A-Engrossed House Bill 2326

Ordered by the House February 27 Including House Amendments dated February 27

Ordered printed by the Speaker pursuant to House Rule 12.00A (5). Presession filed (at the request of House Interim Committee on Judiciary for Oregon Trial Lawyers Association)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Increases motor vehicle liability coverage required for property damage and certain personal injury protection benefits.

A BILL FOR AN ACT

2 Relating to motor vehicle liability coverage; creating new provisions; and amending ORS 742.524 and 806.070.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 742.524 is amended to read:

742.524. (1) Personal injury protection benefits as required by ORS 742.520 shall consist of the following payments for the injury or death of each person:

- (a) All reasonable and necessary expenses of medical, hospital, dental, surgical, ambulance and prosthetic services incurred within one year after the date of the person's injury, but not more than \$15,000 in the aggregate for all such expenses of the person. Expenses of medical, hospital, dental, surgical, ambulance and prosthetic services shall be presumed to be reasonable and necessary unless the provider is given notice of denial of the charges not more than 60 calendar days after the insurer receives from the provider notice of the claim for the services. At any time during the first 50 calendar days after the insurer receives notice of claim, the provider shall, within 10 business days, answer in writing questions from the insurer regarding the claim. For purposes of determining when the 60-day period provided by this paragraph has elapsed, counting of days shall be suspended if the provider does not supply written answers to the insurer within 10 days and [shall] may not resume until the answers are supplied.
- (b) If the injured person is usually engaged in a remunerative occupation and if disability continues for at least 14 days, 70 percent of the loss of income from work during the period of the injured person's disability until the date the person is able to return to the person's usual occupation. This benefit is subject to a maximum payment of [\$1,250] \$3,000 per month and a maximum payment period in the aggregate of 52 weeks. As used in this paragraph, "income" includes but is not limited to salary, wages, tips, commissions, professional fees and profits from an individually owned business or farm.
- (c) If the injured person is not usually engaged in a remunerative occupation and if disability continues for at least 14 days, the expenses reasonably incurred by the injured person for essential services that were performed by a person who is not related to the injured person or residing in the

NOTE: Matter in **boldfaced** type in an amended section is new; matter [italic and bracketed] is existing law to be omitted. New sections are in **boldfaced** type.

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- injured person's household in lieu of the services the injured person would have performed without income during the period of the person's disability until the date the person is reasonably able to perform such essential services. This benefit is subject to a maximum payment of \$30 per day and a maximum payment period in the aggregate of 52 weeks.
- (d) All reasonable and necessary funeral expenses incurred within one year after the date of the person's injury, but not more than \$5,000.
- (e) If the injured person is a parent of a minor child and is required to be hospitalized for a minimum of 24 hours, \$25 per day for child care, with payments to begin after the initial 24 hours of hospitalization and to be made for as long as the person is unable to return to work if the person is engaged in a remunerative occupation or for as long as the person is unable to perform essential services that the person would have performed without income if the person is not usually engaged in a remunerative occupation, but not to exceed \$750.
- (2) With respect to the insured person and members of that person's family residing in the same household, an insurer may offer forms of coverage for the benefits required by subsection (1)(a), (b) and (c) of this section with deductibles of up to \$250.

SECTION 2. ORS 806.070 is amended to read:

806.070. (1) This section establishes a schedule of payments for the following purposes:

- (a) An insurance policy described under ORS 806.080 must provide for payment of at least amounts necessary to cover the minimum required payments under this section to qualify for use for financial responsibility under ORS 806.060.
- (b) A person who is self-insured under ORS 806.130 must agree to pay according to the payment schedule established by this section.
- (c) The payment schedule is the minimum required payment of a judgment for purposes of ORS 809.020, 809.130 and 809.415.
 - (2) The schedule of payments is as follows:
 - (a) \$25,000 because of bodily injury to or death of one person in any one accident;
- (b) Subject to that limit for one person, \$50,000 because of bodily injury to or death of two or more persons in any one accident; and
- (c) [\$10,000] **\$20,000** because of injury to or destruction of the property of others in any one accident.
- SECTION 3. The amendments to ORS 742.524 and 806.070 by sections 1 and 2 of this 2009 Act apply to motor vehicle insurance policies issued or renewed on or after the effective date of this 2009 Act.