLIED.
- 6 (iv) THE BOOKS, ACCOUNTS, AND RECORDS OF EACH ASSOCIATION MUST
- 7 BE MAINTAINED TO CLEARLY AND ACCURATELY DISCLOSE THE PRECISE NATURE
- 8 AND DETAILS OF THE TRANSACTIONS, INCLUDING ACCOUNTING INFORMATION
- 9 AS NECESSARY TO SUPPORT THE REASONABLENESS OF THE CHARGES OR FEES.
- 10 (f) Hear and determine complaints of a company or other AN
- 11 interested party concerning the operation of the association.
- 12 (G) BORROW MONEY TO ACCOMPLISH THE PURPOSES OF THE ASSOCIATION
- 13 OR IMPLEMENT THIS SECTION AT RATES OF INTEREST DETERMINED BY THE
- 14 ASSOCIATION, AND ISSUE NOTES, BONDS, CERTIFICATES, OTHER EVIDENCES
- 15 OF INDEBTEDNESS, OR PLEDGES. INTEREST AND EARNINGS ON NOTES, BONDS,
- 16 CERTIFICATES, OR OTHER OBLIGATIONS OF THE ASSOCIATION ARE EXEMPT
- 17 FROM ANY TAXES IMPOSED BY THIS STATE OR A POLITICAL SUBDIVISION OF
- 18 THIS STATE. AN ASSOCIATION SHALL NOT BORROW MONEY FROM ANOTHER
- 19 ASSOCIATION.
- 20 (H) TAKE ACTION NECESSARY TO FACILITATE AND MAINTAIN THE TAX-
- 21 EXEMPT STATUS OF THE ASSOCIATION AND ITS INCOME AND OPERATION, AND
- 22 TO FACILITATE THE TAX-EXEMPT STATUS OF ANY BONDS OR OTHER
- 23 INDEBTEDNESS ISSUED BY OR ON BEHALF OF THE ASSOCIATION.
- 24 (I) INVEST AND REINVEST MONEY OF THE ASSOCIATION.
- 25 (J) TAKE, HOLD, AND CONVEY INTERESTS IN PROPERTY.
- 26 (K) ACCEPT GIFTS, GRANTS, LOANS, OR OTHER AID FROM ANOTHER
- 27 PERSON.



- 1 (1) (g) Perform other acts not specifically enumerated in this
- 2 section that are necessary or proper to accomplish the purposes of
- 3 the association OR TO IMPLEMENT THIS SECTION and that are not
- 4 inconsistent with this section or the plan of operation OF THE
- 5 ASSOCIATION.
- 6 (17) (9)—A board of directors OF THE UNINCORPORATED
- 7 ASSOCIATION is created, hereinafter referred to as the board, which
- 8 shall—TO be responsible for the operation of the UNINCORPORATED
- 9 association consistent with the plan of operation OF THE
- 10 UNINCORPORATED ASSOCIATION and this section.
- 11 (18) (10) THE BOARD OF THE UNINCORPORATED ASSOCIATION OR AN
- 12 INCORPORATED ASSOCIATION SHALL OPERATE THE ASSOCIATION ACCORDING TO
- 13 THE PLAN OF OPERATION OF THE ASSOCIATION AND THIS SECTION. The plan
- 14 of operation OF AN ASSOCIATION shall provide for all of the
- 15 following:
- (a) The establishment of necessary facilities.
- 17 (b) The management and operation of the association.
- 18 (c) Procedures—FOR THE UNINCORPORATED ASSOCIATION, PROVISIONS
- 19 to be utilized USED in charging premiums, including adjustments
- 20 from excess or deficient premiums from prior periods. FOR AN
- 21 INCORPORATED ASSOCIATION, PROCEDURES FOR CHARGING ASSESSMENTS,
- 22 INCLUDING ADJUSTMENTS FROM EXCESS OR DEFICIENT ASSESSMENTS FROM
- 23 PRIOR PERIODS.
- 24 (d) Procedures FOR THE UNINCORPORATED ASSOCIATION, PROCEDURES
- 25 governing the actual payment of premiums to the UNINCORPORATED
- 26 association. FOR AN INCORPORATED ASSOCIATION, PROCEDURES GOVERNING
- 27 THE PAYMENT OF ASSESSMENTS TO THE INCORPORATED ASSOCIATION.



- 1 (e) Reimbursement BY THE ASSOCIATION of each member of
- 2 INDIVIDUAL SERVING ON the board by the OF THE association for
- 3 actual and necessary expenses incurred on association business.
- 4 (f) The investment policy of the association.
- 5 (g) Any other matters required by or necessary to effectively
- 6 implement this section.
- 7 (19) (11) Each THE board shall OF THE UNINCORPORATED
- 8 ASSOCIATION MUST include INDIVIDUALS FROM members OF THE
- 9 UNINCORPORATED ASSOCIATION that would contribute a total of not
- 10 less than 40% of the total premium calculated pursuant to UNDER
- 11 subsection (7)(d). (14). Each director shall be OF THE
- 12 UNINCORPORATED ASSOCIATION IS entitled to 1 vote. The initial term
- 13 of office of a director shall be OF THE UNINCORPORATED ASSOCIATION
- **14 IS** 2 years.
- 15 (20) (12) As part of the plan of operation OF THE
- 16 UNINCORPORATED ASSOCIATION, the board OF THE UNINCORPORATED
- 17 ASSOCIATION shall adopt rules providing for the composition and
- 18 term of successor boards to the initial board, consistent with the
- 19 membership composition requirements in subsections (11) (19) and
- 20 (13). (21). Terms of the directors shall MUST be staggered so that
- 21 the terms of all the directors do not expire at the same time and
- 22 so that a director does not serve—IS NOT APPOINTED FOR a term of
- 23 more than 4 years.
- 24 (21) (13)—The board shall—OF THE UNINCORPORATED ASSOCIATION
- 25 MUST consist of 5 directors 7—and the commissioner shall be
- 26 DIRECTOR OF THE DEPARTMENT, WHO IS an ex officio member of the
- 27 board without vote.



- 1 (22) (14) Each director shall be appointed by the commissioner
- 2 and the director of the department shall appoint the directors of
- 3 THE UNINCORPORATED ASSOCIATION. A DIRECTOR OF THE UNINCORPORATED
- 4 ASSOCIATION shall serve until that member's DIRECTOR'S successor is
- 5 selected and qualified. The DIRECTORS OF THE UNINCORPORATED
- 6 ASSOCIATION SHALL ELECT FROM THE DIRECTORS A chairperson of the
- 7 board. shall be elected by the board. A THE DIRECTOR OF THE
- 8 DEPARTMENT SHALL FILL A vacancy on the board shall be filled by the
- 9 commissioner OF THE UNINCORPORATED ASSOCIATION consistent with the
- 10 plan of operation.
- 11 (23) (15) After the board is appointed, the THE board OF THE
- 12 UNINCORPORATED ASSOCIATION shall meet as often as the chairperson,
- 13 the commissioner, DIRECTOR OF THE DEPARTMENT, or the plan of
- 14 operation shall require, OF THE UNINCORPORATED ASSOCIATION
- 15 REQUIRES, or at the request of any 3 members DIRECTORS of the
- 16 board. UNINCORPORATED ASSOCIATION. The chairperson shall retain the
- 17 right to MAY vote on all issues. Four members of the board
- 18 DIRECTORS OF THE UNINCORPORATED ASSOCIATION constitute a quorum.
- 19 (24) THE BOARD OF DIRECTORS OF AN INCORPORATED ASSOCIATION
- 20 SHALL OPERATE THE INCORPORATED ASSOCIATION IN ACCORDANCE WITH THE
- 21 PLAN OF OPERATION OF THE INCORPORATED ASSOCIATION AND THIS SECTION.
- 22 ALL OF THE FOLLOWING APPLY TO THE FORMATION AND OPERATION OF THE
- 23 BOARD OF AN INCORPORATED ASSOCIATION:
- 24 (A) THE BOARD MUST CONSIST OF 7 DIRECTORS APPOINTED BY THE
- 25 GOVERNOR WITH THE ADVICE AND CONSENT OF THE SENATE. THE GOVERNOR
- 26 SHALL APPOINT THE INITIAL DIRECTORS WITHIN 45 DAYS AFTER THE
- 27 INCORPORATED ASSOCIATION IS INCORPORATED. AN EMPLOYEE OR OFFICER OF



- 1 AN INSURER IS NOT ELIGIBLE TO SERVE AS A DIRECTOR. THE GOVERNOR
- 2 SHALL APPOINT DIRECTORS AS FOLLOWS:
- 3 (i) TWO OF THE DIRECTORS MUST REPRESENT INSURERS THAT PROVIDE
- 4 COVERAGES REQUIRED UNDER SECTION 3101(1).
- 5 (ii) ONE OF THE DIRECTORS MUST REPRESENT HEALTH FACILITIES OR
- 6 AGENCIES, AS THAT TERM IS DEFINED IN SECTION 20106 OF THE PUBLIC
- 7 HEALTH CODE, 1978 PA 368, MCL 333.20106.
- 8 (iii) ONE OF THE DIRECTORS MUST REPRESENT INDIVIDUALS LICENSED
- 9 UNDER ARTICLE 15 OF THE PUBLIC HEALTH CODE, 1978 PA 368, MCL
- 10 333.16101 TO 333.18838.
- 11 (iv) THREE OF THE DIRECTORS MUST REPRESENT INDIVIDUALS WHO ARE
- 12 INSURED UNDER POLICIES THAT PROVIDE THE SECURITY REQUIRED UNDER
- 13 SECTION 3101(1). OF THESE 3 INDIVIDUALS:
- 14 (A) ONE MUST BE AN INDIVIDUAL RECOMMENDED BY THE SENATE
- 15 MAJORITY LEADER.
- 16 (B) ONE MUST BE AN INDIVIDUAL RECOMMENDED BY THE SPEAKER OF
- 17 THE HOUSE OF REPRESENTATIVES.
- 18 (B) OF THE DIRECTORS INITIALLY APPOINTED, 2 SHALL BE APPOINTED
- 19 FOR A TERM OF 4 YEARS, 2 SHALL BE APPOINTED FOR A TERM OF 3 YEARS,
- 20 2 SHALL BE APPOINTED FOR A TERM OF 2 YEARS, AND 1 SHALL BE
- 21 APPOINTED FOR A TERM OF 1 YEAR. AFTER THE INITIAL APPOINTMENTS, A
- 22 DIRECTOR SHALL BE APPOINTED FOR A TERM OF 4 YEARS. IF THERE IS A
- 23 VACANCY ON THE BOARD, THE GOVERNOR SHALL FILL THE VACANCY IN THE
- 24 SAME MANNER AS THE ORIGINAL APPOINTMENT FOR THE BALANCE OF THE
- 25 UNEXPIRED TERM. WITHIN 60 DAYS AFTER THE INITIAL DIRECTORS ARE
- 26 APPOINTED, THE DIRECTOR OF THE DEPARTMENT SHALL CALL THE FIRST
- 27 MEETING OF THE BOARD. AT THE FIRST MEETING, THE BOARD SHALL ELECT A

- 1 CHAIRPERSON FROM THE DIRECTORS OF THE INCORPORATED ASSOCIATION.
- 2 FOUR DIRECTORS OF THE INCORPORATED ASSOCIATION CONSTITUTE A QUORUM
- 3 FOR THE TRANSACTION OF BUSINESS AT A MEETING. AN AFFIRMATIVE VOTE
- 4 OF 4 DIRECTORS OF THE INCORPORATED ASSOCIATION IS NECESSARY FOR
- 5 OFFICIAL ACTION OF THE BOARD.
- 6 (C) THE BOARD SHALL CONDUCT ITS BUSINESS AT A MEETING THAT IS
- 7 HELD IN THIS STATE, IS OPEN TO THE PUBLIC, AND IS HELD IN A PLACE
- 8 THAT IS AVAILABLE TO THE GENERAL PUBLIC. HOWEVER, THE BOARD MAY
- 9 ESTABLISH REASONABLE RULES AND REGULATIONS TO MINIMIZE DISRUPTION
- 10 OF A MEETING. AT LEAST 10 DAYS BUT NOT MORE THAN 60 DAYS BEFORE A
- 11 MEETING, THE BOARD SHALL PROVIDE PUBLIC NOTICE OF THE MEETING AT
- 12 ITS PRINCIPAL OFFICE AND ON AN INTERNET WEBSITE ACCESSIBLE BY THE
- 13 PUBLIC. THE BOARD SHALL INCLUDE IN THE PUBLIC NOTICE OF THE MEETING
- 14 THE ADDRESS WHERE MINUTES OF THE BOARD MAY BE INSPECTED BY THE
- 15 PUBLIC. THE BOARD MAY MEET IN A CLOSED SESSION FOR ANY OF THE
- 16 FOLLOWING PURPOSES:
- 17 (i) TO CONSIDER THE HIRING, DISMISSAL, SUSPENSION,
- 18 DISCIPLINING, OR EVALUATION OF OFFICERS OR EMPLOYEES OF THE
- 19 INCORPORATED ASSOCIATION.
- 20 (ii) TO CONSULT WITH ITS ATTORNEY.
- 21 (iii) TO COMPLY WITH STATE OR FEDERAL LAW, RULES, OR REGULATIONS
- 22 REGARDING PRIVACY OR CONFIDENTIALITY.
- 23 (D) THE BOARD SHALL DISPLAY INFORMATION CONCERNING THE
- 24 INCORPORATED ASSOCIATION'S OPERATIONS AND ACTIVITIES ON AN INTERNET
- 25 WEBSITE ACCESSIBLE BY THE PUBLIC.
- 26 (E) THE BOARD SHALL KEEP MINUTES OF EACH BOARD MEETING. THE
- 27 MINUTES SHALL BE OPEN TO PUBLIC INSPECTION, AND THE BOARD SHALL



- 1 MAKE THE MINUTES AVAILABLE AT THE ADDRESS DESIGNATED ON THE PUBLIC
- 2 NOTICE OF ITS MEETINGS. THE BOARD SHALL MAKE COPIES OF THE MINUTES
- 3 AVAILABLE TO THE PUBLIC AT THE REASONABLE ESTIMATED COST FOR
- 4 PRINTING AND COPYING. THE BOARD SHALL INCLUDE ALL OF THE FOLLOWING
- 5 IN THE MINUTES:
- 6 (i) THE DATE, TIME, AND PLACE OF THE MEETING.
- 7 (ii) DIRECTORS WHO ARE PRESENT AND ABSENT.
- 8 (iii) BOARD DECISIONS MADE AT A MEETING OPEN TO THE PUBLIC.
- 9 (iv) ALL ROLL CALL VOTES TAKEN AT THE MEETING.
- 10 (F) A DIRECTOR IS NOT LIABLE FOR ANY LAWFUL ACTION TAKEN BY
- 11 THE DIRECTOR IN THE PERFORMANCE OF DUTIES UNDER THIS SECTION.
- 12 (25) (16)—An annual report of the operations of the
- 13 UNINCORPORATED association in a form and detail as may be
- 14 determined by the board OF THE UNINCORPORATED ASSOCIATION shall be
- 15 furnished to each member OF THE UNINCORPORATED ASSOCIATION.
- 16 (26) AN INCORPORATED ASSOCIATION SHALL HAVE ITS FINANCES
- 17 AUDITED ANNUALLY BY AN INDEPENDENT PUBLIC ACCOUNTANT. THE
- 18 INCORPORATED ASSOCIATION SHALL MAKE THE AUDIT AVAILABLE TO THE
- 19 PUBLIC AND POST THE AUDIT ON A PUBLICLY ACCESSIBLE INTERNET WEBSITE
- 20 MAINTAINED BY THE INCORPORATED ASSOCIATION. AN INCORPORATED
- 21 ASSOCIATION SHALL MAKE AN ANNUAL REPORT OF THE OPERATIONS OF THE
- 22 INCORPORATED ASSOCIATION AVAILABLE TO THE PUBLIC AND POST THE
- 23 REPORT ON A PUBLICLY ACCESSIBLE INTERNET WEBSITE MAINTAINED BY THE
- 24 INCORPORATED ASSOCIATION. BY JUNE 30 OF EACH YEAR AFTER THE YEAR IN
- 25 WHICH THE DIRECTOR OF THE DEPARTMENT ISSUES A CERTIFICATE OF
- 26 AUTHORITY UNDER SUBSECTION (5) TO THE INCORPORATED ASSOCIATION, THE
- 27 INCORPORATED ASSOCIATION SHALL PREPARE A STATEMENT OF THE FINANCES



- 1 OF THE INCORPORATED ASSOCIATION FOR THE PRECEDING CALENDAR YEAR TO
- 2 ACCOMPANY THE ANNUAL REPORT. THE FINANCIAL STATEMENT SHALL CONTAIN
- 3 ALL OF THE FOLLOWING:
- 4 (A) THE NUMBER OF CLAIMS OPENED AND CLOSED IN THE YEAR, THE
- 5 AMOUNT EXPENDED ON THE CLAIMS, AND THE ANTICIPATED FUTURE COSTS OF
- 6 THE CLAIMS, WITH THE ASSUMPTIONS, METHODOLOGY, AND DATA USED TO
- 7 MAKE THE FUTURE PROJECTIONS.
- 8 (B) THE TOTAL NUMBER OF OPEN CLAIMS AND THEIR ANTICIPATED
- 9 FUTURE COSTS, THE ASSUMPTIONS, METHODOLOGY, AND DATA USED TO MAKE
- 10 THE FUTURE PROJECTIONS, A CATEGORICAL SUMMARY OF CLAIMS PAID, BOTH
- 11 OPEN AND CLOSED, AND THE EXPECTED FUTURE COSTS OF CLAIMS GROUPED BY
- 12 NUMERIC RANGE.
- 13 (C) THE NUMBER OF NEW CLAIMS PROJECTED FOR THE UPCOMING YEAR,
- 14 IF ANY, THEIR ANTICIPATED FUTURE COSTS, AND THE ASSUMPTIONS,
- 15 METHODOLOGY, AND DATA USED TO MAKE THE FUTURE PROJECTIONS.
- 16 (D) THE CURRENT RATIO OF CLAIMS OPENED TO CLAIMS CLOSED.
- 17 (E) THE AVERAGE LENGTH OF A CLAIM.
- 18 (F) A STATEMENT OF THE CURRENT FINANCIAL CONDITION OF THE
- 19 INCORPORATED ASSOCIATION AND THE REASONS FOR ANY DEFICIT OR SURPLUS
- 20 IN COLLECTED ASSESSMENTS COMPARED TO LOSSES.
- 21 (G) A STATEMENT OF THE ASSUMPTIONS, METHODOLOGY, AND DATA USED
- 22 TO MAKE REVENUE PROJECTIONS.
- 23 (H) A STATEMENT OF THE ASSUMPTIONS, METHODOLOGY, AND DATA USED
- 24 TO DETERMINE THE INCORPORATED ASSOCIATION'S ANNUAL ASSESSMENTS.
- 25 (I) A LIST OF ASSETS OF THE INCORPORATED ASSOCIATION LISTED BY
- 26 CATEGORY OR TYPE OF ASSET, SUCH AS, FOR EXAMPLE, STOCKS, BONDS, OR
- 27 MUTUAL FUNDS, AND THE EXPECTED RETURN ON EACH ASSET.



- 1 (J) THE TOTAL AMOUNT OF THE INCORPORATED ASSOCIATION'S
- 2 DISCOUNTED AND UNDISCOUNTED LIABILITIES AND A DESCRIPTION AND
- 3 EXPLANATION OF THE LIABILITIES, INCLUDING AN EXPLANATION OF THE
- 4 ASSOCIATION'S DEFINITION OF THE TERMS "DISCOUNTED" AND
- 5 "UNDISCOUNTED".
- 6 (K) A SUMMARY OF SERVICES FOR WHICH CLAIMS WERE PAID AND THE
- 7 AVERAGE COST FOR THE SERVICES.
- 8 (1) MEASURES TAKEN BY THE INCORPORATED ASSOCIATION, IF ANY, TO
- 9 CONTAIN COSTS.
- 10 (M) MEASURES TAKEN BY THE INCORPORATED ASSOCIATION, IF ANY, TO
- 11 REDUCE ANY DEFICIT REPORTED UNDER SUBDIVISION (F).
- 12 (27) (17) Not more than 60 days after the initial
- 13 organizational meeting of the board, the board shall submit to the
- 14 commissioner for approval a proposed AN ASSOCIATION SHALL OPERATE
- 15 UNDER A plan of operation OF THE ASSOCIATION THAT IS APPROVED BY
- 16 THE DIRECTOR OF THE DEPARTMENT, THAT IS consistent with the
- 17 objectives and provisions of this section, which shall provide AND
- 18 THAT PROVIDES for the economical, fair, and nondiscriminatory
- 19 administration of the association and, FOR THE UNINCORPORATED
- 20 ASSOCIATION, for the prompt and efficient provision of indemnity -
- 21 If a plan is not submitted within this 60-day period, then the
- 22 commissioner, TO MEMBERS OF THE UNINCORPORATED ASSOCIATION. IF AN
- 23 ASSOCIATION DOES NOT HAVE AN APPROVED PLAN OF OPERATION, THE
- 24 DIRECTOR OF THE DEPARTMENT, after consultation with the board OF
- 25 THE ASSOCIATION, shall formulate and place into effect a plan
- 26 consistent with this section.
- 27 (28) (18) The A plan of operation , unless approved sooner in



- 1 writing, shall be OF AN ASSOCIATION OR AN AMENDMENT TO A PLAN OF
- 2 OPERATION OF AN ASSOCIATION THAT HAS BEEN SUBMITTED TO THE DIRECTOR
- 3 OF THE DEPARTMENT FOR APPROVAL IS considered to meet the
- 4 requirements of this section if it is not APPROVED OR disapproved
- 5 by written order of the commissioner DIRECTOR OF THE DEPARTMENT
- 6 within 30 days after the date of its submission. Before disapproval
- 7 of all or any part of the proposed plan of operation, the
- 8 commissioner DIRECTOR OF THE DEPARTMENT shall notify the board
- 9 ASSOCIATION in what respect the plan of operation fails to meet the
- 10 requirements and objectives of this section. If the board
- 11 ASSOCIATION fails to submit a revised plan of operation that meets
- 12 the requirements and objectives of this section within the 30-day
- 13 period, the commissioner DIRECTOR OF THE DEPARTMENT shall enter an
- 14 order accordingly and shall immediately formulate and place into
- 15 effect a plan OF OPERATION FOR THE ASSOCIATION consistent with the
- 16 requirements and objectives of this section.
- 17 (29) (19) The FOR THE UNINCORPORATED ASSOCIATION, A proposed
- 18 plan of operation or amendments to the plan of operation OF THE
- 19 ASSOCIATION are subject to majority approval by the board OF THE
- 20 UNINCORPORATED ASSOCIATION, ratified by a majority of the
- 21 membership having MEMBERS OF THE UNINCORPORATED ASSOCIATION THAT
- 22 HAVE a vote, with voting rights being apportioned according to the
- 23 premiums charged in subsection $\frac{(7)(d)}{(14)(D)}$, and are subject to
- 24 approval by the commissioner.DIRECTOR OF THE DEPARTMENT AS PROVIDED
- 25 IN THIS SECTION. FOR AN INCORPORATED ASSOCIATION, A PROPOSED PLAN
- 26 OF OPERATION OR AMENDMENTS TO THE PLAN OF OPERATION OF THE
- 27 ASSOCIATION ARE SUBJECT TO APPROVAL BY THE BOARD OF THE



- 1 INCORPORATED ASSOCIATION AND ARE SUBJECT TO APPROVAL BY THE
- 2 DIRECTOR OF THE DEPARTMENT AS PROVIDED IN THIS SECTION. THIS STATE
- 3 IS NOT LIABLE FOR AN OBLIGATION OF AN ASSOCIATION, AND ANY DEBT OF
- 4 AN ASSOCIATION IS NOT A DEBT OF THIS STATE. THE CREDIT OF THIS
- 5 STATE MAY NOT BE LOANED TO AN ASSOCIATION.
- 6 (30) (20) Upon FOR THE UNINCORPORATED ASSOCIATION, ON approval
- 7 by the commissioner DIRECTOR OF THE DEPARTMENT and ratification by
- 8 the members OF THE UNINCORPORATED ASSOCIATION of the plan OF
- 9 OPERATION submitted, or upon—ON the promulgation of a plan by the
- 10 commissioner, DIRECTOR OF THE DEPARTMENT, each insurer authorized
- 11 to write insurance providing the security required by section
- 12 3101(1) in this state, as provided in this section, is bound by and
- 13 shall formally subscribe to and participate in the plan approved as
- 14 a condition of maintaining its authority to transact insurance in
- 15 this state.
- 16 (31) FOR A POLICY ISSUED OR RENEWED AFTER THE FIRST JUNE 30
- 17 AFTER THE DIRECTOR OF THE DEPARTMENT ISSUES A CERTIFICATE OF
- 18 AUTHORITY UNDER SUBSECTION (5), AN ANNUAL CATASTROPHIC CLAIMS
- 19 ASSESSMENT IS IMPOSED ON THE OWNER OR REGISTRANT OF A MOTOR VEHICLE
- 20 THAT MAINTAINS THE SECURITY REQUIRED UNDER SECTION 3101(1). THE
- 21 OWNER OR REGISTRANT, NOT THE INSURER, IS LIABLE FOR THE PAYMENT OF
- 22 THE ASSESSMENT. THE ASSESSMENT IMPOSED UNDER THIS SUBSECTION IS A
- 23 CHARGE IMPOSED BY AN INCORPORATED ASSOCIATION AND IS NOT PART OF AN
- 24 INSURER'S PREMIUM. UNTIL THE SECOND JUNE 30 AFTER A CERTIFICATE OF
- 25 AUTHORITY IS ISSUED UNDER SUBSECTION (5), THE ANNUAL AMOUNT OF THE
- 26 CATASTROPHIC CLAIMS ASSESSMENT IS THE INITIAL ASSESSMENT SET BY THE
- 27 DIRECTOR OF THE DEPARTMENT UNDER SUBSECTION (5). AFTER THE SECOND



- 1 JUNE 30 AFTER A CERTIFICATE OF AUTHORITY IS ISSUED UNDER SUBSECTION
- 2 (5), THE ANNUAL AMOUNT OF THE CATASTROPHIC CLAIMS ASSESSMENT SHALL
- 3 BE EQUAL TO THE PER-MOTOR-VEHICLE ASSESSMENT DETERMINED BY THE
- 4 INCORPORATED ASSOCIATION UNDER SUBSECTION (15) (D). THE OWNER OR
- 5 REGISTRANT SHALL PAY THE PER-MOTOR-VEHICLE ASSESSMENT FOR EACH
- 6 MOTOR VEHICLE AT THE TIME OF PAYMENT FOR A MOTOR VEHICLE POLICY
- 7 ISSUED BY AN INSURER AUTHORIZED TO TRANSACT BUSINESS IN THIS STATE
- 8 THAT AFFORDS INSURANCE FOR THE PAYMENT OF BENEFITS REQUIRED UNDER
- 9 SECTION 3101(1). THE INSURER SHALL COLLECT THE CATASTROPHIC CLAIMS
- 10 ASSESSMENT ON BEHALF OF THE INCORPORATED ASSOCIATION. THE INSURER
- 11 SHALL INCLUDE THE CATASTROPHIC CLAIMS ASSESSMENT AS A SEPARATE
- 12 IDENTIFIED CHARGE ON ITS POLICY INVOICE. THE INSURER SHALL COLLECT
- 13 THE ASSESSMENT WITH THE INSURER'S USUAL CYCLE FOR COLLECTION OF
- 14 INSURANCE PREMIUMS AND SHALL PROMPTLY TRANSMIT ALL ASSESSMENTS
- 15 COLLECTED TO THE INCORPORATED ASSOCIATION ON FORMS AND IN A MANNER
- 16 PRESCRIBED BY THE INCORPORATED ASSOCIATION AND SHALL HOLD
- 17 ASSESSMENTS COLLECTED IN TRUST FOR THE INCORPORATED ASSOCIATION
- 18 UNTIL REMITTED TO THE ASSOCIATION. AN INSURER SHALL TREAT THE
- 19 FAILURE TO PAY AN ASSESSMENT UNDER THIS SUBSECTION IN THE SAME
- 20 MANNER AS THE FAILURE TO PAY AN INSURANCE PREMIUM. AN INSURER THAT
- 21 RECEIVES FROM AN INCORPORATED ASSOCIATION A REFUND OF A PORTION OF
- 22 AN ASSESSMENT PAID BECAUSE OF THE CANCELLATION OF THE POLICY SHALL
- 23 REFUND THAT PORTION TO THE OWNER OR REGISTRANT.
- 24 (32) UNTIL DECEMBER 31, 2020, AN ANNUAL ASSESSMENT EQUAL TO
- 25 \$25.00 FOR EACH MOTOR VEHICLE SUBJECT TO A CATASTROPHIC CLAIMS
- 26 ASSESSMENT IMPOSED BY AN INCORPORATED ASSOCIATION IS LEVIED ON AND
- 27 SHALL BE COLLECTED FROM AN INCORPORATED ASSOCIATION WITH AN ACTIVE



- 1 CERTIFICATE OF AUTHORITY. THE ASSESSMENT LEVIED UNDER THIS
- 2 SUBSECTION IS PAYABLE TO AND SHALL BE COLLECTED BY THE DEPARTMENT
- 3 OF TREASURY IN THE SAME MANNER AS AN ASSESSMENT UNDER THE HEALTH
- 4 INSURANCE CLAIMS ASSESSMENT ACT, 2011 PA 142, MCL 550.1731 TO
- 5 500.1741. MONEY RECEIVED AND COLLECTED BY THE DEPARTMENT OF
- 6 TREASURY UNDER THIS SUBSECTION SHALL BE DEPOSITED IN THE HEALTH
- 7 INSURANCE CLAIMS ASSESSMENT FUND CREATED IN SECTION 7 OF THE HEALTH
- 8 INSURANCE CLAIMS ASSESSMENT ACT, 2011 PA 142, MCL 550.1737.
- 9 (33) (21) The AN association is subject to all the reporting,
- 10 loss reserve, and investment requirements of the commissioner
- 11 DIRECTOR OF THE DEPARTMENT to the same extent as would a member of
- 12 the association. IS AN INSURER.
- 13 (34) (22)—Premiums charged members by the UNINCORPORATED
- 14 association shall be recognized in the rate-making procedures for
- 15 insurance rates in the same manner that expenses and premium taxes
- 16 are recognized.
- 17 (35) (23) The commissioner DIRECTOR OF THE DEPARTMENT or an
- 18 authorized representative of the commissioner DIRECTOR OF THE
- 19 DEPARTMENT may visit the AN association at any time and examine any
- 20 and all the association's affairs AND RECORDS RELATING TO THE
- 21 BUSINESS OF THE ASSOCIATION. AN ASSOCIATION SHALL PAY EXPENSES
- 22 INCURRED BY THE DIRECTOR OF THE DEPARTMENT FOR THE EXAMINATION OF
- 23 THE ASSOCIATION. AN ASSOCIATION IS SUBJECT TO FEES IMPOSED UNDER
- 24 SECTION 224(4) TO (11) IN THE SAME MANNER AS ANY OTHER TYPE OF
- 25 ENTITY UNDER THIS ACT.
- 26 (36) (24) The UNINCORPORATED association does not have
- 27 liability—IS NOT LIABLE for losses occurring before July 1, 1978.



- 1 AN UNINCORPORATED ASSOCIATION IS NOT LIABLE FOR LOSSES OCCURRING
- 2 UNDER POLICIES ISSUED OR RENEWED AFTER THE FIRST JUNE 30 AFTER THE
- 3 DIRECTOR OF THE DEPARTMENT ISSUES A CERTIFICATE OF AUTHORITY UNDER
- 4 SUBSECTION (5).
- 5 (37) AN INCORPORATED ASSOCIATION SHALL COMPLY WITH THE FREEDOM
- 6 OF INFORMATION ACT, 1976 PA 442, MCL 15.231 TO 15.246, AS IF THE
- 7 INCORPORATED ASSOCIATION WERE A PUBLIC BODY. A RECORD OR PORTION OF
- 8 A RECORD, MATERIAL, DATA, OR OTHER INFORMATION RECEIVED, PREPARED,
- 9 USED, OR RETAINED BY THE INCORPORATED ASSOCIATION IN CONNECTION
- 10 WITH THE INVESTMENT OF ASSETS OR OF AN INSURER THAT RELATES TO
- 11 FINANCIAL OR PROPRIETARY INFORMATION AND IS CONSIDERED BY THE
- 12 PERSON OR INSURER PROVIDING THE INCORPORATED ASSOCIATION WITH THE
- 13 RECORD, MATERIAL, DATA, OR INFORMATION AS CONFIDENTIAL AND
- 14 ACKNOWLEDGED BY THE INCORPORATED ASSOCIATION AS CONFIDENTIAL IS NOT
- 15 SUBJECT TO DISCLOSURE BY THE INCORPORATED ASSOCIATION. AS USED IN
- 16 THIS SUBSECTION:
- 17 (A) "FINANCIAL OR PROPRIETARY INFORMATION" MEANS INFORMATION
- 18 THAT HAS NOT BEEN PUBLICLY DISSEMINATED OR THAT IS UNAVAILABLE FROM
- 19 OTHER SOURCES, THE RELEASE OF WHICH MIGHT CAUSE THE PERSON
- 20 PROVIDING THE INFORMATION TO THE INCORPORATED ASSOCIATION
- 21 SIGNIFICANT COMPETITIVE HARM. FINANCIAL OR PROPRIETARY INFORMATION
- 22 INCLUDES, BUT IS NOT LIMITED TO, FINANCIAL PERFORMANCE DATA AND
- 23 PROJECTIONS, FINANCIAL STATEMENTS, AND PRODUCT AND MARKET DATA.
- 24 (B) "PUBLIC BODY" MEANS THAT TERM AS DEFINED IN SECTION 2 OF
- 25 THE FREEDOM OF INFORMATION ACT, 1976 PA 442, MCL 15.232.
- 26 (38) THE UNINCORPORATED ASSOCIATION SHALL CONTINUE IN
- 27 EXISTENCE UNTIL ALL LIABILITIES DUE TO LOSS OCCURRENCES FOR WHICH



- 1 THE UNINCORPORATED ASSOCIATION HAS LIABILITY UNDER THIS SECTION ARE
- 2 PAID. ON PAYMENT OF THE UNINCORPORATED ASSOCIATION'S FINAL
- 3 LIABILITY UNDER THIS SECTION, THE UNINCORPORATED ASSOCIATION SHALL
- 4 NOTIFY THE DIRECTOR OF THE DEPARTMENT, WIND UP THE AFFAIRS OF THE
- 5 UNINCORPORATED ASSOCIATION, TRANSMIT ANY REMAINING MONEY OF THE
- 6 UNINCORPORATED ASSOCIATION TO AN INCORPORATED ASSOCIATION, AND
- 7 DISSOLVE THE UNINCORPORATED ASSOCIATION.
- 8 (39) THE LEGISLATURE FINDS THAT THERE IS A COMPELLING STATE
- 9 INTEREST IN PROTECTING PUBLIC HEALTH AND MAINTAINING A VIABLE,
- 10 ORDERLY, AND COST-EFFECTIVE PRIVATE SECTOR MARKET FOR AUTOMOBILE
- 11 INSURANCE IN THIS STATE, AND ALSO FINDS THAT AN ASSOCIATION CREATED
- 12 AND POWERS CONFERRED ON AN ASSOCIATION BY THIS SECTION CONSTITUTE A
- 13 NECESSARY PROGRAM AND SERVE A NECESSARY PUBLIC PURPOSE. THE
- 14 LEGISLATURE DETERMINES THAT IT IS ESSENTIAL FOR THE PUBLIC PURPOSES
- 15 OF THIS SECTION THAT REVENUES RECEIVED BY AN ASSOCIATION BE EXEMPT
- 16 FROM FEDERAL TAXATION, AND IT IS THE INTENT OF THE LEGISLATURE THAT
- 17 AN ASSOCIATION AND ACTIVITIES OF AN ASSOCIATION AUTHORIZED UNDER
- 18 THIS SECTION ARE FOR THE PURPOSE OF PROTECTING AND ADVANCING THE
- 19 PUBLIC INTEREST IN MAINTAINING A VIABLE, ORDERLY, AND COST-
- 20 EFFECTIVE PRIVATE SECTOR MARKET FOR AUTOMOBILE INSURANCE IN THIS
- 21 STATE AND PROTECTING PUBLIC HEALTH. IT IS THE INTENT OF THE
- 22 LEGISLATURE THAT AN ASSOCIATION IS AUTHORIZED UNDER THIS SECTION TO
- 23 BE ESTABLISHED AND OPERATE IN A MANNER ALLOWING AN ASSOCIATION TO
- 24 OUALIFY AS AN ENTITY RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS
- 25 AUTHORIZED TO ISSUE TAX-EXEMPT BONDS. THIS SECTION, BEING NECESSARY
- 26 FOR AND TO SECURE THE PUBLIC HEALTH, SAFETY, CONVENIENCE, AND
- 27 WELFARE OF THE CITIZENS OF THIS STATE, SHALL BE LIBERALLY CONSTRUED



- 1 TO EFFECT ITS PUBLIC PURPOSES.
- 2 (40) FOR PURPOSES OF THIS SECTION, THE DATE THAT A POLICY IS
- 3 ISSUED OR RENEWED IS THE EFFECTIVE DATE OF COVERAGE UNDER THE
- 4 POLICY.
- 5 (41) $\frac{(25)}{}$ As used in this section:
- 6 (a) "Consumer price index" means the percentage of change in
- 7 the consumer price index for all urban consumers in the United
- 8 States city average for all items for the 24 months prior to
- 9 October 1 of the year prior to the July 1 effective date of the
- 10 biennial adjustment under subsection (2)(k) as reported by the
- 11 United States department of labor, bureau of labor statistics, and
- 12 as certified by the commissioner.
- 13 (A) "ASSOCIATION" MEANS THE UNINCORPORATED ASSOCIATION CREATED
- 14 UNDER SUBSECTION (1) OR AN INCORPORATED ASSOCIATION FORMED UNDER
- 15 SUBSECTIONS (2) TO (7).
- 16 (B) "BOARD" MEANS THE BOARD OF DIRECTORS OF THE UNINCORPORATED
- 17 ASSOCIATION OR OF AN INCORPORATED ASSOCIATION.
- 18 (C) "INCORPORATED ASSOCIATION" MEANS AN INCORPORATED
- 19 ASSOCIATION FORMED AS A NONPROFIT ASSOCIATION UNDER SUBSECTIONS (2)
- 20 TO (7).
- 21 (D) (b)—"Motor vehicle accident policy" means a policy
- 22 providing the coverages required under section 3101(1).
- **23 (E)** $\frac{\text{(c)}}{\text{"Ultimate loss" means the actual loss amounts that <math>\alpha$
- 24 member AN INSURER is obligated to pay and that are paid or payable
- 25 by the member, INSURER, and do DOES not include claim expenses. An
- 26 ultimate loss is incurred by the AN association on the date that
- 27 the loss occurs.



- 1 (H) "UNINCORPORATED ASSOCIATION" MEANS THE UNINCORPORATED
- 2 NONPROFIT ASSOCIATION CREATED UNDER SUBSECTION (1) AND INCLUDES THE
- 3 UNINCORPORATED NONPROFIT ASSOCIATION WHEN IT IS KNOWN AS THE
- 4 CATASTROPHIC CLAIMS ASSOCIATION AND THE UNINCORPORATED NONPROFIT
- 5 ASSOCIATION WHEN IT IS KNOWN AS THE MICHIGAN LEGACY CLAIMS
- 6 ASSOCIATION.
- 7 Sec. 3107. (1) Except as **OTHERWISE** provided in subsection (2),
- 8 THIS SECTION, personal protection insurance benefits are payable
- 9 for the following:
- 10 (a) Allewable FOR LOSS OCCURRENCES UNDER MOTOR VEHICLE
- 11 ACCIDENT POLICIES ISSUED OR RENEWED BEFORE JANUARY 1, 2015,
- 12 SUBJECT, IF APPLICABLE, TO CHAPTER 21B, ALLOWABLE expenses
- 13 consisting of all reasonable charges incurred for reasonably
- 14 necessary products, services, and accommodations for an injured
- 15 person's care, recovery, or rehabilitation. Allowable expenses
- 16 within personal protection insurance coverage shall not include
- 17 PAYMENT TO PROVIDERS FOR THOSE PRODUCTS, SERVICES, AND
- 18 ACCOMMODATIONS ARE SUBJECT TO THE LIMITS IN SECTION 3107C AND THE
- 19 LIMITS ON CHARGES IN SECTION 3157.
- 20 (B) FOR LOSS OCCURRENCES UNDER MOTOR VEHICLE ACCIDENT POLICIES
- 21 ISSUED OR RENEWED AFTER DECEMBER 31, 2014, SUBJECT, IF APPLICABLE,
- 22 TO CHAPTER 21B, PERSONAL PROTECTION BENEFITS ARE PAYABLE FOR
- 23 ALLOWABLE EXPENSES CONSISTING OF ALL REASONABLE CHARGES INCURRED,
- 24 UP TO \$10,000,000.00 PER INJURED PERSON, FOR REASONABLY NECESSARY
- 25 PRODUCTS, SERVICES, AND ACCOMMODATIONS FOR THE INJURED PERSON'S
- 26 CARE, RECOVERY, OR REHABILITATION.
- 27 (C) PERSONAL PROTECTION INSURANCE BENEFITS ARE NOT PAYABLE FOR



- 1 either of the following:
- 2 (i) Charges for a hospital room in excess of a reasonable and
- 3 customary charge for semiprivate accommodations except if UNLESS
- 4 the injured person requires special or intensive care.
- (ii) Funeral and burial expenses in excess of the amount set
- 6 forth in the policy, which shall not be less than \$1,750.00 or more
- 7 than \$5,000.00.
- **8 (D)** Work loss consisting of loss of income from work an
- 9 injured person would have performed during the first 3 years after
- 10 the date of the accident if he or she had not been injured. Work
- 11 loss does not include any loss after the date on which the injured
- 12 person dies. Because the benefits received from personal protection
- 13 insurance for loss of income are not taxable income, the benefits
- 14 payable for such loss of income shall be reduced 15% unless the
- 15 claimant presents to the insurer in support of his or her claim
- 16 reasonable proof of a lower value of the income tax advantage in
- 17 his or her case, in which case the lower value shall apply. For the
- 18 period beginning October 1, 2012 through September 30, 2013, the
- 19 benefits payable for work loss sustained in a single 30-day period
- 20 and the income earned by an injured person for work during the same
- 21 period together shall not exceed \$5,189.00, which maximum shall
- 22 apply pro rata to any lesser period of work loss. Beginning October
- 23 1, 2013, the maximum shall be adjusted annually to reflect changes
- 24 in the cost of living under rules prescribed by the commissioner
- 25 DIRECTOR but any change in the maximum shall apply only to benefits
- 26 arising out of accidents occurring subsequent to the date of change
- 27 in the maximum.



- 1 (E) (c) Expenses not exceeding \$20.00 per day, reasonably
- 2 incurred in obtaining ordinary and necessary services in lieu of
- 3 those that, if he or she had not been injured, an injured person
- 4 would have performed during the first 3 years after the date of the
- 5 accident, not for income but for the benefit of himself or herself
- 6 or of his or her dependent.
- 7 (2) Both of the following apply to personal protection
- 8 insurance benefits payable under subsection (1):
- 9 (a) A person who is 60 years of age or older and in the event
- 10 of an accidental bodily injury would not be eligible to receive
- 11 work loss benefits under subsection (1)(b) (1)(D) may waive
- 12 coverage for work loss benefits by signing a waiver on a form
- 13 provided by the insurer. An insurer shall offer a reduced premium
- 14 rate to a person who waives coverage under this subsection for work
- 15 loss benefits. Waiver of coverage for work loss benefits applies
- 16 only to work loss benefits payable to the person or persons who
- 17 have signed the waiver form.
- (b) An insurer shall not be required to provide coverage for
- 19 the medical use of marihuana or for expenses related to the medical
- 20 use of marihuana.
- 21 (3) ALL OF THE FOLLOWING APPLY TO ALLOWABLE EXPENSES UNDER
- 22 SUBSECTION (1) (B):
- 23 (A) COVERAGE LIMITS ARE PROVIDED ON A PER INDIVIDUAL PER LOSS
- 24 OCCURRENCE BASIS.
- 25 (B) REGARDLESS OF THE NUMBER OF MOTOR VEHICLES INSURED OR
- 26 INSURERS PROVIDING SECURITY IN ACCORDANCE WITH THIS CHAPTER OR ANY
- 27 OTHER LAW PROVIDING FOR DIRECT BENEFITS WITHOUT REGARD TO FAULT FOR



- 1 MOTOR OR ANY OTHER VEHICLE ACCIDENTS, A PERSON IS NOT ENTITLED TO
- 2 RECOVER DUPLICATE BENEFITS FOR THE SAME EXPENSES OR LOSSES
- 3 INCURRED.
- 4 (C) PERSONAL PROTECTION INSURANCE BENEFITS PAYABLE TO A PERSON
- 5 INJURED IN A MOTOR VEHICLE ACCIDENT WHILE AN OPERATOR OR PASSENGER
- 6 OF A MOTORCYCLE ARE LIMITED TO \$250,000.00. PERSONAL PROTECTION
- 7 INSURANCE BENEFITS ARE NOT PAYABLE AS DESCRIBED IN THIS SUBDIVISION
- 8 TO THE EXTENT THAT BENEFITS COVERING THE SAME LOSS ARE AVAILABLE
- 9 FROM OTHER SOURCES, REGARDLESS OF THE NATURE AND NUMBER OF BENEFIT
- 10 SOURCES AVAILABLE AND REGARDLESS OF THE NATURE OR FORM OF THE
- 11 BENEFITS.
- 12 (D) PERSONAL PROTECTION INSURANCE BENEFITS PAYABLE TO A
- 13 NONRESIDENT OF THIS STATE ARE LIMITED TO \$50,000.00 PER INDIVIDUAL
- 14 PER LOSS OCCURRENCE. PERSONAL PROTECTION INSURANCE BENEFITS ARE NOT
- 15 PAYABLE AS DESCRIBED IN THIS SUBDIVISION TO THE EXTENT THAT
- 16 BENEFITS COVERING THE SAME LOSS ARE AVAILABLE FROM OTHER SOURCES,
- 17 REGARDLESS OF THE NATURE AND NUMBER OF BENEFIT SOURCES AVAILABLE
- 18 AND REGARDLESS OF THE NATURE OR FORM OF THE BENEFITS.
- 19 (E) A CHARGE FOR A PRODUCT, SERVICE, OR ACCOMMODATION FOR AN
- 20 INJURED PERSON'S CARE, RECOVERY, OR REHABILITATION IS REASONABLE IF
- 21 THE CHARGE IS IN ACCORDANCE WITH SECTION 3157.
- 22 (F) REASONABLY NECESSARY PRODUCTS, SERVICES, AND
- 23 ACCOMMODATIONS RENDERED OR PRESCRIBED BY A HEALTH CARE FACILITY OR
- 24 AGENCY OR HEALTH CARE PROVIDER ARE THOSE THAT ARE REASONABLY
- 25 NECESSARY AND DO NOT INCLUDE PRODUCTS, SERVICES, AND ACCOMMODATIONS
- 26 THAT WOULD HAVE BEEN NEEDED OR USED BY THE INJURED PERSON OR A
- 27 MEMBER OF THE INJURED PERSON'S HOUSEHOLD REGARDLESS OF THE LOSS



- 1 OCCURRENCE. AN INSURER IS NOT REQUIRED TO PROVIDE COVERAGE FOR A
- 2 PRODUCT, SERVICE, OR ACCOMMODATION THAT IS NOT REASONABLY NECESSARY
- 3 FOR AN INJURED PERSON'S CARE, RECOVERY, OR REHABILITATION OR NOT
- 4 REASONABLY LIKELY TO RESULT IN MEANINGFUL AND MEASURABLE LASTING
- 5 IMPROVEMENT IN THE INJURED PERSON'S FUNCTIONAL STATUS.
- 6 (G) IF REIMBURSEMENT FOR A PRODUCT, SERVICE, OR ACCOMMODATION
- 7 RENDERED OR PRESCRIBED IS INITIALLY REJECTED IN WHOLE OR IN PART BY
- 8 AN INSURER AS NOT BEING REASONABLY NECESSARY, THE INSURER, AT THE
- 9 PROVIDER'S REQUEST, SHALL HAVE THE DECISION REEXAMINED BY A
- 10 PROVIDER WHO HAS THE SAME LICENSE, CERTIFICATION, OR REGISTRATION
- 11 AS THE PROVIDER WHO PROVIDED THE PRODUCT, SERVICE, OR ACCOMMODATION
- 12 OR WHO HAS A LICENSE, REGISTRATION, OR CERTIFICATION WITH A SCOPE
- 13 OF PRACTICE THAT INCLUDES THE SCOPE OF PRACTICE OF THE LICENSE,
- 14 REGISTRATION, OR CERTIFICATION OF THE PROVIDER WHO PROVIDED THE
- 15 PRODUCT, SERVICE, OR ACCOMMODATION BEING REEXAMINED. AN INSURER
- 16 SHALL DESIGNATE A PERSON WITH WHOM PROVIDERS CAN DISCUSS THE
- 17 INSURER'S DETERMINATIONS REGARDING WHAT IS REASONABLY NECESSARY.
- 18 (H) ALLOWABLE EXPENSES DO NOT INCLUDE EXPERIMENTAL TREATMENT
- 19 OR PARTICIPATION IN RESEARCH PROJECTS.
- 20 (I) EXPENSES FOR REASONABLY NECESSARY REHABILITATION SERVICES
- 21 THAT ARE REASONABLY LIKELY TO PRODUCE SIGNIFICANT REHABILITATION
- 22 SHALL BE REIMBURSED FOR A FIXED-DURATION PERIOD OF NOT MORE THAN 52
- 23 WEEKS. THE SERVICES MAY BE EXTENDED FOR 1 ADDITIONAL PERIOD OF NOT
- 24 MORE THAN 52 WEEKS IF THE SERVICES ARE REASONABLY LIKELY TO PRODUCE
- 25 SIGNIFICANT REHABILITATION. A 52- OR 104-WEEK PERIOD MAY BE
- 26 EXTENDED IF IT IS REASONABLY LIKELY THAT LONGER TREATMENT MAY
- 27 PRODUCE SIGNIFICANT MEASURABLE IMPROVEMENT.



- 1 (J) ALLOWABLE EXPENSES INCLUDE CHARGES FOR HOME MODIFICATION
- 2 ACCOMMODATIONS DIRECTLY NECESSITATED BY AND RELATED TO THE INJURED
- 3 PERSON'S INJURIES, IF THE ACCOMMODATIONS ARE FUNCTIONALLY NECESSARY
- 4 TO MEET THE INJURED PERSON'S TREATMENT, REHABILITATION,
- 5 MAINTENANCE, AND DAILY LIVING NEEDS.
- 6 (K) EXPENSES FOR A SPECIAL MOTOR VEHICLE OR MOTOR VEHICLE
- 7 MODIFICATIONS THAT ARE DIRECTLY NECESSITATED BY AND RELATED TO THE
- 8 INJURED PERSON'S INJURIES ARE NOT ALLOWABLE MORE FREQUENTLY THAN
- 9 ONCE EVERY 7 YEARS.
- 10 (l) A PRODUCT, SERVICE, OR ACCOMMODATION FOR AN INJURED
- 11 PERSON'S CARE, RECOVERY, OR REHABILITATION IS AN ALLOWABLE EXPENSE
- 12 IF IT IS PROVIDED FOR MEDICAL OR REHABILITATIVE REASONS RATHER THAN
- 13 PRIMARILY FOR THE CONVENIENCE OF THE INDIVIDUAL, THE INDIVIDUAL'S
- 14 CAREGIVER, OR THE HEALTH CARE PROVIDER.
- 15 (M) A PRODUCT, SERVICE, OR ACCOMMODATION FOR AN INJURED
- 16 PERSON'S CARE, RECOVERY, OR REHABILITATION IS AN ALLOWABLE EXPENSE
- 17 IF IT IS PROVIDED IN THE MOST APPROPRIATE LOCATION WHERE THE
- 18 SERVICE MAY, FOR PRACTICAL PURPOSES, BE SAFELY AND EFFECTIVELY
- 19 PROVIDED.
- 20 (4) AT LEAST ANNUALLY AFTER AN INSURER HAS MADE A PAYMENT TO
- 21 OR FOR AN INJURED INDIVIDUAL UNDER A CLAIM FOR PERSONAL PROTECTION
- 22 INSURANCE BENEFITS THAT HAS BEEN REPORTED TO AN INCORPORATED
- 23 ASSOCIATION UNDER SECTION 3104(15)(B), THE INSURER SHALL PROVIDE
- 24 THE INDIVIDUAL WITH A STATEMENT OF CUMULATIVE BENEFITS PAID AND THE
- 25 AMOUNT OF BENEFITS THAT REMAIN AVAILABLE FOR THE CLAIM.
- 26 Sec. 3107a. Subject to the provisions of section 3107(1)(b)
- 27 3107(1)(D), work loss for an injured person who is temporarily



- 1 unemployed at the time of the accident or during the period of
- 2 disability shall be based on earned income for the last month
- 3 employed full time preceding the accident.
- 4 SEC. 3107C. (1) EXCEPT AS PROVIDED IN SUBSECTIONS (3) AND (4),
- 5 ALL OF THE FOLLOWING APPLY TO ALLOWABLE EXPENSES UNDER SECTION
- 6 3107(1)(A) OR (B) FOR ATTENDANT CARE PROVIDED IN THE HOME BY A
- 7 FAMILY OR HOUSEHOLD MEMBER:
- 8 (A) PAYMENT IS LIMITED TO A TOTAL OF 56 HOURS PER WEEK,
- 9 REGARDLESS OF THE LEVEL OF CARE PROVIDED.
- 10 (B) PAYMENT IS LIMITED TO \$15.00 PER HOUR, REGARDLESS OF THE
- 11 LEVEL OF CARE PROVIDED. BEGINNING 3 YEARS AFTER THE EFFECTIVE DATE
- 12 OF THE AMENDATORY ACT THAT ADDED THIS SECTION AND EVERY 3 YEARS
- 13 AFTER THAT DATE, THE DIRECTOR SHALL ADJUST THIS AMOUNT TO REFLECT
- 14 THE AGGREGATE PERCENTAGE CHANGE IN THE UNITED STATES CONSUMER PRICE
- 15 INDEX, ROUNDED TO THE NEAREST 10 CENTS.
- 16 (C) THE LIMITATIONS IN SUBDIVISIONS (A) AND (B) APPLY
- 17 REGARDLESS OF WHETHER THE FAMILY OR HOUSEHOLD MEMBER IS LICENSED OR
- 18 OTHERWISE AUTHORIZED TO RENDER THE ATTENDANT CARE UNDER ARTICLE 15
- 19 OF THE PUBLIC HEALTH CODE, 1978 PA 368, MCL 333.16101 TO 333.18838,
- 20 OR IS EMPLOYED BY, UNDER CONTRACT WITH, OR IN ANY WAY CONNECTED
- 21 WITH AN INDIVIDUAL OR AGENCY WHO IS LICENSED OR AUTHORIZED TO
- 22 RENDER THE CARE.
- 23 (2) EXCEPT AS PROVIDED IN SUBSECTIONS (3) AND (4), BOTH OF THE
- 24 FOLLOWING APPLY TO ALLOWABLE EXPENSES UNDER SECTION 3107(1)(A) OR
- 25 (B) FOR ATTENDANT CARE PROVIDED IN THE HOME BY SOMEONE OTHER THAN A
- 26 FAMILY OR HOUSEHOLD MEMBER:
- 27 (A) PAYMENT IS LIMITED TO A TOTAL OF 24 HOURS PER DAY FOR



- 1 SERVICES PERFORMED BY 1 OR MORE INDIVIDUALS.
- 2 (B) PAYMENT FOR THE FIRST 30 DAYS OF ATTENDANT CARE IS NOT
- 3 SUBJECT TO A COPAYMENT. AFTER 30 DAYS, PAYMENT IS SUBJECT TO A
- 4 COPAYMENT OF 20% UP TO A MAXIMUM OF \$200.00 PER MONTH.
- 5 (C) PAYMENT IS SUBJECT TO SECTION 3157.
- 6 (3) EXCEPT AS PROVIDED IN SUBSECTION (4), PAYMENT FOR
- 7 ATTENDANT CARE PROVIDED BY A FAMILY OR HOUSEHOLD MEMBER AND SOMEONE
- 8 OTHER THAN A FAMILY OR HOUSEHOLD MEMBER IS CUMULATIVELY LIMITED TO
- 9 24 HOURS PER DAY.
- 10 (4) NOTWITHSTANDING THE LIMITATIONS IN THIS SECTION, AN
- 11 INSURER OR AN INCORPORATED ASSOCIATION FORMED UNDER SECTION 3104A
- 12 MAY CONTRACT TO PROVIDE ATTENDANT CARE AS AN ALLOWABLE EXPENSE AT
- 13 ANY RATE AND FOR ANY NUMBER OF HOURS PER WEEK.
- Sec. 3109. (1) Benefits provided or required to be provided
- 15 under the laws of any state or the federal government shall be
- 16 subtracted from the personal protection insurance benefits
- 17 otherwise payable for the injury under this chapter.
- 18 (2) An injured person is a natural person suffering accidental
- 19 bodily injury.
- 20 (3) An insurer providing personal protection insurance
- 21 benefits under this chapter may offer, at appropriately reduced
- 22 premium rates, a deductible of a specified dollar amount. This
- 23 deductible may be applicable to all or any specified types of
- 24 personal protection insurance benefits, but shall apply only to
- 25 benefits payable to the person named in the policy, his or her
- 26 spouse, and any relative of either domiciled in the same household.
- 27 THIS SUBSECTION DOES NOT APPLY TO A MANAGED CARE OPTION OFFERED



1 UNDER CHAPTER 21B.

- 2 Sec. 3109a. An insurer providing personal protection insurance
- 3 benefits under this chapter may offer, at appropriately reduced
- 4 premium rates, deductibles and exclusions reasonably related to
- 5 other health and accident coverage on INSURANCE COVERING the
- 6 insured. Any deductibles and exclusions offered under this section
- 7 are subject to prior approval by the commissioner DIRECTOR and
- 8 shall MUST apply only to benefits payable to the person named in
- 9 the policy, the spouse of the insured, and any relative of either
- 10 domiciled in the same household. THIS SECTION DOES NOT APPLY TO A
- 11 MANAGED CARE OPTION OFFERED UNDER CHAPTER 21B.
- 12 Sec. 3113. A person is not entitled to be paid personal
- 13 protection insurance benefits for accidental bodily injury if at
- 14 the time of the accident any of the following circumstances
- **15** existed:
- 16 (a) The person was using a motor vehicle or motorcycle which
- 17 THAT he or she had taken unlawfully, unless the person reasonably
- 18 believed that he or she was entitled to take and use the vehicle.
- 19 (b) The person was the owner or registrant of a motor vehicle
- 20 or motorcycle involved in the accident with respect to which the
- 21 security required by section 3101 or 3103 was not in effect.
- (c) The person was not a resident of this state, was an
- 23 occupant of a motor vehicle or motorcycle not registered in this
- 24 state, and was not insured by an insurer which THAT has filed a
- 25 certification in compliance with section 3163.
- 26 (D) THE PERSON WAS THE OWNER OR REGISTRANT OF A MOTOR VEHICLE
- 27 INSURED UNDER A POLICY ISSUED UNDER CHAPTER 32A.



1 Sec. 3114. (1) Except as provided in subsections (2), (3), and 2 (5), (7), AND (8), a personal protection insurance policy described 3 in section 3101(1) applies to accidental bodily injury to the 4 person named in the policy, the person's spouse, and a relative of 5 either domiciled in the same household, if the injury arises from a 6 motor vehicle accident. A personal injury insurance policy described in section 3103(2) applies to accidental bodily injury to 7 the person named in the policy, the person's spouse, and a relative 8 9 of either domiciled in the same household, if the injury arises 10 from a motorcycle accident. When personal protection insurance 11 benefits **DESCRIBED IN SECTION 3107(1)**, or personal injury benefits 12 described in section 3103(2), are payable to or for the benefit of 13 an injured person under his or her own policy and would also be 14 payable under the policy of his or her spouse, relative, or relative's spouse, the injured person's insurer shall pay all of 15 the benefits and is not entitled to recoupment from the other 16 insurer. THE COVERAGE FOR ALLOWABLE EXPENSES FOR 2 OR MORE MOTOR 17 VEHICLES UNDER 1 POLICY OR FOR 2 OR MORE POLICIES SHALL NOT BE 18 19 ADDED TOGETHER, COMBINED, OR STACKED TO DETERMINE THE LIMIT OF INSURANCE COVERAGE AVAILABLE FOR EACH INJURED PERSON COVERED UNDER 20 21 THE POLICY. 22 (2) A person suffering accidental bodily injury while an 23 operator or a passenger of a motor vehicle operated in the business 24 of transporting passengers shall receive the personal protection 25 insurance benefits to which the person is entitled from the insurer 26 of the motor vehicle. This subsection does not apply to a passenger

in the following, unless that passenger is not entitled to personal

27

- 1 protection insurance benefits under any other policy:
- 2 (a) A school bus, as defined by the department of education,
- 3 providing transportation not prohibited by law.
- 4 (b) A bus operated by a common carrier of passengers certified
- 5 by the department of transportation.
- **6** (c) A bus operating under a government sponsored
- 7 transportation program.
- 8 (d) A bus operated by or providing service to a nonprofit
- 9 organization.
- 10 (e) A taxicab insured as prescribed in section 3101 or 3102.
- 11 (f) A bus operated by a canoe or other watercraft, bicycle, or
- 12 horse livery used only to transport passengers to or from a
- 13 destination point.
- 14 (3) An employee, his or her spouse, or a relative of either
- domiciled in the same household —who suffers accidental bodily
- 16 injury while an occupant of a motor vehicle owned or registered by
- 17 the employer —shall receive personal protection insurance benefits
- 18 to which the employee is entitled from the insurer of the furnished
- 19 vehicle.
- 20 (4) Except as provided in subsections (1) to (3), (7), AND
- 21 (8), a person suffering accidental bodily injury arising from a
- 22 motor vehicle accident while an occupant of a motor vehicle shall
- 23 claim personal protection insurance benefits from insurers in the
- 24 following order of priority:
- 25 (a) The insurer of the owner or registrant of the vehicle
- 26 occupied.
- 27 (b) The insurer of the operator of the vehicle occupied.

- 1 (5) A-EXCEPT AS PROVIDED IN SUBSECTIONS (7) AND (8), A person
- 2 suffering accidental bodily injury arising from a motor vehicle
- 3 accident which THAT shows evidence of the involvement of a motor
- 4 vehicle while an operator or passenger of a motorcycle shall claim
- 5 personal protection insurance benefits from insurers in the
- 6 following order of priority:
- 7 (a) The insurer of the owner or registrant of the motor
- 8 vehicle involved in the accident.
- **9** (b) The insurer of the operator of the motor vehicle involved
- 10 in the accident.
- 11 (c) The motor vehicle insurer of the operator of the
- 12 motorcycle involved in the accident.
- 13 (d) The motor vehicle insurer of the owner or registrant of
- 14 the motorcycle involved in the accident.
- 15 (6) If 2 or more insurers are in the same order of priority to
- 16 provide personal protection insurance benefits, under subsection
- 17 (5), an insurer paying benefits due is entitled to partial
- 18 recoupment from the other insurers in the same order of priority,
- 19 together with a reasonable amount of partial recoupment of the
- 20 expense of processing the claim, in order to accomplish equitable
- 21 distribution of the loss among all of the insurers.
- 22 (7) AN AUTOMOBILE INSURANCE POLICY ISSUED UNDER CHAPTER 32A
- 23 APPLIES ONLY TO THE OWNER OR REGISTRANT OF THE MOTOR VEHICLE
- 24 INSURED UNDER THE POLICY, NOT TO THE OWNER'S OR REGISTRANT'S SPOUSE
- 25 OR A RELATIVE OF EITHER DOMICILED IN THE SAME HOUSEHOLD. AN OWNER
- 26 OR REGISTRANT OF A MOTOR VEHICLE INSURED UNDER AN AUTOMOBILE
- 27 INSURANCE POLICY ISSUED UNDER CHAPTER 32A IS NOT ENTITLED TO



- 1 BENEFITS DESCRIBED IN THIS SECTION UNDER AN AUTOMOBILE INSURANCE
- 2 POLICY ISSUED TO ANY OF THE FOLLOWING:
- 3 (A) THE OWNER'S OR REGISTRANT'S SPOUSE, RELATIVE, OR
- 4 RELATIVE'S SPOUSE.
- 5 (B) THE OWNER, REGISTRANT, OR OPERATOR OF ANOTHER VEHICLE
- 6 OCCUPIED BY THE OWNER OR REGISTRANT OF THE MOTOR VEHICLE INSURED
- 7 UNDER THE POLICY ISSUED UNDER CHAPTER 32A.
- 8 (8) OTHER THAN RESIDUAL LIABILITY BENEFITS DESCRIBED IN
- 9 SECTION 3009, AN INDIVIDUAL OTHER THAN THE OWNER OR REGISTRANT OF A
- 10 MOTOR VEHICLE INSURED UNDER AN AUTOMOBILE INSURANCE POLICY ISSUED
- 11 UNDER CHAPTER 32A IS NOT ENTITLED TO BENEFITS UNDER THE POLICY. THE
- 12 INDIVIDUAL, IF INJURED WHILE AN OCCUPANT OF THE MOTOR VEHICLE OR IN
- 13 A MOTOR VEHICLE ACCIDENT THAT SHOWS EVIDENCE OF THE INVOLVEMENT OF
- 14 THE MOTOR VEHICLE, IS ONLY ENTITLED TO PERSONAL PROTECTION BENEFITS
- 15 THAT ARE OTHERWISE AVAILABLE TO THE INDIVIDUAL UNDER THIS CHAPTER.
- 16 Sec. 3115. (1) Except as provided in subsection (1) of section
- 17 3114(1), a person suffering accidental bodily injury while not
- 18 an occupant of a motor vehicle shall claim personal protection
- 19 insurance benefits from insurers in the following order of
- 20 priority:
- 21 (a) Insurers of owners or registrants of motor vehicles
- 22 involved in the accident.
- 23 (b) Insurers of operators of motor vehicles involved in the
- 24 accident.
- 25 (2) When IF 2 or more insurers are in the same order of
- 26 priority to provide personal protection insurance benefits, an
- 27 insurer paying benefits due is entitled to partial recoupment from



- 1 the other insurers in the same order of priority, together with AND
- 2 a reasonable amount of partial recoupment of the expense of
- 3 processing the claim, in order to accomplish equitable distribution
- 4 of the loss among such THE insurers.
- 5 (3) A limit upon the amount of personal protection insurance
- 6 benefits available because of accidental bodily injury to 1 person
- 7 arising from 1 motor vehicle accident shall be determined without
- 8 regard to the number of policies applicable to the accident.
- 9 (4) THE LIMIT OF LIABILITY FOR 2 OR MORE MOTOR VEHICLES UNDER
- 10 1 POLICY OR FOR 2 OR MORE POLICIES SHALL NOT BE ADDED TOGETHER,
- 11 COMBINED, OR STACKED TO DETERMINE THE LIMIT OF INSURANCE COVERAGE
- 12 AVAILABLE FOR EACH INJURED PERSON COVERED UNDER THE POLICY.
- Sec. 3135. (1) A person remains subject to tort liability for
- 14 noneconomic loss caused by his or her ownership, maintenance, or
- 15 use of a motor vehicle only if the injured person has suffered
- 16 death, serious impairment of body function, or permanent serious
- 17 disfigurement.
- 18 (2) For a cause of action for damages pursuant to subsection
- 19 (1) filed on or after July 26, 1996, all of the following apply:
- 20 (a) The issues of whether the injured person has suffered
- 21 serious impairment of body function or permanent serious
- 22 disfigurement are questions of law for the court if the court finds
- 23 either of the following:
- (i) There is no factual dispute concerning the nature and
- 25 extent of the person's injuries.
- 26 (ii) There is a factual dispute concerning the nature and
- 27 extent of the person's injuries, but the dispute is not material to



- 1 the determination whether the person has suffered a serious
- 2 impairment of body function or permanent serious disfigurement.
- 3 However, for a closed-head injury, a question of fact for the jury
- 4 is created if a licensed allopathic or osteopathic physician who
- 5 regularly diagnoses or treats closed-head injuries testifies under
- 6 oath that there may be a serious neurological injury.
- 7 (b) Damages shall be assessed on the basis of comparative
- 8 fault, except that damages shall not be assessed in favor of a
- 9 party who is more than 50% at fault.
- 10 (c) Damages shall not be assessed in favor of a party who was
- 11 operating his or her own vehicle at the time the injury occurred
- 12 and did not have in effect for that motor vehicle the security
- 13 required by section 3101 at the time the injury occurred.
- 14 (D) IF THE INJURED PERSON WAS THE OWNER OR REGISTRANT OF A
- 15 MOTOR VEHICLE INSURED UNDER A POLICY ISSUED UNDER CHAPTER 32A, THE
- 16 INJURED PERSON IS LIMITED TO A RECOVERY OF \$20,000.00 IN THE
- 17 AGGREGATE FROM ALL PERSONS WHO ARE LIABLE UNDER SUBSECTION (1).
- 18 (3) Notwithstanding any other provision of law, tort liability
- 19 arising from the ownership, maintenance, or use within this state
- 20 of a motor vehicle with respect to which the security required by
- 21 section 3101 was in effect is abolished except as to:
- 22 (a) Intentionally caused harm to persons or property. Even
- 23 though a person knows that harm to persons or property is
- 24 substantially certain to be caused by his or her act or omission,
- 25 the person does not cause or suffer that harm intentionally if he
- 26 or she acts or refrains from acting for the purpose of averting
- 27 injury to any person, including himself or herself, or for the

- 1 purpose of averting damage to tangible property.
- 2 (b) Damages for noneconomic loss as provided and limited in
- 3 subsections (1) and (2).
- 4 (c) Damages for allowable expenses, work loss, and survivor's
- 5 loss as defined in EXCESS OF THE PERSONAL PROTECTION INSURANCE
- 6 BENEFITS PROVIDED UNDER sections 3107 to 3110. in excess of the
- 7 daily, monthly, and 3-year limitations contained in those sections.
- 8 The party liable for damages is entitled to an exemption reducing
- 9 his or her liability FOR PAYMENT OF WORK LOSS AND SURVIVOR'S LOSS
- 10 by the amount of taxes that would have been payable on account of
- 11 income the injured person would have received if he or she had not
- 12 been injured. THIS SUBDIVISION DOES NOT APPLY TO AN OWNER OR
- 13 REGISTRANT OF A MOTOR VEHICLE INSURED UNDER A POLICY ISSUED UNDER
- 14 CHAPTER 32A.
- 15 (d) Damages for economic loss by a nonresident in excess of
- 16 the personal protection insurance benefits provided under section
- 17 3107(3)(D) OR 3163(4), AS APPLICABLE. Damages under this
- 18 subdivision are not recoverable to the extent that benefits
- 19 covering the same loss are available from other sources, regardless
- 20 of the nature or number of benefit sources available and regardless
- 21 of the nature or form of the benefits.
- 22 (e) Damages up to \$1,000.00 to a motor vehicle, to the extent
- 23 that the damages are not covered by insurance. An action for
- 24 damages under this subdivision shall be conducted as provided in
- 25 subsection (4).
- 26 (4) All of the following apply to an action for damages under
- 27 subsection (3)(e):



- 1 (a) Damages shall be assessed on the basis of comparative
- 2 fault, except that damages shall not be assessed in favor of a
- 3 party who is more than 50% at fault.
- 4 (b) Liability is not a component of residual liability, as
- 5 prescribed in section 3131, for which maintenance of security is
- 6 required by this act.
- 7 (c) The action shall be commenced, whenever legally possible,
- 8 in the small claims division of the district court or the municipal
- 9 court. If the defendant or plaintiff removes the action to a higher
- 10 court and does not prevail, the judge may assess costs.
- 11 (d) A decision of the court is not res judicata in any
- 12 proceeding to determine any other liability arising from the same
- 13 circumstances that gave rise to the action.
- 14 (e) Damages shall not be assessed if the damaged motor vehicle
- 15 was being operated at the time of the damage without the security
- 16 required by section 3101.
- 17 (5) As used in this section, "serious impairment of body
- 18 function" means an objectively manifested impairment of an
- 19 important body function that affects the person's general ability
- 20 to lead his or her normal life.
- 21 Sec. 3148. (1) An SUBJECT TO SUBSECTION (2), AN attorney is
- 22 entitled to a reasonable fee for advising and representing a
- 23 claimant in an action for personal or property protection insurance
- 24 benefits which THAT are overdue. The attorney's fee shall be a
- 25 charge against the insurer in addition to the benefits recovered,
- 26 if the court finds that the insurer unreasonably refused to pay the
- 27 claim or unreasonably delayed in making proper payment. EVIDENCE OF

- 1 THE MANNER IN WHICH AN INSURER PROCESSED A CLAIM FOR BENEFITS IS
- 2 NOT ADMISSIBLE AT THE TRIAL OF AN ACTION TO RECOVER BENEFITS UNDER
- 3 THIS CHAPTER.
- 4 (2) FOR A DISPUTE OVER PAYMENT FOR ALLOWABLE EXPENSES UNDER
- 5 SECTION 3107(1)(A) OR (B) FOR ATTENDANT CARE, ATTORNEY FEES MAY
- 6 ONLY BE AWARDED UNDER SUBSECTION (1) FOR SERVICES RENDERED IN THE
- 7 12-MONTH PERIOD IMMEDIATELY PRECEDING THE DATE THE INSURER IS
- 8 NOTIFIED OF THE DISPUTE.
- 9 (3) (2) An A COURT MAY AWARD AN insurer may be allowed by a
- 10 court an award of a reasonable sum against a claimant as an
- 11 attorney's fee for the insurer's attorney in defense DEFENDING
- 12 against a claim that was in some respect fraudulent or so excessive
- 13 as to have no reasonable foundation. To the extent that personal or
- 14 property protection insurance benefits are then due or thereafter
- 15 come due to the claimant because of loss resulting from the injury
- on which the claim is based, such a AN ATTORNEY fee AWARDED may be
- 17 treated TAKEN as an offset against such THE benefits. ; also,
- 18 judgment JUDGMENT may ALSO be entered against the claimant for any
- 19 amount of a AN ATTORNEY fee awarded against him and THAT IS not
- 20 offset in this way AGAINST BENEFITS or otherwise paid.
- 21 Sec. 3157. (1) A physician, hospital, clinic, or other person
- 22 or institution lawfully rendering treatment to an injured person
- 23 for an accidental bodily injury covered by personal protection
- 24 insurance, and a person or institution providing rehabilitative
- 25 occupational training following the injury, may charge a reasonable
- 26 amount for the products, services, and accommodations rendered. The
- 27 SUBJECT TO SUBSECTION (2), THE charge shall not exceed the amount

- 1 the person or institution customarily charges for like products,
- 2 services and accommodations in cases not involving insurance.
- 3 (2) IF AN INSURER PAYS A CHARGE FOR A PRODUCT, SERVICE, OR
- 4 ACCOMMODATION WITHIN 30 DAYS AFTER THE INSURER RECEIVES A BILLING
- 5 STATEMENT FOR THE CHARGE, THE PERSON OR INSTITUTION THAT PROVIDED
- 6 THE PRODUCT, SERVICE, OR ACCOMMODATION SHALL ACCEPT AS PAYMENT IN
- 7 FULL FOR THE PRODUCT, SERVICE, OR ACCOMMODATION THE LESSER OF THE
- 8 AMOUNT CHARGED OR 125% OF THE AMOUNT THAT WOULD BE PAID UNDER R
- 9 418.10101 TO R 418.101504 OF THE MICHIGAN ADMINISTRATIVE CODE OR
- 10 SCHEDULES OF MAXIMUM FEES FOR WORKER'S DISABILITY COMPENSATION
- 11 DEVELOPED UNDER THOSE RULES.
- 12 (3) WHETHER A CHARGE IS REASONABLE OR WHETHER A PRODUCT,
- 13 SERVICE, OR ACCOMMODATION IS REASONABLY NECESSARY IS A QUESTION OF
- 14 LAW TO BE DECIDED BY THE COURT.
- 15 (4) IF A PHYSICIAN, HOSPITAL, CLINIC, OR OTHER PERSON LAWFULLY
- 16 RENDERING TREATMENT OR REHABILITATIVE OCCUPATIONAL TRAINING
- 17 PROVIDES HEALTH CARE OR A HEALTH SERVICE THAT IS NOT USUALLY
- 18 ASSOCIATED WITH, IS LONGER IN DURATION IN TIME THAN, IS MORE
- 19 FREQUENT THAN, OR EXTENDS OVER A GREATER NUMBER OF DAYS THAN THE
- 20 HEALTH CARE OR SERVICE USUALLY DOES WITH THE DIAGNOSIS OR CONDITION
- 21 FOR WHICH THE PATIENT IS BEING TREATED, THE INSURER MAY REQUIRE THE
- 22 PHYSICIAN, HOSPITAL, CLINIC, OR OTHER PERSON TO EXPLAIN IN WRITING
- 23 WHY THE UNUSUAL TREATMENT IS NECESSARY OR INDICATED.
- 24 (5) IF AN INSURER DETERMINES THAT A PHYSICIAN, HOSPITAL,
- 25 CLINIC, OR OTHER PERSON LAWFULLY RENDERING TREATMENT OR
- 26 REHABILITATIVE OCCUPATIONAL TRAINING HAS REQUIRED UNJUSTIFIED
- 27 TREATMENT, HOSPITALIZATION, OR VISITS, AN INSURER IS NOT REQUIRED



- 1 TO PAY THE PHYSICIAN, HOSPITAL, CLINIC, OR OTHER PERSON FOR THE
- 2 UNJUSTIFIED TREATMENT, HOSPITALIZATION, OR VISITS, AND THE
- 3 PHYSICIAN, HOSPITAL, CLINIC, OR OTHER PERSON IS LIABLE TO RETURN TO
- 4 THE INSURER THE FEES OR CHARGES ALREADY COLLECTED. THE DEPARTMENT
- 5 MAY REVIEW THE RECORDS AND MEDICAL BILLS OF A PHYSICIAN, HOSPITAL,
- 6 CLINIC, OR OTHER PERSON LAWFULLY RENDERING TREATMENT OR
- 7 REHABILITATIVE OCCUPATIONAL TRAINING THAT IS DETERMINED BY AN
- 8 INSURER TO BE REQUIRING UNJUSTIFIED TREATMENT, HOSPITALIZATION, OR
- 9 OFFICE VISITS.
- 10 (6) AN INSURER SHALL CONDUCT A UTILIZATION REVIEW FOR EACH
- 11 INDIVIDUAL ON WHOSE BEHALF THE INSURER PAYS BENEFITS UNDER THIS
- 12 SECTION. AN INSURER SHALL CONDUCT A UTILIZATION REVIEW ACCORDING TO
- 13 THE CRITERIA OR STANDARDS ESTABLISHED BY THE DEPARTMENT UNDER
- 14 SUBSECTION (9).
- 15 (7) BY ACCEPTING PAYMENT UNDER THIS CHAPTER, A PHYSICIAN,
- 16 HOSPITAL, CLINIC, OR OTHER PERSON LAWFULLY RENDERING TREATMENT OR
- 17 REHABILITATIVE OCCUPATIONAL TRAINING IS CONSIDERED TO HAVE
- 18 CONSENTED TO SUBMIT NECESSARY RECORDS AND OTHER INFORMATION
- 19 CONCERNING HEALTH CARE OR HEALTH SERVICES PROVIDED FOR UTILIZATION
- 20 REVIEW UNDER THIS SECTION. THE PHYSICIAN, HOSPITAL, CLINIC, OR
- 21 OTHER PERSON IS CONSIDERED TO HAVE AGREED TO COMPLY WITH ANY
- 22 DECISION OF THE DEPARTMENT UNDER SUBSECTION (8). A PHYSICIAN,
- 23 HOSPITAL, CLINIC, OR OTHER PERSON LAWFULLY RENDERING TREATMENT OR
- 24 REHABILITATIVE OCCUPATIONAL TRAINING THAT SUBMITS FALSE OR
- 25 MISLEADING RECORDS OR OTHER INFORMATION TO AN INSURER OR THE
- 26 DEPARTMENT IS GUILTY OF A MISDEMEANOR PUNISHABLE BY IMPRISONMENT
- 27 FOR NOT MORE THAN 1 YEAR OR A FINE OF NOT MORE THAN \$1,000.00, OR



- 1 BOTH.
- 2 (8) IF AN INSURER DETERMINES THAT A PHYSICIAN, HOSPITAL,
- 3 CLINIC, OR OTHER PERSON LAWFULLY RENDERING TREATMENT OR
- 4 REHABILITATIVE OCCUPATIONAL TRAINING IMPROPERLY OVERUTILIZED OR
- 5 OTHERWISE RENDERED OR ORDERED INAPPROPRIATE HEALTH CARE OR HEALTH
- 6 SERVICES, THE PHYSICIAN, HOSPITAL, CLINIC, OR OTHER PERSON MAY
- 7 APPEAL TO THE DEPARTMENT REGARDING THE DETERMINATION AS PROVIDED IN
- 8 THE RULES PROMULGATED UNDER SUBSECTION (9).
- 9 (9) THE DEPARTMENT SHALL PROMULGATE RULES PURSUANT TO THE
- 10 ADMINISTRATIVE PROCEDURES ACT OF 1969, 1969 PA 306, MCL 24.201 TO
- 11 24.328, TO ESTABLISH CRITERIA OR STANDARDS FOR UTILIZATION REVIEWS
- 12 UNDER THIS SECTION. THE RULES MUST BE DESIGNED TO IDENTIFY THE
- 13 UTILIZATION OF HEALTH CARE AND HEALTH SERVICES THAT IS GREATER THAN
- 14 THE USUAL RANGE OF UTILIZATION FOR THE HEALTH CARE AND HEALTH
- 15 SERVICES BASED ON MEDICALLY ACCEPTED STANDARDS AND PROVIDE FOR
- 16 ACQUIRING NECESSARY RECORDS, MEDICAL BILLS, AND OTHER INFORMATION
- 17 CONCERNING THE HEALTH CARE OR HEALTH SERVICES.
- 18 (10) AS USED IN THIS SECTION, "UTILIZATION REVIEW" MEANS AN
- 19 INITIAL EVALUATION OF THE APPROPRIATENESS, IN TERMS OF BOTH LEVEL
- 20 AND QUALITY, OF HEALTH CARE AND HEALTH SERVICES PROVIDED AN INJURED
- 21 INDIVIDUAL, BASED ON MEDICALLY ACCEPTED STANDARDS.
- 22 Sec. 3163. (1) An insurer authorized to transact automobile
- 23 liability insurance and personal and property protection insurance
- 24 in this state shall file and maintain a written certification that
- 25 any accidental bodily injury or property damage occurring in this
- 26 state arising from the ownership, operation, maintenance, or use of
- 27 a motor vehicle as a motor vehicle by an out-of-state resident who

- 1 is insured under its automobile liability insurance policies, is
- 2 subject to the personal and property protection insurance system
- 3 under this act.
- 4 (2) A nonadmitted insurer may voluntarily file the
- 5 certification described in subsection (1).
- 6 (3) Except as otherwise provided in subsection (4), if a
- 7 certification filed under subsection (1) or (2) applies to
- 8 accidental bodily injury or property damage, the insurer and its
- 9 insureds with respect to that injury or damage have the rights and
- 10 immunities under this act for personal and property protection
- 11 insureds, and claimants have the rights and benefits of personal
- 12 and property protection insurance claimants, including the right to
- 13 receive benefits from the electing insurer as if it were an insurer
- 14 of personal and property protection insurance applicable to the
- 15 accidental bodily injury or property damage.
- 16 (4) If for loss occurrences that occur before the effective
- 17 DATE OF SECTION 3107(3)(D), IF an insurer of an out-of-state
- 18 resident is required to provide benefits under subsections (1) to
- 19 (3) to that out-of-state resident for accidental bodily injury for
- 20 an accident in which the out-of-state resident was not an occupant
- 21 of a motor vehicle registered in this state, the insurer is only
- 22 liable for the amount of ultimate loss sustained up to \$500,000.00.
- 23 Benefits under this subsection are not recoverable to the extent
- 24 that benefits covering the same loss are available from other
- 25 sources, regardless of the nature or number of benefit sources
- 26 available and regardless of the nature or form of the benefits.
- 27 Sec. 3172. (1) A person entitled to claim because of

- 1 accidental bodily injury arising out of the ownership, operation,
- 2 maintenance, or use of a motor vehicle as a motor vehicle in this
- 3 state may obtain personal protection insurance benefits through the
- 4 assigned claims plan if IN ANY OF THE FOLLOWING SITUATIONS:
- 5 (A) IF no personal protection insurance is applicable to the
- 6 injury. -
- 7 (B) IF no personal protection insurance applicable to the
- 8 injury can be identified. 7
- 9 (C) IF the personal protection insurance applicable to the
- 10 injury cannot be ascertained because of a dispute between 2 or more
- 11 automobile insurers concerning their obligation to provide coverage
- 12 or the equitable distribution of the loss. 7 or
- 13 (D) IF the only identifiable personal protection insurance
- 14 applicable to the injury is, because of financial inability of 1 or
- 15 more insurers to fulfill their obligations, inadequate to provide
- 16 benefits up to the maximum prescribed. In that case,
- 17 (2) IN ANY OF THE SITUATIONS UNDER SUBSECTION (1), unpaid
- 18 benefits due or coming due may be collected under the assigned
- 19 claims plan and the insurer to which the claim is assigned is
- 20 entitled to reimbursement from the defaulting insurers to the
- 21 extent of their financial responsibility.
- 22 (3) $\frac{(2)}{(2)}$ Except as otherwise provided in this subsection,
- 23 personal protection insurance benefits, including benefits arising
- 24 from accidents occurring before March 29, 1985, payable through the
- 25 assigned claims plan shall be reduced to the extent that benefits
- 26 covering the same loss are available from other sources, regardless
- 27 of the nature or number of benefit sources available and regardless

- 1 of the nature or form of the benefits, to a person claiming
- 2 personal protection insurance benefits through the assigned claims
- 3 plan. This subsection only applies if the personal protection
- 4 insurance benefits are payable through the assigned claims plan
- 5 because no personal protection insurance is applicable to the
- 6 injury, no personal protection insurance applicable to the injury
- 7 can be identified, or the only identifiable personal protection
- 8 insurance applicable to the injury is, because of financial
- 9 inability of 1 or more insurers to fulfill their obligations,
- 10 inadequate to provide benefits up to the maximum prescribed. As
- 11 used in this subsection, "sources" and "benefit sources" do not
- 12 include the program for medical assistance for the medically
- 13 indigent under the social welfare act, 1939 PA 280, MCL 400.1 to
- 14 400.119b, or insurance under the health insurance for the aged act,
- 15 title SUBCHAPTER XVIII of the social security act, 42 USC 1395 to
- **16** 1395kkk-1.
- 17 (4) (3)—If the obligation to provide personal protection
- 18 insurance benefits cannot be ascertained because of a dispute
- 19 between 2 or more automobile insurers concerning their obligation
- 20 to provide coverage or the equitable distribution of the loss, and
- 21 if a method of voluntary payment of benefits cannot be agreed upon
- 22 among or between the disputing insurers, all of the following
- 23 apply:
- 24 (a) The insurers who are parties to the dispute shall, or the
- 25 claimant may, immediately notify the Michigan automobile insurance
- 26 placement facility of their inability to determine their statutory
- 27 obligations.



- (b) The claim shall be assigned by the Michigan automobile
 insurance placement facility to an insurer and the insurer shall
 immediately provide personal protection insurance benefits to the
 claimant or claimants entitled to benefits.
- (c) An action shall be immediately commenced on behalf of the
 Michigan automobile insurance placement facility by the insurer to
 whom the claim is assigned in circuit court to declare the rights
 and duties of any interested party.
- 9 (d) The insurer to whom the claim is assigned shall join as
 10 parties defendant to the action commenced under subdivision (c)
 11 each insurer disputing either the obligation to provide personal
 12 protection insurance benefits or the equitable distribution of the
 13 loss among the insurers.
- (e) The circuit court shall declare the rights and duties of any interested party whether or not other relief is sought or could be granted.
- 17 (f) After hearing the action, the circuit court shall 18 determine the insurer or insurers, if any, obligated to provide the 19 applicable personal protection insurance benefits and the equitable 20 distribution, if any, among the insurers obligated, and shall order 21 reimbursement to the Michigan automobile insurance placement 22 facility from the insurer or insurers to the extent of the 23 responsibility as determined by the court. The reimbursement 24 ordered under this subdivision shall include all benefits and costs 25 paid or incurred by the Michigan automobile insurance placement 26 facility and all benefits and costs paid or incurred by insurers 27 determined not to be obligated to provide applicable personal

- 1 protection insurance benefits, including reasonable, actually
- 2 incurred attorney fees and interest at the rate prescribed in
- 3 section 3175 as of December 31 of the year preceding the
- 4 determination of the circuit court.
- 5 (5) AN INJURED PERSON CLAIMING PERSONAL PROTECTION INSURANCE
- 6 BENEFITS UNDER THE ASSIGNED CLAIMS PLAN IS LIMITED TO REASONABLE
- 7 CHARGES INCURRED UP TO A MAXIMUM OF \$250,000.00 FOR REASONABLY
- 8 NECESSARY PRODUCTS, SERVICES, AND ACCOMMODATIONS FOR HIS OR HER
- 9 CARE, RECOVERY, OR REHABILITATION.
- 10 (6) ANY REIMBURSEMENT ORDERED UNDER THIS SECTION AND ANY
- 11 RECOVERY OBTAINED IN CIRCUMSTANCES WHERE PERSONAL PROTECTION
- 12 INSURANCE BENEFITS HAVE BEEN OR MAY BE PAID THROUGH THE MICHIGAN
- 13 AUTOMOBILE INSURANCE PLACEMENT FACILITY SHALL INCLUDE ALL BENEFITS
- 14 AND COSTS PAID OR INCURRED BY INSURERS DETERMINED NOT TO BE
- 15 OBLIGATED TO PROVIDE THE APPLICABLE PERSONAL PROTECTION INSURANCE
- 16 BENEFITS, INCLUDING ACTUALLY INCURRED REASONABLE ATTORNEY FEES AND
- 17 INTEREST AT THE RATE PRESCRIBED IN SECTION 3175 AS OF DECEMBER 31
- 18 OF THE YEAR PRECEDING THE REIMBURSEMENT ORDER OR RECOVERY
- 19 DETERMINATION.
- 20 SEC. 3181. (1) SUBJECT TO SECTION 2403, BY DECEMBER 31, 2014,
- 21 ANY INSURER ENGAGED IN WRITING INSURANCE COVERAGES THAT PROVIDE THE
- 22 SECURITY REQUIRED BY SECTION 3101(1) SHALL FILE RATES FOR
- 23 AUTOMOBILE INSURANCE POLICIES ISSUED OR RENEWED AFTER DECEMBER 31,
- 24 2014 THAT RESULT IN A PER-POLICY REDUCTION IN THE ANNUAL PREMIUM,
- 25 WHICH FOR PURPOSES OF THIS SUBSECTION AND SUBSECTION (2) INCLUDES
- 26 THE CATASTROPHIC CLAIMS ASSESSMENT IMPOSED UNDER SECTION 3104(31),
- 27 TO REFLECT THE SAVINGS EXPECTED AS A RESULT OF THE CHANGES MADE TO



- 1 THIS ACT BY THE AMENDATORY ACT THAT ADDED THIS SECTION. THE
- 2 REDUCTION UNDER THIS SUBSECTION SHALL BE FROM RATES, INCLUDING THE
- 3 RECOGNITION IN THE RATES AS REQUIRED UNDER SECTION 3104(34) OF
- 4 PREMIUM CHARGES UNDER SECTION 3104(14)(D), IN EFFECT FOR THE
- 5 INSURER ON THE DATE THAT THE AMENDATORY ACT THAT ADDED THIS SECTION
- 6 IS ENACTED INTO LAW AND SHALL NOT BE LESS THAN 10%.
- 7 (2) AN INSURER THAT IS SUBJECT TO SUBSECTION (1) SHALL NOT
- 8 INCREASE AN INSURED'S PREMIUM FROM THE LEVEL ESTABLISHED UNDER
- 9 SUBSECTION (1) BEFORE JANUARY 1, 2017. THIS SUBSECTION DOES NOT
- 10 APPLY TO AN INCREASE IN A PREMIUM BECAUSE OF A CHANGE IN A RISK
- 11 CLASSIFICATION THAT RESULTS FROM ACTIONS OF THE INSURED.
- 12 (3) AN INSURER SHALL INCLUDE BOTH OF THE FOLLOWING IN A BILL
- 13 OR OTHER NOTICE OF PAYMENT DUE FOR A PREMIUM THAT IS REDUCED UNDER
- 14 SUBSECTION (1) OR THAT REMAINS REDUCED UNDER SUBSECTION (2):
- 15 (A) A SEPARATE AND DISTINCT LINE THAT SHOWS THE DOLLAR AMOUNT
- 16 BY WHICH THE PREMIUM IS REDUCED.
- 17 (B) THE FOLLOWING STATEMENT FOLLOWING THAT LINE: "THIS PREMIUM
- 18 REDUCTION IS PROVIDED BY THE MICHIGAN LEGISLATURE UNDER PUBLIC ACT
- 19 OF 20 .", INCLUDING THE YEAR AND PUBLIC ACT NUMBER OF THE
- 20 AMENDATORY ACT THAT ADDED THIS SECTION.
- 21 CHAPTER 32A
- 22 LOW-COST AUTOMOBILE INSURANCE PILOT PROGRAM
- 23 SEC. 3275. AS USED IN THIS CHAPTER:
- 24 (A) "AUTOMOBILE INSURANCE" MEANS THAT TERM AS DEFINED IN
- 25 SECTION 2102.
- 26 (B) "FACILITY" MEANS THE MICHIGAN AUTOMOBILE INSURANCE
- 27 PLACEMENT FACILITY CREATED UNDER CHAPTER 33.



- 1 (C) "FEDERAL POVERTY GUIDELINES" MEANS THE POVERTY GUIDELINES
- 2 PUBLISHED ANNUALLY IN THE FEDERAL REGISTER BY THE UNITED STATES
- 3 DEPARTMENT OF HEALTH AND HUMAN SERVICES UNDER ITS AUTHORITY TO
- 4 REVISE THE POVERTY LINE UNDER 42 USC 9902.
- 5 (D) "INSURANCE AGENCY" MEANS AN AGENCY AS THAT TERM IS DEFINED
- 6 IN SECTION 1243.
- 7 (E) "INSURANCE PRODUCER" MEANS THAT TERM AS DEFINED IN SECTION
- 8 1201.
- 9 (F) "LCAP APPLICANT" MEANS AN INDIVIDUAL WHO MEETS ALL OF THE
- 10 QUALIFICATIONS OF SECTION 3277.
- 11 (G) "LOW-COST AUTOMOBILE INSURANCE POLICY" MEANS AN AUTOMOBILE
- 12 INSURANCE POLICY THAT SATISFIES THE REQUIREMENTS OF SECTION 3278.
- 13 SEC. 3276. AN OWNER OR REGISTRANT OF A MOTOR VEHICLE REQUIRED
- 14 TO BE REGISTERED IN THIS STATE WHO IS AN LCAP APPLICANT MAY COMPLY
- 15 WITH SECTION 3101 BY MAINTAINING A LOW-COST AUTOMOBILE INSURANCE
- 16 POLICY.
- 17 SEC. 3277. (1) TO QUALIFY FOR A LOW-COST AUTOMOBILE INSURANCE
- 18 POLICY, AN INDIVIDUAL MUST MEET ALL OF THE FOLLOWING
- 19 QUALIFICATIONS:
- 20 (A) RESIDE IN A HOUSEHOLD WITH A GROSS ANNUAL HOUSEHOLD INCOME
- 21 THAT IS EQUAL TO 133% OF THE FEDERAL POVERTY GUIDELINES OR LESS.
- 22 (B) HAVE BEEN CONTINUOUSLY LICENSED TO DRIVE AN AUTOMOBILE FOR
- 23 A PERIOD OF 3 YEARS.
- 24 (C) NOT HAVE HAD IN THE PRECEDING 3 YEARS MORE THAN 1 OF
- 25 EITHER, BUT NOT BOTH, OF THE FOLLOWING:
- 26 (i) A PROPERTY-DAMAGE-ONLY ACCIDENT IN WHICH HE OR SHE WAS
- 27 SUBSTANTIALLY AT FAULT.



- 1 (ii) AN INSURANCE ELIGIBILITY POINT FOR A MOVING VIOLATION, AS
- 2 DESCRIBED IN SECTION 2103.
- 3 (D) NOT HAVE HAD IN THE PRECEDING 3 YEARS A SUBSTANTIALLY AT-
- 4 FAULT ACCIDENT INVOLVING BODILY INJURY OR DEATH.
- 5 (E) NOT HAVE HAD A CONVICTION FOR 1 OR MORE OF THE FOLLOWING:
- 6 (i) A VIOLATION OF SECTION 625 OF THE MICHIGAN VEHICLE CODE,
- 7 1949 PA 300, MCL 257.625.
- 8 (ii) A VIOLATION DESCRIBED IN SECTION 601B OF THE MICHIGAN
- 9 VEHICLE CODE, 1949 PA 300, MCL 257.601B.
- 10 (iii) A FELONY OR MISDEMEANOR CONVICTION RELATING TO THE
- 11 OPERATION OF A MOTOR VEHICLE.
- 12 (2) AN INSURED UNDER A LOW-COST AUTOMOBILE INSURANCE POLICY
- 13 SHALL NOT PURCHASE OR MAINTAIN ANY AUTOMOBILE PERSONAL PROTECTION
- 14 INSURANCE COVERAGE OTHER THAN UNDER A LOW-COST AUTOMOBILE INSURANCE
- 15 POLICY FOR ANY ADDITIONAL VEHICLES IN THE INSURED'S HOUSEHOLD.
- 16 SEC. 3278. (1) AN INSURER THAT ISSUES A LOW-COST AUTOMOBILE
- 17 INSURANCE POLICY SHALL PROVIDE ALL OF THE FOLLOWING COVERAGE UNDER
- 18 THE POLICY:
- 19 (A) SECURITY AGAINST LOSS RESULTING FROM LIABILITY IMPOSED BY
- 20 LAW FOR PROPERTY DAMAGE, BODILY INJURY, OR DEATH SUFFERED BY A
- 21 PERSON ARISING OUT OF THE OWNERSHIP, MAINTENANCE, OR USE OF THE
- 22 MOTOR VEHICLE THAT MEETS THE REQUIREMENTS OF SECTION 3009.
- 23 (B) SECURITY FOR THE PAYMENT OF FIRST-PARTY MEDICAL BENEFITS,
- 24 PAYABLE IF THE OWNER OR REGISTRANT OF THE AUTOMOBILE IS INVOLVED IN
- 25 A MOTOR VEHICLE ACCIDENT, AS THAT TERM IS DEFINED IN SECTION 3101.
- 26 ALL OF THE FOLLOWING APPLY TO BENEFITS UNDER THIS SUBDIVISION:
- 27 (i) THE BENEFITS ARE PAYABLE ONLY FOR MEDICAL EXPENSES INCURRED



- 1 BECAUSE OF INJURY TO THE OWNER OR REGISTRANT.
- 2 (ii) THE BENEFITS ARE PAYABLE ONLY IF THERE IS NO OTHER HEALTH
- 3 AND ACCIDENT COVERAGE AVAILABLE TO THE OWNER OR REGISTRANT FOR THE
- 4 MEDICAL EXPENSES INCURRED.
- 5 (iii) THE LIMIT FOR BENEFITS IS \$50,000.00.
- 6 (iv) THE BENEFITS ARE PAYABLE ONLY FOR MEDICALLY APPROPRIATE
- 7 TREATMENT BY INDIVIDUALS LICENSED OR AUTHORIZED TO RENDER THE
- 8 TREATMENT UNDER ARTICLE 15 OF THE PUBLIC HEALTH CODE, 1978 PA 368,
- 9 MCL 333.16101 TO 333.18838.
- 10 (2) AN INSURER ISSUING A LOW-COST AUTOMOBILE INSURANCE POLICY
- 11 SHALL NOT PROVIDE COVERAGE IN THE POLICY FOR THE PAYMENT OF
- 12 BENEFITS DESCRIBED IN CHAPTER 31 UNLESS THE BENEFITS ARE REQUIRED
- 13 UNDER THIS SECTION.
- 14 SEC. 3280. (1) THE FACILITY SHALL PROVIDE FOR ALL OF THE
- 15 FOLLOWING:
- 16 (A) THE EQUITABLE DISTRIBUTION OF LCAP APPLICANTS TO
- 17 DESIGNATED PARTICIPATING MEMBERS IN ACCORDANCE WITH THE PLAN OF
- 18 OPERATION AS AMENDED UNDER SECTION 3310(3).
- 19 (B) THE ISSUANCE OF LOW-COST AUTOMOBILE INSURANCE POLICIES TO
- 20 LCAP APPLICANTS AS PROVIDED IN THE AMENDED PLAN OF OPERATION.
- 21 (C) THE APPOINTMENT OF A NUMBER OF PARTICIPATING MEMBERS TO
- 22 ACT ON BEHALF OF THE FACILITY FOR THE DISTRIBUTION OF RISKS OR FOR
- 23 THE SERVICING OF INDIVIDUALS INSURED UNDER LOW-COST AUTOMOBILE
- 24 POLICIES, AS PROVIDED IN THE AMENDED PLAN OF OPERATION AND
- 25 CONSISTENT WITH THIS SECTION. THE FACILITY SHALL DO ALL OF THE
- 26 FOLLOWING:
- 27 (i) APPOINT THOSE MEMBERS HAVING THE 5 HIGHEST PARTICIPATION



- 1 RATIOS, AS DEFINED IN SECTION 3303(E) (i), TO ACT ON BEHALF OF THE
- 2 FACILITY.
- 3 (ii) APPOINT UP TO 5 ADDITIONAL MEMBERS TO ACT ON BEHALF OF THE
- 4 FACILITY FROM AMONG OTHER MEMBERS WHO VOLUNTEER TO SO ACT AND WHO
- 5 MEET REASONABLE SERVICING STANDARDS ESTABLISHED IN THE AMENDED PLAN
- 6 OF OPERATION.
- 7 (iii) APPOINT ADDITIONAL MEMBERS TO ACT ON BEHALF OF THE
- 8 FACILITY AS NECESSARY TO DO ALL OF THE FOLLOWING:
- 9 (A) ASSURE CONVENIENT ACCESS TO THE LOW-COST AUTOMOBILE
- 10 INSURANCE POLICIES FOR ALL LCAP APPLICANTS IN THIS STATE.
- 11 (B) ASSURE A REASONABLE QUALITY OF SERVICE FOR INDIVIDUALS
- 12 INSURED UNDER LOW-COST AUTOMOBILE INSURANCE POLICIES.
- 13 (C) ASSURE A REASONABLE REPRESENTATION OF THE VARIOUS
- 14 INSURANCE MARKETING SYSTEMS.
- 15 (D) ASSURE REASONABLE CLAIMS HANDLING.
- 16 (E) ASSURE A REASONABLE RANGE OF CHOICE OF INSURERS FOR
- 17 INDIVIDUALS INSURED UNDER LOW-COST AUTOMOBILE INSURANCE POLICIES.
- 18 (D) STANDARDS AND MONITORING PROCEDURES TO ASSURE THAT
- 19 PARTICIPATING MEMBERS ACTING ON BEHALF OF THE FACILITY WITH RESPECT
- 20 TO LOW-COST AUTOMOBILE INSURANCE POLICIES DO ALL OF THE FOLLOWING:
- 21 (i) PROVIDE SERVICE TO INDIVIDUALS INSURED THAT IS EQUIVALENT
- 22 TO THE SERVICE PROVIDED TO PERSONS INSURED BY THE INSURER
- 23 VOLUNTARILY.
- 24 (ii) HANDLE CLAIMS IN AN EFFICIENT AND REASONABLE MANNER.
- 25 (iii) PROVIDE INTERNAL REVIEW PROCEDURES FOR INDIVIDUALS INSURED
- 26 IDENTICAL TO THOSE ESTABLISHED UNDER CHAPTER 21 FOR PERSONS INSURED
- 27 VOLUNTARILY.



- 1 (E) THE ESTABLISHMENT OF PROCEDURES AND GUIDELINES FOR THE
- 2 ISSUANCE OF BINDERS BY INSURANCE PRODUCERS ON RECEIPT OF THE
- 3 APPLICATION FOR COVERAGE.
- 4 (2) SECTIONS 3330, 3340(1) TO (3), 3355, 3360, AND 3380 APPLY
- 5 TO THE OFFERING OF LOW-COST AUTOMOBILE INSURANCE POLICIES THROUGH
- 6 THE FACILITY.
- 7 (3) A LOW-COST AUTOMOBILE INSURANCE POLICY SHALL BE ISSUED FOR
- 8 AN INITIAL TERM OF 6 MONTHS, RENEWABLE FOR SUBSEQUENT 6-MONTH
- 9 TERMS.
- 10 SEC. 3281. THE OTHER CHAPTERS OF THIS ACT APPLY TO THIS
- 11 CHAPTER UNLESS THE APPLICATION OF A PROVISION IN ANOTHER CHAPTER
- 12 WOULD BE INCONSISTENT WITH THIS CHAPTER, IN WHICH CASE THAT
- 13 PROVISION DOES NOT APPLY TO THIS CHAPTER.
- 14 SEC. 3282. (1) AN INSURANCE PRODUCER THAT OFFERS AUTOMOBILE
- 15 INSURANCE UNDER CHAPTER 33 SHALL OFFER LOW-COST AUTOMOBILE
- 16 INSURANCE POLICIES TO LCAP APPLICANTS.
- 17 (2) AN INSURANCE PRODUCER THAT OFFERS A LOW-COST AUTOMOBILE
- 18 INSURANCE POLICY SHALL PROVIDE TO AN LCAP APPLICANT WHO APPLIED FOR
- 19 A LOW-COST AUTOMOBILE INSURANCE POLICY A NOTICE RELATING TO
- 20 COVERAGE UNDER THE POLICY. THE INSURANCE PRODUCER SHALL PROVIDE THE
- 21 NOTICE IN A SEPARATE DOCUMENT AT THE TIME OF APPLICATION AND
- 22 INCLUDE THE FOLLOWING STATEMENT IN 14-POINT BOLDFACED TYPE OR FONT:
- 23 WARNING
- 24 INSURANCE COVERAGE UNDER THE POLICY YOU ARE BUYING PROVIDES
- 25 ONLY LIMITED MEDICAL COVERAGE UP TO A MAXIMUM OF \$50,000.00. THE
- 26 MEDICAL INSURANCE COVERS ONLY YOU AS THE OWNER OF THE VEHICLE.
- 27 THIS INSURANCE DOES NOT PROVIDE BENEFITS THAT ARE PROVIDED



- 1 UNDER A POLICY OF NO-FAULT INSURANCE IN THIS STATE, INCLUDING, BUT
- 2 NOT LIMITED TO, ANY OF THE FOLLOWING:
- 3 WAGE-LOSS BENEFITS.
- 4 SURVIVOR'S BENEFITS.
- 5 FUNERAL EXPENSES.
- 6 REPLACEMENT SERVICES.
- 7 PERSONAL PROTECTION BENEFITS FOR PASSENGERS IN THE VEHICLE,
- 8 PEDESTRIANS, OR ANY OTHER INDIVIDUAL.
- 9 (3) IN APPLYING FOR A LOW-COST AUTOMOBILE INSURANCE POLICY, AN
- 10 LCAP APPLICANT SHALL CERTIFY, TO THE BEST OF THE APPLICANT'S
- 11 KNOWLEDGE AND BELIEF, WHETHER REPRESENTATIONS MADE IN THE
- 12 APPLICATION AND IN DOCUMENTS SUBMITTED TO DEMONSTRATE ELIGIBILITY
- 13 FOR THE LOW-COST AUTOMOBILE INSURANCE POLICY ARE TRUE AND CORRECT
- 14 AND WHETHER THEY CONTAIN ANY MATERIAL MISREPRESENTATIONS OR
- 15 OMISSIONS OF FACT.
- 16 (4) A CERTIFICATION OF THE APPLICANT UNDER SUBSECTION (3) THAT
- 17 THE REPRESENTATIONS IN THE APPLICATION ARE TRUE AND CORRECT IS
- 18 PROOF THAT THE APPLICANT MEETS THE QUALIFICATIONS.
- 19 (5) AN INSURANCE PRODUCER OR AGENCY OR AN AUTHORIZED
- 20 REPRESENTATIVE OR EMPLOYEE OF AN INSURANCE PRODUCER OR AGENCY
- 21 INVOLVED IN THE SALE OF AUTOMOBILE INSURANCE UNDER THIS CHAPTER IS
- 22 NOT LIABLE TO ANY PERSON FOR DAMAGES ARISING FROM THE REDUCTION OR
- 23 INADEQUACY OF AUTOMOBILE INSURANCE BENEFITS AND DOES NOT HAVE ANY
- 24 OTHER LIABILITY FOR DAMAGES CAUSED BY, ARISING OUT OF, OR RELATED
- 25 TO ANY ACTUAL OR ALLEGED ACT, ERROR, OR OMISSION CONCERNING THE
- 26 CHOICE OF AUTOMOBILE INSURANCE BENEFITS UNDER THIS CHAPTER.
- 27 SEC. 3283. AN INSURER MAY OFFER AN INSURED UNDER A LOW-COST



- 1 AUTOMOBILE INSURANCE POLICY A PREMIUM INSTALLMENT OPTION UNDER
- 2 WHICH THE INSURED MAY PAY A SPECIFIED PORTION OR PORTIONS OF THE
- 3 PREMIUM FOR THE LOW-COST AUTOMOBILE INSURANCE POLICY ON A PERIODIC
- 4 BASIS. A PREMIUM FOR A LOW-COST AUTOMOBILE INSURANCE POLICY SHALL
- 5 NOT BE FINANCED IN ANY OTHER MANNER.
- 6 SEC. 3284. (1) AN INSURER THAT ISSUES A LOW-COST AUTOMOBILE
- 7 INSURANCE POLICY UNDER THE PILOT PROGRAM MAY OFFER THE INSURED ANY
- 8 OTHER ADDITIONAL TYPE OF AUTOMOBILE INSURANCE COVERAGE SUCH AS
- 9 UNINSURED MOTORISTS COVERAGE OR COLLISION COVERAGE THAT IS NOT
- 10 AVAILABLE UNDER THE LOW-COST AUTOMOBILE INSURANCE POLICY.
- 11 (2) AN INSURER SHALL NOT CONDITION THE SALE OF A LOW-COST
- 12 AUTOMOBILE INSURANCE POLICY ON THE PURCHASE OF ANY OTHER PRODUCT OR
- 13 SERVICE.
- 14 SEC. 3285. (1) A PERSON WHO LAWFULLY RENDERS TREATMENT TO AN
- 15 INJURED INDIVIDUAL FOR AN ACCIDENTAL BODILY INJURY COVERED BY A
- 16 LOW-COST AUTOMOBILE INSURANCE POLICY MAY CHARGE A REASONABLE AMOUNT
- 17 FOR THE PRODUCTS, SERVICES, AND ACCOMMODATIONS RENDERED. THE CHARGE
- 18 SHALL NOT EXCEED THE AMOUNT THE PERSON CUSTOMARILY RECEIVES FOR
- 19 LIKE PRODUCTS, SERVICES, AND ACCOMMODATIONS IN CASES THAT DO NOT
- 20 INVOLVE AUTOMOBILE INSURANCE, THE PROGRAM FOR MEDICAL ASSISTANCE
- 21 FOR THE MEDICALLY INDIGENT UNDER THE SOCIAL WELFARE ACT, 1939 PA
- 22 280, MCL 400.1 TO 400.119B, OR THE FEDERAL MEDICARE PROGRAM
- 23 ESTABLISHED UNDER SUBCHAPTER XVIII OF THE SOCIAL SECURITY ACT, 42
- 24 USC 1395 TO 1395KKK-1.
- 25 (2) ANY INFORMATION NEEDED BY AN INSURER TO DETERMINE THE
- 26 APPROPRIATE REIMBURSEMENT UNDER THIS SECTION SHALL BE PROVIDED BY
- 27 THE PERSON PROVIDING THE TREATMENT OR REHABILITATIVE OR



- 1 OCCUPATIONAL TRAINING.
- 2 (3) IF AN INSURER NEEDS INFORMATION TO DETERMINE THE
- 3 APPROPRIATE REIMBURSEMENT UNDER THIS SECTION AND THE INFORMATION IS
- 4 UNAVAILABLE OR NOT PROVIDED OR THE INFORMATION PROVIDED IS NOT
- 5 SUFFICIENT TO DETERMINE THE APPROPRIATE REIMBURSEMENT, THE INSURER
- 6 SHALL PAY THE AMOUNT THAT WOULD BE PAID UNDER R 418.10101 TO R
- 7 418.101504 OF THE MICHIGAN ADMINISTRATIVE CODE OR SCHEDULES OF
- 8 MAXIMUM FEES FOR WORKER'S DISABILITY COMPENSATION DEVELOPED UNDER
- 9 THOSE RULES.
- 10 (4) WHETHER A CHARGE IS REASONABLE OR WHETHER A PRODUCT,
- 11 SERVICE, OR ACCOMMODATION IS REASONABLY NECESSARY IS A QUESTION OF
- 12 LAW TO BE DECIDED BY THE COURT.
- 13 SEC. 3287. BY APRIL 1, 2016 AND BY APRIL 1 OF EACH SUBSEQUENT
- 14 YEAR, THE AUTOMOBILE INSURERS WHO ARE PARTICIPATING IN THE LOW-COST
- 15 AUTOMOBILE INSURANCE PROGRAM SHALL SUBMIT THE LOSS AND EXPENSE DATA
- 16 FROM LOW-COST AUTOMOBILE INSURANCE POLICIES AND A PROPOSED RATE FOR
- 17 THE LOW-COST AUTOMOBILE INSURANCE POLICY TO THE DIRECTOR.
- 18 SEC. 3288. BY AUGUST 1, 2017 AND BY AUGUST 1 OF EACH
- 19 SUBSEQUENT YEAR, THE DIRECTOR SHALL REPORT TO THE LEGISLATURE ON
- 20 SALES OF LOW-COST AUTOMOBILE INSURANCE POLICIES AND THE RESULTS OF
- 21 THOSE SALES.
- 22 SEC. 3289. THE DIRECTOR MAY ISSUE AN ORDER OR PROMULGATE RULES
- 23 UNDER THE ADMINISTRATIVE PROCEDURES ACT OF 1969, 1969 PA 306, MCL
- 24 24.201 TO 24.328, TO IMPLEMENT THIS CHAPTER.
- 25 SEC. 3290. THIS CHAPTER DOES NOT APPLY AFTER JULY 31, 2020.
- 26 Sec. 3301. (1) Every insurer authorized to write automobile
- 27 insurance in this state shall participate in an organization for



- 1 the purpose of doing all of the following:
- 2 (a) Providing the guarantee that automobile insurance coverage
- 3 will be available to any person who is unable to procure that
- 4 insurance through ordinary methods.
- 5 (b) Preserving to the public the benefits of price competition
- 6 by encouraging maximum use of the normal private insurance system.
- 7 (C) PROVIDING FUNDING FOR THE MICHIGAN AUTOMOBILE INSURANCE
- 8 FRAUD AUTHORITY AND THE AUTOMOBILE THEFT PREVENTION AUTHORITY.
- 9 (2) The organization created under this chapter shall be
- 10 called the "Michigan automobile insurance placement facility".
- 11 Sec. 3310. (1) The board of governors of the facility shall
- 12 consist of 11 governors. Seven of the governors shall be elected as
- 13 provided in the plan of operation. Four governors shall be
- 14 appointed by the commissioner, DIRECTOR, of which 2 shall represent
- insurance agents subject to section 1209(1) and 2 shall represent
- 16 the general public. Each governor appointed by the commissioner
- 17 pursuant to DIRECTOR UNDER this subsection shall serve an annual
- 18 term. The 7 elected members of the board of governors of the
- 19 facility shall be elected to serve annual terms commencing within
- 20 45 days after the annual determination of participation ratios.
- 21 Vacancies shall be filled as provided for in the plan of operation.
- 22 (2) AMENDMENTS TO THE PLAN OF OPERATION FOR THE FACILITY ARE
- 23 SUBJECT TO MAJORITY APPROVAL BY THE BOARD OF GOVERNORS AND
- 24 RATIFICATION BY A MAJORITY OF THE MEMBERSHIP. THE MEMBERSHIP VOTE
- 25 SHALL BE DETERMINED BY PARTICIPATION RATIO AS DEFINED IN SECTION
- 26 3303(E) (iii). The facility committee shall adopt a plan of operation
- 27 by majority vote of the committee and APPROVED AND RATIFIED



- 1 AMENDMENTS shall submit it BE SUBMITTED to the commissioner
- 2 DIRECTOR for his or her approval. If the commissioner DIRECTOR
- 3 finds that the AMENDMENTS TO THE plan meets MEET the requirements
- 4 of this chapter AND CHAPTER 32A, AS APPLICABLE, he or she shall
- 5 approve it. THEM. If the commissioner DIRECTOR finds that the
- 6 AMENDMENTS TO THE plan fails FAIL to meet the requirements of this
- 7 chapter OR CHAPTER 32A, AS APPLICABLE, he or she shall state in
- 8 what respects the plan is AMENDMENTS ARE deficient and shall afford
- 9 the facility committee BOARD OF GOVERNORS 10 days within which to
- 10 correct the deficiency. If the commissioner DIRECTOR and the
- 11 facility committee BOARD OF GOVERNORS fail to agree that the
- 12 provisions of CORRECTED AMENDMENTS TO the plan so submitted meet
- 13 the requirements of this chapter OR CHAPTER 32A, AS APPLICABLE,
- 14 either party to the controversy may submit the issue to the circuit
- 15 court for Ingham county for a determination. If the commissioner
- 16 DIRECTOR fails to render a written decision on the AMENDMENTS TO
- 17 THE plan of operation within 30 days after receipt of the plan,
- 18 AMENDMENTS, the plan AMENDMENTS shall be considered approved.
- 19 (3) Amendments to the plan of operation shall be subject to
- 20 majority approval by the board of governors and ratified by
- 21 majority of the membership vote. The membership vote shall be
- 22 determined as defined in section 3303(e)(iii). Amendments to the plan
- 23 of operation shall be subject to the approval of the commissioner,
- 24 as provided in subsection (2).
- 25 (3) BY SEPTEMBER 1, 2015, THE BOARD OF GOVERNORS SHALL APPROVE
- 26 AMENDMENTS TO THE PLAN OF OPERATION TO ASSURE THAT LOW-COST
- 27 AUTOMOBILE INSURANCE POLICIES UNDER CHAPTER 32A ARE OFFERED TO



- 1 RESIDENTS OF THIS STATE. THE AMENDMENTS SHALL BE SUBMITTED TO THE
- 2 MEMBERS FOR RATIFICATION AND TO THE DIRECTOR FOR APPROVAL, AS
- 3 REQUIRED BY SUBSECTION (2), SO THAT THE AMENDMENTS WILL BE IN PLACE
- 4 AND LOW-COST AUTOMOBILE INSURANCE POLICIES OFFERED IN THIS STATE BY
- 5 JANUARY 1, 2016.
- **6** (4) Every insurer authorized to write automobile insurance in
- 7 this state shall adhere to the plan of operation.
- 8 Sec. 3330. (1) The board of governors has the power to direct
- 9 the operation of the facility, including, at a minimum, the power
- 10 to do all of the following:
- 11 (a) To sue and be sued in the name of the facility. A judgment
- 12 against the facility shall not create any liabilities in the
- 13 individual participating members of the facility.
- 14 (b) To delegate ministerial duties, to hire a manager, to hire
- 15 legal counsel, and to contract for goods and services from others.
- 16 (c) To assess participating members on the basis of
- 17 participation ratios pursuant to section 3303 to cover anticipated
- 18 costs of operation and administration of the facility, to provide
- 19 for equitable servicing fees, and to share losses, profits, and
- 20 expenses pursuant to the plan of operation.
- 21 (d) To impose limitations on cancellation or nonrenewal by
- 22 participating members of facility-placed business, in addition to
- 23 the limitations imposed by chapters 21 and 32.
- 24 (e) To provide for a limited number of participating members
- 25 to receive equitable distribution of applicants; or to provide for
- 26 a limited number of participating members to service applicants in
- 27 a plan of sharing of losses in accordance with section 3320(1)(c)

- 1 and the plan of operation.
- 2 (f) To provide for standards of performance of service for the
- 3 participating members designated under subdivision (e).
- 4 (g) To adopt a plan of operation and any amendments to the
- 5 plan, consistent with this chapter, necessary to assure the fair,
- 6 reasonable, equitable, and nondiscriminatory manner of
- 7 administering the facility, including compliance with chapter 21,
- 8 and to provide for any other matters necessary or advisable to
- 9 implement this chapter, including matters necessary to comply with
- 10 the requirements of chapter 21.
- 11 (h) To assess self-insurers and insurers consistent with
- 12 chapter 31 and the assigned claims plan approved under section
- **13** 3171.
- 14 (I) UNTIL DECEMBER 31, 2019, TO ANNUALLY ASSESS PARTICIPATING
- 15 MEMBERS AND SELF-INSURERS AN AGGREGATE AMOUNT NOT TO EXCEED
- 16 \$21,000,000.00 TO COVER ANTICIPATED COSTS OF OPERATION AND
- 17 ADMINISTRATION OF THE MICHIGAN AUTOMOBILE INSURANCE FRAUD AUTHORITY
- 18 AND THE AUTOMOBILE THEFT PREVENTION AUTHORITY.
- 19 (2) The board of governors shall institute or cause to be
- 20 instituted by the facility or on its behalf an automatic data
- 21 processing system for recording and compiling data relative to
- 22 individuals insured through the facility. An automatic data
- 23 processing system established under this subsection shall, to the
- 24 greatest extent possible, be made compatible with the automatic
- 25 data processing system maintained by the secretary of state, to
- 26 provide for the identification and review of individuals insured
- 27 through the facility.



- 1 (3) BEFORE MARCH 1, 2015, THE BOARD OF GOVERNORS SHALL AMEND
- 2 THE PLAN OF OPERATION TO ESTABLISH APPROPRIATE PROCEDURES NECESSARY
- 3 TO MAKE ASSESSMENTS FOR AND TO CARRY OUT THE ADMINISTRATIVE DUTIES
- 4 AND FUNCTIONS OF THE MICHIGAN AUTOMOBILE INSURANCE FRAUD AUTHORITY.
- **5** Sec. 4501. As used in this chapter:
- 6 (a) "Authorized agency" means the department of state police;
- 7 a city, village, or township police department; a county sheriff's
- 8 department; a United States criminal investigative department or
- 9 agency; the prosecuting authority of a city, village, township,
- 10 county, or state or of the United States; the office of financial
- 11 and insurance regulation; DEPARTMENT; THE MICHIGAN AUTOMOBILE
- 12 INSURANCE FRAUD AUTHORITY; or the department of state.
- 13 (b) "Financial loss" includes, but is not limited to, loss of
- 14 earnings, out-of-pocket and other expenses, repair and replacement
- 15 costs, investigative costs, and claims payments.
- 16 (c) "Insurance policy" or "policy" means an insurance policy,
- 17 benefit contract of a self-funded plan, health maintenance
- 18 organization contract, nonprofit dental care corporation
- 19 certificate, or health care corporation certificate.
- 20 (d) "Insurer" means a property-casualty insurer, life insurer,
- 21 third party administrator, self-funded plan, health insurer, health
- 22 maintenance organization, nonprofit dental care corporation, health
- 23 care corporation, reinsurer, or any other entity regulated by the
- 24 insurance laws of this state and providing any form of insurance.
- 25 (E) "MICHIGAN AUTOMOBILE INSURANCE FRAUD AUTHORITY" MEANS THE
- 26 MICHIGAN AUTOMOBILE INSURANCE FRAUD AUTHORITY CREATED UNDER SECTION
- 27 6302.



- (H) (g)—"Practitioner" means a licensee of this state 8 9 authorized to practice medicine and surgery, psychology, 10 chiropractic, or law, any other licensee of the state, or an 11 unlicensed health care provider whose services are compensated, 12 directly or indirectly, by insurance proceeds, or a licensee 13 similarly licensed in other states and nations, or the practitioner 14 of any nonmedical treatment rendered in accordance with a 15 recognized religious method of healing.
- (I) (h) "Runner", "capper", or "steerer" means a person who 16 17 receives a pecuniary or other benefit from a practitioner, whether 18 directly or indirectly, for procuring or attempting to procure a 19 client, patient, or customer at the direction or request of, or in 20 cooperation with, a practitioner whose intent is to obtain benefits 21 under a contract of insurance or to assert a claim against an 22 insured or an insurer for providing services to the client, 23 patient, or customer. Runner, capper, or steerer does not include a 24 practitioner who procures clients, patients, or customers through 25 the use of public media.
- 26 (J) (i) "Statement" includes, but is not limited to, any
 27 notice statement, proof of loss, bill of lading, receipt for

- 1 payment, invoice, account, estimate of property damages, bill for
- 2 services, claim form, diagnosis, prescription, hospital or doctor
- 3 record, X-rays, test result, or other evidence of loss, injury, or
- 4 expense.
- 5 Sec. 6107. (1) Prior to SUBJECT TO SECTION 6307(1), BEFORE
- 6 April 1 of each year, each insurer engaged in writing insurance
- 7 coverages which THAT provide the security required by section
- 8 3101(1) within IN this state, as a condition of its authority to
- 9 transact insurance in this state, shall pay to the authority an
- 10 assessment equal to \$1.00 multiplied by the insurer's total earned
- 11 WRITTEN car years of insurance providing the security required by
- 12 section 3101(1) written in this state during the immediately
- 13 preceding calendar year.
- 14 (2) Money received pursuant to UNDER subsection (1), and all
- 15 other money received by the authority, shall be segregated and
- 16 placed in a fund to be known as the automobile theft prevention
- 17 fund. The AUTHORITY SHALL ADMINISTER THE automobile theft
- 18 prevention fund. shall be administered by the authority.
- 19 (3) Money in the automobile theft prevention fund shall be
- 20 expended in the following order of priority:
- 21 (a) To pay the costs of administration of the authority.
- 22 (b) To achieve the purposes and objectives of this chapter,
- 23 which may include, but not be limited to, the following:
- 24 (i) Provide financial support to the department of state police
- 25 and local law enforcement agencies for economic automobile theft
- 26 enforcement teams.
- **27** (*ii*) Provide financial support to state or local law



- 1 enforcement agencies for programs designed to reduce the incidence
- 2 of economic automobile theft.
- 3 (iii) Provide financial support to local prosecutors for
- 4 programs designed to reduce the incidence of economic automobile
- 5 theft.
- 6 (iv) Provide financial support to judicial agencies for
- 7 programs designed to reduce the incidence of economic automobile
- 8 theft.
- 9 (v) Provide financial support for neighborhood or community
- 10 organizations or business organizations for programs designed to
- 11 reduce the incidence of automobile theft.
- (vi) Conduct educational programs designed to inform automobile
- 13 owners of methods of preventing automobile theft and to provide
- 14 equipment, for experimental purposes, to enable automobile owners
- 15 to prevent automobile theft.
- 16 (4) Money in the automobile theft prevention fund shall only
- 17 be used for automobile theft prevention efforts. and shall be
- 18 distributed based on need and efficacy as determined by the
- 19 authority. THE BOARD SHALL DEVELOP PERFORMANCE METRICS THAT ARE
- 20 CONSISTENT, CONTROLLABLE, MEASURABLE, AND ATTAINABLE. THE BOARD
- 21 SHALL USE THE METRICS EACH YEAR TO EVALUATE NEW APPLICATIONS
- 22 SUBMITTED FOR FUNDING CONSIDERATION AND TO RENEW FUNDING FOR
- 23 EXISTING PROGRAMS.
- 24 (5) Money in the automobile theft prevention fund shall not be
- 25 considered state money.
- 26 CHAPTER 63
- 27 MICHIGAN AUTOMOBILE INSURANCE FRAUD AUTHORITY
- 28 SEC. 6301. AS USED IN THIS CHAPTER:



- 1 (A) "AUTHORITY" MEANS THE MICHIGAN AUTOMOBILE INSURANCE FRAUD
- 2 AUTHORITY CREATED IN SECTION 6302.
- 3 (B) "AUTOMOBILE INSURANCE FRAUD" MEANS A FRAUDULENT INSURANCE
- 4 ACT AS DESCRIBED IN SECTION 4503 THAT IS COMMITTED IN CONNECTION
- 5 WITH AUTOMOBILE INSURANCE, INCLUDING AN APPLICATION FOR AUTOMOBILE
- 6 INSURANCE.
- 7 (C) "BOARD" MEANS THE BOARD OF DIRECTORS OF THE AUTHORITY.
- 8 (D) "CAR YEARS" MEANS NET DIRECT PRIVATE PASSENGER AND
- 9 COMMERCIAL NONFLEET VEHICLE YEARS OF INSURANCE PROVIDING THE
- 10 SECURITY REQUIRED BY SECTION 3101(1) WRITTEN IN THIS STATE FOR THE
- 11 SECOND PREVIOUS CALENDAR YEAR AS REPORTED TO THE STATISTICAL AGENT
- 12 OF EACH INSURER.
- 13 (E) "FACILITY" MEANS THE MICHIGAN AUTOMOBILE INSURANCE
- 14 PLACEMENT FACILITY CREATED UNDER CHAPTER 33.
- 15 SEC. 6302. (1) THE MICHIGAN AUTOMOBILE INSURANCE FRAUD
- 16 AUTHORITY IS CREATED WITHIN THE FACILITY. THE FACILITY SHALL
- 17 PROVIDE STAFF FOR THE AUTHORITY AND SHALL CARRY OUT THE
- 18 ADMINISTRATIVE DUTIES AND FUNCTIONS AS DIRECTED BY THE BOARD.
- 19 (2) THE AUTHORITY IS NOT A STATE AGENCY, AND THE MONEY OF THE
- 20 AUTHORITY IS NOT STATE MONEY. THE AUTHORITY IS NOT A PUBLIC BODY
- 21 UNDER, AND A RECORD OF THE AUTHORITY IS NOT SUBJECT TO DISCLOSURE
- 22 UNDER, THE FREEDOM OF INFORMATION ACT, 1976 PA 442, MCL 15.231 TO
- 23 15.246.
- 24 (3) WITH THE DISCRETION TO APPROVE OR DISAPPROVE PROGRAMS TO
- 25 BE SUPPORTED, THE AUTHORITY SHALL DO BOTH OF THE FOLLOWING:
- 26 (A) PROVIDE FINANCIAL SUPPORT TO STATE OR LOCAL LAW



- 1 ENFORCEMENT AGENCIES FOR PROGRAMS DESIGNED TO REDUCE THE INCIDENCE
- 2 OF AUTOMOBILE INSURANCE FRAUD.
- 3 (B) PROVIDE FINANCIAL SUPPORT TO STATE OR LOCAL PROSECUTORIAL
- 4 AGENCIES FOR PROGRAMS DESIGNED TO REDUCE THE INCIDENCE OF
- 5 AUTOMOBILE INSURANCE FRAUD.
- 6 (4) THE AUTHORITY MAY PROVIDE FINANCIAL SUPPORT TO LAW
- 7 ENFORCEMENT, PROSECUTORIAL, INSURANCE, EDUCATION, OR TRAINING
- 8 ASSOCIATIONS FOR PROGRAMS DESIGNED TO REDUCE THE INCIDENCE OF
- 9 AUTOMOBILE INSURANCE FRAUD.
- 10 (5) THE PURPOSES, POWERS, AND DUTIES OF THE AUTHORITY ARE
- 11 VESTED IN AND SHALL BE EXERCISED BY A BOARD OF DIRECTORS. THE BOARD
- 12 OF DIRECTORS SHALL CONSIST OF 15 MEMBERS AS FOLLOWS:
- 13 (A) EIGHT MEMBERS WHO REPRESENT AUTOMOBILE INSURERS IN THIS
- 14 STATE, INCLUDING THE FOLLOWING:
- 15 (i) AT LEAST 2 MEMBERS WHO REPRESENT INSURER GROUPS WITH
- 16 350,000 OR MORE CAR YEARS.
- 17 (ii) AT LEAST 2 MEMBERS WHO REPRESENT INSURER GROUPS WITH FEWER
- 18 THAN 350,000 BUT 100,000 OR MORE CAR YEARS.
- 19 (iii) AT LEAST 1 MEMBER WHO REPRESENTS INSURER GROUPS WITH FEWER
- 20 THAN 100,000 CAR YEARS.
- 21 (B) THE DIRECTOR OR HIS OR HER DESIGNEE.
- 22 (C) THE ATTORNEY GENERAL OR HIS OR HER DESIGNEE.
- 23 (D) THE DIRECTOR OF THE DEPARTMENT OF STATE POLICE OR HIS OR
- 24 HER DESIGNEE.
- 25 (E) TWO MEMBERS WHO REPRESENT OTHER LAW ENFORCEMENT AGENCIES
- 26 IN THIS STATE.
- 27 (F) ONE MEMBER WHO REPRESENTS PROSECUTING ATTORNEYS IN THIS



- 1 STATE.
- 2 (G) ONE MEMBER WHO REPRESENTS THE GENERAL PUBLIC.
- 3 (6) THE MEMBERS OF THE BOARD REPRESENTING INSURERS SHALL BE
- 4 ELECTED BY AUTOMOBILE INSURERS DOING BUSINESS IN THIS STATE FROM A
- 5 LIST OF NOMINEES PROPOSED BY THE BOARD OF GOVERNORS OF THE
- 6 FACILITY. IN PREPARING THE LIST OF NOMINEES FOR THE MEMBERS, THE
- 7 BOARD OF GOVERNORS OF THE FACILITY SHALL SOLICIT NOMINATIONS FROM
- 8 AUTOMOBILE INSURERS DOING BUSINESS IN THIS STATE.
- 9 (7) THE MEMBERS OF THE BOARD REPRESENTING LAW ENFORCEMENT
- 10 AGENCIES OTHER THAN THE DEPARTMENT OF STATE POLICE SHALL BE
- 11 APPOINTED BY THE GOVERNOR. IN APPOINTING THE MEMBERS, THE GOVERNOR
- 12 SHALL SOLICIT INPUT FROM VARIOUS LAW ENFORCEMENT ASSOCIATIONS IN
- 13 THIS STATE.
- 14 (8) THE MEMBER OF THE BOARD REPRESENTING PROSECUTING ATTORNEYS
- 15 SHALL BE APPOINTED BY THE GOVERNOR. IN APPOINTING THE MEMBER, THE
- 16 GOVERNOR SHALL SOLICIT INPUT FROM THE PROSECUTING ATTORNEYS
- 17 ASSOCIATION OF MICHIGAN.
- 18 (9) THE MEMBER OF THE BOARD REPRESENTING THE GENERAL PUBLIC
- 19 SHALL BE APPOINTED BY THE GOVERNOR. THE GOVERNOR SHALL APPOINT AN
- 20 INDIVIDUAL WHO IS A RESIDENT OF THIS STATE AND IS NOT EMPLOYED BY
- 21 OR UNDER CONTRACT WITH A STATE OR LOCAL UNIT OF GOVERNMENT OR AN
- 22 INSURER.
- 23 (10) EXCEPT AS OTHERWISE PROVIDED IN THIS SUBSECTION, A MEMBER
- 24 OF THE BOARD SHALL SERVE FOR A TERM OF 4 YEARS OR UNTIL HIS OR HER
- 25 SUCCESSOR IS ELECTED, DESIGNATED, OR APPOINTED, WHICHEVER OCCURS
- 26 LATER. OF THE MEMBERS FIRST ELECTED OR APPOINTED UNDER THIS
- 27 SECTION, 2 MEMBERS REPRESENTING INSURERS AND 1 MEMBER REPRESENTING



- 1 LAW ENFORCEMENT AGENCIES SHALL SERVE FOR A TERM OF 2 YEARS, 3
- 2 MEMBERS REPRESENTING INSURERS, THE MEMBER REPRESENTING PROSECUTING
- 3 ATTORNEYS, AND THE MEMBER REPRESENTING THE GENERAL PUBLIC SHALL
- 4 SERVE FOR A TERM OF 3 YEARS, AND 3 MEMBERS REPRESENTING INSURERS
- 5 AND 1 MEMBER REPRESENTING LAW ENFORCEMENT AGENCIES SHALL SERVE FOR
- 6 A TERM OF 4 YEARS.
- 7 (11) THE BOARD IS DISSOLVED ON JANUARY 1, 2020.
- 8 SEC. 6303. (1) A MEMBER OF THE BOARD SHALL SERVE WITHOUT
- 9 COMPENSATION, EXCEPT THAT THE BOARD SHALL REIMBURSE A MEMBER IN A
- 10 REASONABLE AMOUNT FOR NECESSARY TRAVEL AND EXPENSES.
- 11 (2) A MAJORITY OF THE MEMBERS OF THE BOARD CONSTITUTE A QUORUM
- 12 FOR THE TRANSACTION OF BUSINESS AT A MEETING OR THE EXERCISE OF A
- 13 POWER OR FUNCTION OF THE AUTHORITY, NOTWITHSTANDING THE EXISTENCE
- 14 OF 1 OR MORE VACANCIES. NOTWITHSTANDING ANY OTHER PROVISION OF LAW,
- 15 ACTION MAY BE TAKEN BY THE AUTHORITY AT A MEETING ON A VOTE OF THE
- 16 MAJORITY OF ITS MEMBERS PRESENT IN PERSON OR THROUGH THE USE OF
- 17 AMPLIFIED TELEPHONIC EQUIPMENT, IF AUTHORIZED BY THE BYLAWS OR PLAN
- 18 OF OPERATION OF THE BOARD. THE AUTHORITY SHALL MEET AT THE CALL OF
- 19 THE CHAIR OR AS MAY BE PROVIDED IN THE BYLAWS OF THE AUTHORITY.
- 20 MEETINGS OF THE AUTHORITY MAY BE HELD ANYWHERE IN THIS STATE.
- 21 (3) THE BOARD SHALL ADOPT A PLAN OF OPERATION BY A MAJORITY
- 22 VOTE OF THE BOARD. VACANCIES ON THE BOARD SHALL BE FILLED IN
- 23 ACCORDANCE WITH THE PLAN OF OPERATION.
- 24 (4) THE BOARD SHALL CONDUCT ITS BUSINESS AT MEETINGS THAT ARE
- 25 HELD IN THIS STATE, OPEN TO THE PUBLIC, AND HELD IN A PLACE THAT IS
- 26 AVAILABLE TO THE GENERAL PUBLIC. HOWEVER, THE BOARD MAY ESTABLISH
- 27 REASONABLE RULES TO MINIMIZE DISRUPTION OF A MEETING OF THE BOARD.



- 1 AT LEAST 10 DAYS BUT NOT MORE THAN 60 DAYS BEFORE A MEETING, THE
- 2 BOARD SHALL PROVIDE PUBLIC NOTICE OF THE MEETING AT THE BOARD'S
- 3 PRINCIPAL OFFICE AND ON A PUBLICLY ACCESSIBLE INTERNET WEBSITE. THE
- 4 BOARD SHALL INCLUDE IN THE PUBLIC NOTICE OF ITS MEETING THE ADDRESS
- 5 WHERE MINUTES OF THE BOARD MAY BE INSPECTED BY THE PUBLIC. THE
- 6 BOARD MAY MEET IN A CLOSED SESSION FOR ANY OF THE FOLLOWING
- 7 PURPOSES:
- 8 (A) TO CONSIDER THE HIRING, DISMISSAL, SUSPENSION,
- 9 DISCIPLINING, OR EVALUATION OF OFFICERS OR EMPLOYEES OF THE
- 10 AUTHORITY.
- 11 (B) TO CONSULT WITH ITS ATTORNEY.
- 12 (C) TO COMPLY WITH STATE OR FEDERAL LAW, RULES, OR REGULATIONS
- 13 REGARDING PRIVACY OR CONFIDENTIALITY.
- 14 (5) THE BOARD SHALL DISPLAY INFORMATION CONCERNING THE
- 15 AUTHORITY'S OPERATIONS AND ACTIVITIES, INCLUDING, BUT NOT LIMITED
- 16 TO, THE ANNUAL FINANCIAL REPORT REQUIRED UNDER SECTION 6310, ON A
- 17 PUBLICLY ACCESSIBLE INTERNET WEBSITE.
- 18 (6) THE BOARD SHALL KEEP MINUTES OF EACH BOARD MEETING. THE
- 19 BOARD SHALL MAKE THE MINUTES OPEN TO PUBLIC INSPECTION AND
- 20 AVAILABLE AT THE ADDRESS DESIGNATED ON THE PUBLIC NOTICE OF ITS
- 21 MEETINGS. THE BOARD SHALL MAKE COPIES OF THE MINUTES AVAILABLE TO
- 22 THE PUBLIC AT THE REASONABLE ESTIMATED COST FOR PRINTING AND
- 23 COPYING. THE BOARD SHALL INCLUDE ALL OF THE FOLLOWING IN THE
- 24 MINUTES:
- 25 (A) THE DATE, TIME, AND PLACE OF THE MEETING.
- 26 (B) THE NAMES OF BOARD MEMBERS WHO ARE PRESENT AND BOARD
- 27 MEMBERS WHO ARE ABSENT.



- 1 (C) BOARD DECISIONS MADE DURING ANY PORTION OF THE MEETING
- 2 THAT WAS OPEN TO THE PUBLIC.
- 3 (D) ALL ROLL CALL VOTES TAKEN AT THE MEETING.
- 4 SEC. 6304. (1) BEFORE JANUARY 1, 2020, THE AUTHORITY SHALL
- 5 TRANSFER ALL ASSETS OF THE AUTHORITY TO THE DEPARTMENT OF STATE
- 6 POLICE FOR THE BENEFIT OF THE AUTOMOBILE THEFT PREVENTION
- 7 AUTHORITY.
- 8 (2) ON JANUARY 1, 2020, THE AUTHORITY IS DISSOLVED.
- 9 SEC. 6305. THE BOARD HAS THE POWERS NECESSARY TO CARRY OUT ITS
- 10 DUTIES UNDER THIS ACT, INCLUDING, BUT NOT LIMITED TO, THE POWER TO
- 11 DO THE FOLLOWING:
- 12 (A) SUE AND BE SUED IN THE NAME OF THE AUTHORITY.
- 13 (B) SOLICIT AND ACCEPT GIFTS, GRANTS, LOANS, AND OTHER AID
- 14 FROM ANY PERSON, THE FEDERAL GOVERNMENT, THIS STATE, A LOCAL UNIT
- 15 OF GOVERNMENT, OR AN AGENCY OF THE FEDERAL GOVERNMENT, THIS STATE,
- 16 OR A LOCAL UNIT OF GOVERNMENT.
- 17 (C) MAKE GRANTS AND INVESTMENTS.
- 18 (D) PROCURE INSURANCE AGAINST ANY LOSS IN CONNECTION WITH ITS
- 19 PROPERTY, ASSETS, OR ACTIVITIES.
- 20 (E) INVEST AT ITS DISCRETION ANY MONEY HELD IN RESERVE OR
- 21 SINKING FUNDS OR ANY MONEY NOT REQUIRED FOR IMMEDIATE USE OR
- 22 DISBURSEMENT AND TO SELECT AND USE DEPOSITORIES FOR ITS MONEY.
- 23 (F) CONTRACT FOR GOODS AND SERVICES AND ENGAGE PERSONNEL AS
- 24 NECESSARY.
- 25 (G) INDEMNIFY AND PROCURE INSURANCE INDEMNIFYING ANY MEMBER OF
- 26 THE BOARD FOR PERSONAL LOSS OR ACCOUNTABILITY RESULTING FROM THE
- 27 MEMBER'S ACTION OR INACTION AS A MEMBER OF THE BOARD.



- 1 (H) PERFORM OTHER ACTS NOT SPECIFICALLY ENUMERATED IN THIS
- 2 SECTION THAT ARE NECESSARY OR PROPER TO ACCOMPLISH THE PURPOSES OF
- 3 THE AUTHORITY AND THAT ARE NOT INCONSISTENT WITH THIS SECTION OR
- 4 THE PLAN OF OPERATION.
- 5 SEC. 6307. (1) SECTION 6107(1) DOES NOT APPLY FROM JANUARY 1,
- 6 2015 TO DECEMBER 31, 2019.
- 7 (2) BEFORE APRIL 1 OF EACH YEAR FROM 2015 TO 2019, AN INSURER
- 8 OR SELF-INSURER ENGAGED IN WRITING INSURANCE COVERAGES THAT PROVIDE
- 9 THE SECURITY REQUIRED BY SECTION 3101(1) IN THIS STATE, AS A
- 10 CONDITION OF ITS AUTHORITY TO TRANSACT INSURANCE IN THIS STATE,
- 11 SHALL PAY TO THE FACILITY, FOR DEPOSIT INTO THE ACCOUNT OF THE
- 12 AUTHORITY, AN ASSESSMENT DETERMINED BY THE FACILITY AS PROVIDED IN
- 13 THE PLAN OF OPERATION. THE ASSESSMENT SHALL BE BASED ON THE RATIO
- 14 OF THE CAR YEARS WRITTEN BY THE INSURER OR SELF-INSURER TO THE
- 15 TOTAL CAR YEARS WRITTEN IN THIS STATE BY ALL INSURERS AND SELF-
- 16 INSURERS.
- 17 (3) THE FACILITY SHALL SEGREGATE ALL MONEY RECEIVED UNDER
- 18 SUBSECTION (2), AND ALL OTHER MONEY RECEIVED BY THE AUTHORITY, FROM
- 19 OTHER MONEY OF THE FACILITY, IF APPLICABLE. THE FACILITY SHALL ONLY
- 20 EXPEND THE MONEY RECEIVED UNDER SUBSECTION (2) AS DIRECTED BY THE
- 21 BOARD.
- 22 (4) FROM THE MONEY RECEIVED EACH YEAR UNDER SUBSECTION (2),
- 23 THE BOARD SHALL PAY AT LEAST \$6,250,000.00 TO THE AUTOMOBILE THEFT
- 24 PREVENTION FUND CREATED IN SECTION 6107.
- 25 SEC. 6308. (1) AN INSURER AUTHORIZED TO TRANSACT AUTOMOBILE
- 26 INSURANCE IN THIS STATE, AS A CONDITION OF ITS AUTHORITY TO
- 27 TRANSACT INSURANCE IN THIS STATE, SHALL REPORT AUTOMOBILE INSURANCE



- 1 FRAUD DATA TO THE AUTHORITY USING THE FORMAT AND PROCEDURES ADOPTED
- 2 BY THE BOARD.
- 3 (2) THE DEPARTMENT OF STATE POLICE SHALL COOPERATE WITH THE
- 4 AUTHORITY AND SHALL PROVIDE AVAILABLE MOTOR VEHICLE FRAUD AND THEFT
- 5 STATISTICS TO THE AUTHORITY ON REQUEST.
- 6 (3) THE BOARD SHALL DEVELOP PERFORMANCE METRICS THAT ARE
- 7 CONSISTENT, CONTROLLABLE, MEASURABLE, AND ATTAINABLE. THE BOARD
- 8 SHALL USE THE METRICS EACH YEAR TO EVALUATE NEW APPLICATIONS
- 9 SUBMITTED FOR FUNDING CONSIDERATION AND TO RENEW FUNDING FOR
- 10 EXISTING PROGRAMS.
- 11 SEC. 6310. (1) BEGINNING JANUARY 1 OF THE YEAR AFTER THE
- 12 EFFECTIVE DATE OF THE AMENDATORY ACT THAT ADDED THIS SECTION, THE
- 13 AUTHORITY SHALL PREPARE AND PUBLISH AN ANNUAL FINANCIAL REPORT, AND
- 14 BEGINNING JULY 1 OF THE YEAR AFTER THE EFFECTIVE DATE OF THE
- 15 AMENDATORY ACT THAT ADDED THIS SECTION, THE AUTHORITY SHALL PREPARE
- 16 AND PUBLISH AN ANNUAL REPORT TO THE LEGISLATURE ON THE AUTHORITY'S
- 17 EFFORTS TO PREVENT AUTOMOBILE INSURANCE FRAUD AND COST SAVINGS THAT
- 18 HAVE RESULTED FROM THOSE EFFORTS.
- 19 (2) THE ANNUAL REPORT TO THE LEGISLATURE REQUIRED UNDER
- 20 SUBSECTION (1) SHALL DETAIL THE AUTOMOBILE INSURANCE FRAUD
- 21 OCCURRING IN THIS STATE FOR THE PREVIOUS YEAR, ASSESS THE IMPACT OF
- 22 THE FRAUD ON RATES CHARGED FOR AUTOMOBILE INSURANCE, SUMMARIZE
- 23 PREVENTION PROGRAMS, AND OUTLINE ALLOCATIONS MADE BY THE AUTHORITY.
- 24 THE MEMBERS OF THE BOARD, INSURERS, AND THE DIRECTOR SHALL
- 25 COOPERATE IN DEVELOPING THE REPORT AS REQUESTED BY THE AUTHORITY
- 26 AND SHALL MAKE AVAILABLE TO THE AUTHORITY RECORDS AND STATISTICS
- 27 CONCERNING AUTOMOBILE INSURANCE FRAUD, INCLUDING THE NUMBER OF



- INSTANCES OF SUSPECTED AND CONFIRMED INSURANCE FRAUD, NUMBER OF 1
- 2 PROSECUTIONS AND CONVICTIONS INVOLVING AUTOMOBILE INSURANCE FRAUD,
- AND AUTOMOBILE INSURANCE FRAUD RECIDIVISM. THE AUTHORITY SHALL 3
- EVALUATE THE IMPACT AUTOMOBILE INSURANCE FRAUD HAS ON THE CITIZENS
- OF THIS STATE AND THE COSTS INCURRED BY THE CITIZENS THROUGH 5
- INSURANCE, POLICE ENFORCEMENT, PROSECUTION, AND INCARCERATION 6
- BECAUSE OF AUTOMOBILE INSURANCE FRAUD. THE REPORT TO THE 7
- LEGISLATURE REQUIRED BY THIS SECTION SHALL BE SUBMITTED TO THE 8
- SENATE AND HOUSE OF REPRESENTATIVES STANDING COMMITTEES WITH 9
- PRIMARY JURISDICTION OVER INSURANCE ISSUES AND THE DIRECTOR. 10
- 11 Enacting section 1. The title and sections 3301, 3330, 4501,
- 12 and 6107 of the insurance code of 1956, 1956 PA 218, MCL 500.3301,
- 500.3330, 500.4501, and 500.6107, as amended by this amendatory 13
- 14 act, and sections 6301, 6302, 6303, 6304, 6305, 6307, 6308, and
- 6310 of the insurance code of 1956, 1956 PA 218, as added by this 15
- 16 amendatory act, take effect January 1, 2015.