

Mandatory Coverages	Formerly "O" No-Fault Law	El No-Fault Law (PA 07-0-003) (11-2-07) Medical	El No-Fault Law (As Amended) (PA 07-0-003)
<p>Legal liability:</p> <ul style="list-style-type: none"> ▶ Bodily injury - \$25,000 per person; \$50,000 per accident; ▶ Property damage - \$15,000 per accident <p>Compensation without regard to fault ("PIP"):</p> <ul style="list-style-type: none"> ▶ \$50,000 per person per accident for "reasonable and necessary" medical, chiropractic, optometric, podiatric, hospital, nursing, x-ray, dental, surgical, ambulance, and prosthetic services, and "nonmedical remedial care and treatment rendered in accordance with a recognized religious method of healing," within 5 years after the accident; ▶ \$50,000 per person per accident for "rehabilitation procedures or treatment and rehabilitative occupational training" provided within 10 years after the accident that are "necessary because of bodily injury" arising from use of motor vehicle; ▶ Benefits for lost income equivalent to: 100% of first \$125 lost gross income per week; 70% of next \$125 lost gross income per week; and 60% of any excess lost gross income per week, not the exceed total weekly benefit of \$400, starting day after accident and continuing up to additional 52 weeks, for work injured person would have performed; ▶ \$1,000 in death benefits 	<p>No-fault or "PIP" coverage:</p> <ul style="list-style-type: none"> ▶ Direct payment of up to \$10,000 for bodily injury sustained in automobile accident, as follows: <ul style="list-style-type: none"> • <i>Medical benefits</i> - 80% of all reasonable expenses for medically necessary "medical, surgical, x-ray, dental, and rehabilitative services, including prosthetic devices, and medically necessary ambulance, hospital, and nursing services"; reimbursement limited to "services and care that are lawfully provided, supervised, ordered, or prescribed" by a licensed physician, osteopath, dentist, or chiropractic physician, or provided by a hospital or ambulatory surgical center; an ambulance or EMT providing emergency transportation or treatment; an entity owned by physicians, osteopaths, chiropractors, or dentists; an entity owned by a hospital; a licensed health care clinic accredited by certain organizations; or a licensed health care clinic that meets certain criteria • <i>Disability benefits</i> - 60% of lost gross income, payable at least every 2 weeks; • <i>Death benefits</i> - The lesser of \$5,000 or the remainder of any PIP benefits. <p>Property damage liability coverage:</p> <ul style="list-style-type: none"> ▶ \$10,000 for physical damage expenses to the property. 	<p>No-fault or "PIP" coverage:</p> <ul style="list-style-type: none"> ▶ Direct payment of up to \$10,000 for bodily injury sustained in automobile accident, as follows: <ul style="list-style-type: none"> • <i>Medical benefits</i> - 80% of all reasonable expenses for medically necessary "medical, surgical, x-ray, dental, and rehabilitative services, including prosthetic devices, and medically necessary ambulance, hospital, and nursing services"; includes necessary "recognized" spiritual remedial treatment and services; • <i>Disability benefits</i> - 60% of lost gross income, payable at least every 2 weeks; • <i>Death benefits</i> - \$5,000 <p>Property damage liability coverage:</p> <ul style="list-style-type: none"> ▶ \$10,000 for physical damage expenses to the property. 	<p>No-fault or "PIP" coverage:</p> <ul style="list-style-type: none"> ▶ Direct payment of up to \$10,000 for bodily injury sustained in automobile accident, as follows: <ul style="list-style-type: none"> • <i>Medical benefits</i> - 80% of all reasonable expenses for medically necessary "medical, surgical, x-ray, dental, and rehabilitative services, including prosthetic devices, and medically necessary ambulance, hospital, and nursing services"; reimbursement limited to "services and care that are lawfully provided, supervised, ordered, or prescribed" by a licensed physician, osteopath, dentist, or chiropractic physician, or provided by a hospital or ambulatory surgical center; an ambulance or EMT providing emergency transportation or treatment; an entity owned by physicians, osteopaths, chiropractors, or dentists; an entity owned by a hospital; a licensed health care clinic accredited by certain organizations; or a licensed health care clinic that meets certain criteria • <i>Disability benefits</i> - 60% of lost gross income, payable at least every 2 weeks; • <i>Death benefits</i> - The lesser of \$5,000 or the remainder of any PIP benefits. <p>Property damage liability coverage:</p> <ul style="list-style-type: none"> ▶ \$10,000 for physical damage expenses to the property.

<p>Medical Fee Limits for PIP Reimbursement</p>	<p>Former CO/No-Limit Pay</p> <p>Provider obligated to assure that services will be:</p> <ul style="list-style-type: none"> ▶ Provided economically and only when, and to the extent, medically reasonable and necessary; ▶ Of a quality that meets professionally recognized standards of health care; and ▶ Supported by evidence of medical necessity and quality. 	<p>PI No Limit Law prior to Oct 1, 2007 repeal</p> <p>Provider only allowed to charge "reasonable amount" for services and supplies rendered, not to exceed "the amount the person or institution customarily charges for like services or supplies."</p>	<p>PI No Limit Law as amended and revised effective Jan 1, 2008</p> <p><i>Insurers may limit PIP reimbursement to 80% of the following schedule of maximum charges:</i></p> <ul style="list-style-type: none"> ▶ For emergency transport & treatment - 200% of Medicare ▶ For emergency services & care provided by a hospital - 75% of hospital's usual and customary charges ▶ For emergency services & care and related hospital inpatient services rendered by physician or dentist - usual and customary charges in community ▶ For hospital inpatient and outpatient services - 200% of Medicare Part A ▶ For all other medical services, supplies, and care - 200% of Medicare Part B, but no less than 2007 Medicare fee schedule; ▶ For medical care not reimbursable under Medicare - 80% of workers' comp fee schedule ▶ For medical care not reimbursable under Medicare or workers' comp - insurer not required to pay <p><i>Insurer:</i></p> <ul style="list-style-type: none"> • Cannot apply limitations on number of treatments or other utilization limits applicable under Medicare or workers' comp • Must reimburse provider rendering services under scope of license, regardless of whether certain providers or procedures are restricted under Medicare <p><i>Providers:</i></p> <ul style="list-style-type: none"> ■ Cannot bill insured for excess amounts when insurer limits payments per authorized fee schedule, except for amounts not covered due to PIP 20% coinsurance amount or for amounts that exceed maximum policy limits.
<p>Priority of Payments to Providers</p>			<p>Insurer required to reserve \$5,000 of PIP benefits for 30 days after notice of potential PIP-covered accident for payment to licensed physicians, osteopaths, or dentists rendering emergency care or inpatient care at a hospital; after 30 days, any unclaimed reserve amount may be used to pay other providers.</p>

	Former CO No-Fault Law	FL No-Fault Law (Prior to 09/01/2007) Regen	FL No-Fault Law, as amended and revised effective Jan 1, 2008
Port Recovery Restrictions	Policyholder immune from liability for economic damages	<p>Policyholder immune from liability for economic damages (pain & suffering) for non-permanent injuries.</p> <p>Immunity for non-economic damages inapplicable to the following types of injuries (i.e., "verbal threshold" standard for lawsuit):</p> <ul style="list-style-type: none"> ▶ Significant and permanent loss of important bodily function; ▶ Permanent injury within reasonable degree of medical probability, other than scarring or disfigurement; ▶ Significant permanent scarring or disfigurement; or ▶ Death 	Same immunity, applicable to accidents occurring on or after January 1, 2008.
Demand Letter		Requires insurer to pay late claim within 15 days after receipt of "demand letter" from provider; provider cannot file suit and potentially collect attorney fees until end of 15-day period.	Requires insurer to pay late claim within 30 days after receipt of "demand letter" from provider; provider cannot file suit and potentially collect attorney fees until end of 30-day period.
Mandatory Consolidation of PIP Claims			All PIP claims against an insurer related to the same health care provider for the same injured person must be brought together in single lawsuit unless good cause shown for bringing claims separately.
Unfair Trade Practices--Failure to Pay and Claims			If insurer fails to pay valid PIP claims with frequency to indicate general business practice, in violation of unfair and deceptive practices under Insurance Code.

No-Fault Insurance Comparison

March 26, 2008

State	Threshold for Tort Liability	Standard for Payment of PIP Benefits
<p>Colorado (Former No-Fault Law)</p>	<p>Policyholder immune from tort liability for:</p> <ul style="list-style-type: none"> • Economic damages, except for economic damages that exceed benefits available under applicable PIP coverage, including loss of earnings and loss of earning capacity extending beyond 52 weeks and not otherwise compensable under the applicable policy <p>Verbal Threshold</p> <ul style="list-style-type: none"> • Policyholder immune from tort liability for noneconomic damages (e.g., pain and suffering, et al), UNLESS motor vehicle accident results in: <ul style="list-style-type: none"> ✓ Death; ✓ Dismemberment; ✓ Permanent disability; ✓ Permanent disfigurement. <p>Monetary Threshold</p> <ul style="list-style-type: none"> • Policyholder immune from tort liability for noneconomic damages (e.g., pain and suffering, et al), UNLESS motor vehicle accident results in: <ul style="list-style-type: none"> ✓ Reasonable need for medical or rehabilitative services <i>having a reasonable value in excess of \$2,500.</i> 	<p>Compensation without regard to fault ("PIP")</p> <ul style="list-style-type: none"> • \$50,000 per person per accident for "reasonable and necessary" medical, chiropractic, optometric, podiatric, hospital, nursing, x-ray, dental, surgical, ambulance, and prosthetic services, and nonmedical remedial care and treatment rendered in accordance with a recognized religious method of healing, within 5 years after the accident; • \$50,000 per person per accident for rehabilitation procedures or treatment and rehabilitative occupational training provided within 10 years after the accident that are necessary because of bodily injury arising from use of motor vehicle;
<p>Florida (No-Fault Law prior to October 1, 2007 repeal)</p>	<p>Verbal Threshold</p> <p>Policyholder immune from liability for economic damages up to policy limits and for noneconomic damages for nonpermanent injuries.</p> <p>Immunity for noneconomic damages inapplicable to the following types of injuries:</p> <ul style="list-style-type: none"> • Significant and permanent loss of important bodily function; • Permanent injury within reasonable degree of medical probability, other than scarring or disfigurement; • Significant permanent scarring or disfigurement; or • Death. 	<p>No-fault or "PIP" coverage</p> <ul style="list-style-type: none"> • Direct payment of up to \$10,000 for bodily injury sustained in automobile accident, as follows: <ul style="list-style-type: none"> ✓ <i>Medical benefits</i> - 80% of all reasonable expenses for medically necessary medical, surgical, x-ray, dental, and rehabilitative services, including prosthetic devices, and medically necessary ambulance, hospital, and nursing services; includes necessary "recognized" spiritual remedial treatment and services.

State	Threshold for Tort Liability	Standard for Payment of PIP Benefits
<p>Florida (No-Fault Law, as reenacted and revised, effective January 1, 2008)</p>	<p>Verbal Threshold Same immunity, applicable to accidents occurring on or after January 1, 2008.</p>	<p>No-fault or "PIP" coverage <ul style="list-style-type: none"> • Direct payment of up to \$10,000 for bodily injury sustained in automobile accident, as follows: <ul style="list-style-type: none"> ✓ <i>Medical benefits</i> - 80% of all reasonable expenses for medically necessary medical, surgical, x-ray, dental, and rehabilitative services, including prosthetic devices, and medically necessary ambulance, hospital, and nursing services; reimbursement limited to services and care that are lawfully provided, supervised, ordered, or prescribed by a licensed physician, osteopath, dentist, or chiropractic physician; or provided by a hospital or ambulatory surgical center; an ambulance or EMT providing emergency transportation or treatment; an entity owned by physicians, osteopaths, chiropractors, or dentists; an entity owned by a hospital; a licensed health care clinic accredited by certain organizations; or a licensed health care clinic that meets certain criteria. </p>
<p>Hawaii</p>	<p>Monetary and Verbal Thresholds Cannot sue or be sued unless serious injuries. Immunity for noneconomic damages inapplicable to the following types of injuries: <ul style="list-style-type: none"> • Death; • Injury, which consists, in whole or in part, in a significant permanent loss of use of a part or function of the body; • Injury, which consists of permanent and serious disfigurement that results in subjection of the injured person to mental or emotional suffering; • Injury in which as a result of the injury, the personal injury protection benefits incurred by such person equal or exceed \$5,000. </p>	<p>No-fault or "PIP" coverage Personal injury protection benefits subject to an aggregate limit of \$10,000 per person for paying medical and rehabilitative costs. Personal injury protection benefits means all appropriate and reasonable treatment and expenses necessarily incurred as a result of accidental harm and that are substantially comparable to the requirements for prepaid health care plans, including medical services and rehabilitation.</p>

State	Threshold for Tort Liability	Standard for Payment of PIP Benefits
Kansas	<p>Monetary and Verbal Thresholds</p> <p>Immunity for noneconomic damages inapplicable to pain, suffering, mental anguish, inconvenience, and other nonpecuniary loss because of injury only in the event that:</p> <ul style="list-style-type: none"> • The injury requires medical treatment, described as medical benefits, having a reasonable value of \$2,000 or more; or • The injury consists in whole or in part of permanent disfigurement; a fracture to a weightbearing bone; a compound, comminuted, displaced, or compressed fracture; loss of a body member; permanent injury within reasonable medical probability; permanent loss of a bodily function; or death. 	<p>No-fault or "PIP" coverage</p> <p>Every insurance policy must include personal injury protection benefits for loss sustained as a result of an injury (bodily harm, sickness, disease, or death resulting from a motor vehicle accident)</p> <p>Minimum amounts required by law:</p> <ul style="list-style-type: none"> • \$4,500 per person for medical expenses; • \$4,500 for rehabilitation expenses to train for re-employment <p>Medical Benefits</p> <ul style="list-style-type: none"> • Includes all reasonable expenses, up to a limit of not less than \$4,500 for necessary health care rendered by practitioners licensed by the state board of healing arts to practice any branch of the healing arts or licensed psychologists, surgical, x-ray, and dental services, including prosthetic devices and necessary ambulance, hospital, and nursing services. • Includes services recognized and permitted under the laws of Kansas for an injured person who relies on spiritual means through prayer alone for healing in accordance with the person's religious beliefs. <p>Rehabilitation</p> <p>Rehabilitation benefits means reasonable expenses, up to a limit of not less than \$4,500, for necessary psychiatric or psychological services, occupational therapy and such occupational training and retraining as may be reasonably necessary to enable the injured person to obtain suitable employment.</p>
Kentucky	<p>Monetary and Verbal Thresholds</p> <p>Immunity for noneconomic damages inapplicable to pain, suffering, mental anguish, and inconvenience because of bodily injury, sickness, or disease only in the event that:</p> <ul style="list-style-type: none"> • The benefits that are payable for such injury as "medical expense", or that would be payable but for an authorized deductible, exceed \$1,000; or • The injury or disease consists in whole or in part of permanent disfigurement, a fracture to a bone, a compound, comminuted, displaced, or compressed fracture, loss of a body member, permanent injury within reasonable medical probability, permanent loss of bodily function, or death. <p>Note: Kentucky law allows policyholder to reject lawsuit threshold and retain right to sue for auto-related injury.</p>	<p>No-fault or "PIP" coverage</p> <p>The maximum amount of basic reparation benefits payable for all economic loss resulting from injury to any one person is \$10,000.</p> <p>Medical Expense</p> <ul style="list-style-type: none"> • Medical expense means reasonable charges incurred for reasonably needed products, services, and accommodations, including those for medical care, physical rehabilitation, rehabilitative occupational training, licensed ambulance services, and other remedial treatment and care. • Medical expense may include nonmedical remedial treatment rendered in accordance with a recognized religious method of healing. • Medical expense includes a total charge not in excess of \$1,000 per person for expenses in any way related to funeral, cremation, and burial. Does not include the portion of a charge for a room in a hospital, clinic, convalescent, or nursing home or similar institution.

State	Threshold for Tort Liability	Standard for Payment of PIP Benefits
<p>Massachusetts</p> <p>Monetary and Verbal Thresholds</p> <p>Immunity for noneconomic damages inapplicable to pain and suffering, including mental suffering associated with injury, sickness, or disease, only if:</p> <ul style="list-style-type: none"> • The reasonable and necessary expenses incurred in treating such injury, sickness, or disease for necessary medical, surgical, x-ray, and dental services, including prosthetic devices, and necessary ambulance, hospital, professional nursing, and funeral expenses are determined to be in excess of \$2,000; or • Such injury, sickness, or disease: <ul style="list-style-type: none"> ✓ Causes death; or ✓ Consists in whole or in part of loss of a body member; or ✓ Consists in whole or in part of permanent and serious disfigurement; or ✓ Results in loss of sight or hearing; or ✓ Consists of a fracture. 	<p>No-fault or "PIP" coverage</p> <ul style="list-style-type: none"> • Mandatory coverage of personal injury protection with a mandatory limit of \$8,000. • PIP means all reasonable expenses incurred within 2 years from the date of accident for necessary medical, surgical, x-ray, and dental services, including prosthetic devices and necessary ambulance, hospital, professional nursing and funeral services, as a result of bodily injury, sickness or disease, including death, without regard to negligence or gross negligence or fault of any kind, to the amount of at least \$8,000. <p>Health Insurance</p> <p>PIP provisions shall not provide for payment of more than \$2,000 of expenses incurred for medical, surgical, x-ray, and dental services, including prosthetic devices and necessary ambulance, hospital, professional nursing and funeral services if, and to the extent that, such expenses have been or will be compensated, paid, or indemnified pursuant to any policy of health, sickness, or disability insurance or any contract or agreement of any group, organization, partnership, or corporation to provide, pay for or reimburse the cost of medical, hospital, dental, or other health care services.</p>	<p>No-fault or "PIP" coverage</p> <p>All reasonable charges incurred for reasonably necessary product, services, and accommodations for an injured person's care, recovery, or rehabilitation.</p>
<p>Michigan</p>	<p>Verbal Threshold</p> <p>Immunity for noneconomic damages inapplicable only if the injured person has suffered death, serious impairment of body function,* or permanent serious disfigurement.</p> <p>*Serious impairment of body function means an objectively manifested impairment of an important body function that affects the person's general ability to lead his or her normal life.</p>	<p>No-fault or "PIP" coverage</p> <p>All reasonable charges incurred for reasonably necessary product, services, and accommodations for an injured person's care, recovery, or rehabilitation.</p>

State	Threshold for Total Disability	Standard for Payment of PIP Benefits
Minnesota	<p>Monetary and Verbal Thresholds</p> <p>Immunity for noneconomic damages inapplicable if:</p> <ul style="list-style-type: none"> • The sum of the following exceeds \$4,000: <ul style="list-style-type: none"> ✓ Reasonable medical expense benefits paid, payable, or payable except for any applicable deductible, <i>plus</i> ✓ Value of free medical or surgical care, <i>plus</i> ✓ Amount by which the value of reimbursable medical services or products exceeds the amount of benefit paid, payable, or payable except for any applicable deductible if the injured person was charged less than the average reasonable amount charged in Minnesota for similar services or products, <i>minus</i> ✓ Amount of medical expense benefits paid, payable, or payable, but for any applicable deductible, for diagnostic x-rays and for a procedure or treatment for rehabilitation and not for remedial purposes or a course of rehabilitative occupational training; or • The injury results in permanent disfigurement, permanent injury, death, or disability* for 60 days or more. <p>*Disability means the inability to engage in substantially all of the injured person's usual and customary daily activities.</p>	<p>No-fault or "PIP" coverage</p> <p>"Basic economic loss benefits" provide reimbursement for all loss suffered through injury and shall provide a minimum of \$40,000 for loss arising out of the injury of a person consisting of:</p> <ul style="list-style-type: none"> • A total of \$20,000 for income loss, replacement services loss, funeral expense loss, survivor's economic loss, and survivor's replacement services loss arising out of the injury; and • \$20,000 for medical expense loss arising out of injury to a person, which medical expense benefits shall reimburse all reasonable expenses for necessary services and devices as listed in statute (such as medical, surgical, or optical services and prescription drugs). <p>✓ Medical expense benefits for rehabilitative services cover procedures, treatment, or training if they are reasonable and appropriate for the particular case, if the cost is reasonable in relation to its probable rehabilitative effects, and if they are likely to contribute substantially to medical or occupational rehabilitation.</p> <p>Basic economic loss benefits include necessary remedial treatment and services recognized and permitted under the laws of Minnesota for an injured person who relies upon spiritual means through prayer alone for healing in accordance with that person's religious beliefs.</p>
New Jersey	<p>Verbal Threshold</p> <p>Immunity for noneconomic damages inapplicable if the person sustains a bodily injury that results in:</p> <ul style="list-style-type: none"> • Death; • Dismemberment; • Significant disfigurement or significant scarring; • Displaced fractures; • Loss of a fetus; or • A permanent injury within a reasonable degree of medical probability, other than scarring or disfigurement. <p>An injury shall be considered "permanent" when the body part or organ, or both, has not healed to function normally and will not heal to function normally with further medical treatment.</p> <p>Note: New Jersey law allows policyholder to reject lawsuit threshold and retain right to sue for auto-related injury.</p>	<p>No-fault or "PIP" coverage</p> <p>Payment of medical expense benefits for reasonable, necessary, and appropriate treatment and provision of services to persons sustaining bodily injury, not to exceed \$250,000 per person per accident.</p> <p>Insurer shall provide coverage for medical expense benefits in amounts of \$150,000, \$75,000, \$50,000, or \$15,000 per person per accident; except that medical expense benefits shall be paid in an amount not to exceed \$250,000 for all medically necessary treatment of permanent or significant brain injury, spinal cord injury, or disfigurement or for medically necessary treatment of other permanent or significant injuries rendered at a trauma center or acute care hospital immediately following the accident and until the patient is stable, no longer requires critical care, and can be safely discharged or transferred to another facility in the judgment of the attending physician.</p>

State	Threshold for Tort Liability	Standard for Payment of PIP Benefits
New York	<p>Verbal Threshold</p> <p>Immunity for noneconomic damages inapplicable if person has "serious injury", which means a personal injury that results in:</p> <ul style="list-style-type: none"> • Death; • Dismemberment; • Significant disfigurement; • A fracture; • Loss of a fetus; • Permanent loss of use of a body organ, member, function, or system; • Permanent consequential limitation of use of a body organ or member; • Significant limitation of use of a body function or system; or • Medically determined injury or impairment of a nonpermanent nature that prevents the injured person from performing substantially all of the material acts that constitute such person's usual and customary daily activities for not less than 90 days during the 180 days immediately following the occurrence of the injury or impairment. 	<p>No-fault or "PIP" coverage</p> <p>Pays for basic economic losses up to \$50,000 per person of all necessary expenses incurred for:</p> <ul style="list-style-type: none"> • Medical, hospital, surgical, nursing, dental, ambulance, x-ray, prescription drug, and prosthetic services; • Psychiatric, physical therapy, and occupational therapy and rehabilitation; • Nonmedical remedial care and treatment rendered in accordance with a religious method of healing; and • Any other professional health services, without limitation as to time, if within one year after the date of the accident it is ascertainable that further expenses may be incurred as a result of the injury. <p>Owners liable for first party benefits (payments to reimburse a person for basic economic loss on account of personal injury) to certain persons under statute.</p>
North Dakota	<p>Monetary and Verbal Thresholds:</p> <p>Immunity for noneconomic damages inapplicable if person has:</p> <ul style="list-style-type: none"> • Serious injury, which means: <ul style="list-style-type: none"> ✓ Death; ✓ Dismemberment; ✓ Serious and permanent disfigurement; or ✓ Disability beyond sixty days; or • Medical expenses in excess of \$2,500. 	<p>No-fault or "PIP" coverage</p> <p>Maximum amount for basic no-fault benefits payable for economic loss (medical expenses, rehabilitation expenses, work loss, replacement services loss, survivors' income loss, survivors' replacement services loss, and funeral, cremation, and burial expenses) is \$30,000 per person.</p> <p>Medical expenses means usual and customary charges incurred for reasonable and necessary medical, surgical, diagnostic, x-ray, dental, prosthetic, ambulance, hospital, or professional nursing services or services for remedial treatment and care. Usual and customary charges do not include:</p> <ul style="list-style-type: none"> • Charges for drugs sold without a prescription; • Charges for experimental treatments; • Charges for medically unproven treatments. <p>Rehabilitation expense means the cost of a procedure or treatment for rehabilitation or a course of rehabilitative occupational training if the procedure, treatment, or training:</p> <ul style="list-style-type: none"> • Is reasonable and appropriate for the particular case; • Its cost is reasonable in relation to its probable rehabilitative effects; and • It is likely to contribute substantially to medical or occupational rehabilitation.

State	Threshold for Tort Liability	Standard for Payment of PIP Benefits
<p>Pennsylvania</p> <p>Verbal Threshold</p> <p>Policyholders have 2 options for tort insurance:</p> <ul style="list-style-type: none"> • Limited tort: Cannot recover damages from pain and suffering unless the injuries fall within the definition of "serious injury".* • Unlimited tort: Unrestricted rights to bring suit against the negligent party for recovery of all medical and other out-of-pocket expenses and may seek financial compensation for pain and suffering and other monetary damages. <p>*Serious injury means a personal injury resulting in death, serious impairment of body function, or permanent serious disfigurement.</p>	<p>No-fault or "PIP" coverage</p> <p>Minimum required coverage of \$5,000.</p> <p>Medical benefit coverage provides reasonable and necessary medical treatment and rehabilitative services, including hospital, dental, surgical, psychiatric, psychological, osteopathic, ambulance, chiropractic, licensed physical therapy, nursing services, vocational rehabilitation and occupational therapy, speech pathology and audiology, optometric services, medications, medical supplies, and prosthetic devices.</p>	<p>No-fault or "PIP" coverage</p> <p>Not less than \$3,000 per person, the reasonable value of all expenses for necessary medical expenses (medical services; surgical services; x-ray services; dental services; rehabilitation services, including prosthetic devices; ambulance services; hospital services; and nursing services)</p> <p>To determine the "reasonable value" of the medical expenses, the commissioner of insurance conducts a relative value study of services and accommodations for the diagnosis, care, recovery, or rehabilitation of an injured person in the most populous county in Utah.</p> <p>Medical expenses includes expenses for any nonmedical care and treatment rendered in accordance with a recognized religious method of healing.</p> <p>Deductibles are not permitted with respect to the personal injury protection coverages.</p>
<p>Utah</p> <p>Monetary and Verbal Thresholds</p> <p>Immunity for noneconomic damages inapplicable to the following types of injuries:</p> <ul style="list-style-type: none"> • Death; • Dismemberment; • Permanent disability or permanent impairment based on objective findings; • Permanent disfigurement; or • Medical expenses to a person in excess of \$3,000. 		