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NJSA: 17:28-1.5

(Medical expense--benefits)

LAWS OF: 1991

CHAPTER: 154

Bill No:

A 3325

Sponsor(s):

Doria & others

Date Introduced: April 23, 1990

Committee: Assembly: Insurance

Senate:

Labor

A mended during passage:

Yes

A mendments during passage

denoted by asterisks.

Date of Passage:

Assembly:

January 31, 1991

Senate:

March 25, 1991

Date of Approval: June 7, 1991

Following statements are attached if available:

Sponsor statement:

Yes

Committee Statement: Assembly: Yes

Senate:

Yes

Fiscal Note:

Νo

Veto Message:

No

Message on signing:

No

Following were printed:

Reports:

No

Hearings:

No

Report mentioned in statements — not available as of 9-1-91

KBG/SLJ 12/7/06- unable to $f_{in} d$

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[SECOND REPRINT] ASSEMBLY, No. 3325

STATE OF NEW JERSEY

INTRODUCED APRIL 23, 1990

By Assemblymen DORIA, PASCRELL, Kronick, Kenny and Marsella

AN ACT establishing certain medical expense benefits coverage and a tort threshold for certain noneconomic loss for passengers injured on certain motor buses and ² amending P.L.1988, c.119 and ² supplementing chapter 28 of Title 17 of the Revised Statutes.

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BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

- 1. As used in this act:
- "Commissioner" means the Commissioner of Insurance.
- "Hospital expenses" means:
 - a. The cost of a semiprivate room, based on rates customarily charged by the institution in which the recipient of benefits is confined;
 - b. The cost of board, meals and dietary services;
 - c. The cost of other hospital services, such as operating room; medicines, drugs, anesthetics; treatments with X-ray, radium and other radioactive substances; laboratory tests, surgical dressings and supplies; and other medical care and treatment rendered by the hospital;
 - d. The cost of treatment by a physiotherapist;
 - e. The cost of medical supplies, such as prescribed drugs and medicines; blood and blood plasma; artificial limbs and eyes; surgical dressings, casts, splints, trusses, braces, crutches; rental of wheelchair, hospital bed or iron lung; oxygen and rental of equipment for its administration.

"Medical expenses" means expenses for medical treatment, surgical treatment, dental treatment, professional nursing services, hospital expenses, rehabilitation services, X-ray and other diagnostic services, prosthetic devices, ambulance services, medication and other reasonable and necessary expenses resulting from the treatment prescribed by persons licensed to practice medicine and surgery pursuant to R.S.45:9-1 et seq., dentistry pursuant to R.S.45:6-1 et seq., psychology pursuant to P.L.1966, c.282 (C.45:14B-1 et seq.) or chiropractic pursuant to P.L.1953, c.233 (C.45:9-41.4 et seq.) or by persons similarly licensed in other states and nations or any nonmedical remedial treatment rendered in accordance with a recognized religious method of healing.

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.
Matter enclosed in superscript numerals has been adopted as follows:

Assembly AIN committee amendments adopted January 10, 1991.

Senate SLI committee amendments adopted March 11, 1991.

"Motor bus" means an omnibus, as defined in R.S.39:1-1, ²[which operates between fixed termini and on a regular schedule,]² except that "motor bus" shall not include:

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- a. Vehicles engaged in the transportation of passengers for hire in the manner and form commonly called taxicab service unless such service becomes or is held out to be regular service between stated termini;
- b. Hotel buses used exclusively for the transportation of hotel patrons to or from local railroad or other common carrier stations including local airports;
- c. Buses operated for the transportation of enrolled children and adults only when serving as chaperones to or from a school, school connected activity, day camp, summer day camp, nursery school, child care center, pre-school center or other similar places of education, including "School Vehicle Type I" and "School Vehicle Type II" as defined in R.S.39:1-1;
- d. Any autobus with a carrying capacity of not more than 13 passengers operated under municipal consent upon a route established wholly within the limits of a single municipality or with a carrying capacity of not more than 20 passengers operated under municipal consent upon a route established wholly within the limits of not more than four contiguous municipalities within any county of the fifth or sixth class, which route in either case does not in whole or in part parallel upon the same street the line of any street railway or traction railway or any other autobus route;
- e. Autocabs, limousines or livery services as defined in R.S.48:16–13, unless such service becomes or is held out to be regular service between stated termini;
- f. Any vehicle used in a "ridesharing" arrangement, as defined by the "New Jersey Ridesharing Act of 1981," P.L.1981, c.413 (C.27:26-1 et al); or
- g. Any motor bus owned and operated by the New Jersey Transit Corporation.

"Noneconomic loss" means pain, suffering and inconvenience.

"Passenger" means any person occupying, entering into or alighting from a motor bus, except employees of the owner or operator of the motor bus while they are on duty.

- 2. a. Every owner ²[or], ² registered owner ²or operator ² of a motor bus registered or principally garaged in this State shall maintain medical expense benefits coverage, under provisions approved by the commissioner, for the payment of benefits without regard to negligence, liability or fault of any kind, to any passenger who sustained bodily injury as a result of an accident while occupying, entering into or alighting from a motor bus.
- b. Medical expense benefits coverage shall include the payment of reasonable medical expenses in an amount not to exceed \$250,000 per person per accident. In event of death,

payments shall be made to the estate of the decedent.

- Every owner, registrant or operator of a motor bus registered or principally garaged in this State and every person or organization legally responsible for his acts or omissions, is hereby exempted from tort liability for noneconomic loss to a passenger who has a right to receive benefits under section 2 of this act as a result of bodily injury arising out of the ownership, operation, maintenance or use of a motor ¹[vehicle] bus¹ in this State, unless that person has sustained a personal injury which results in 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 a medically determined injury or impairment of a non-permanent nature which prevents the injured person from performing substantially all of the material acts which constitute that 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.
- 4. Evidence of the amounts collectible or paid to an injured passenger pursuant to section 2 of this act is inadmissible in a civil action against an owner, registrant or operator of a motor bus for recovery of damages for bodily injury by such injured passenger.

The court shall instruct the jury that, in arriving at a verdict as to the amount of the damages for noneconomic loss to be recovered by the injured passenger, the jury shall not speculate as to the amount of the medical expense benefits paid or payable under section 2 to the injured passenger.

Nothing in this section shall be construed to limit the right of recovery, against the tortfeasor, of uncompensated economic loss sustained by the injured passenger.

- 15. The Commissioner of Insurance shall conduct an analysis of the impact of enactment of this act on the liability insurance market for motor buses subject to this act including, but not limited to, the availability of, and the rates and premiums for, that insurance, during the first twelve months after the effective date of this act. Within 120 after the close of that twelve month period, the commissioner shall report the results of that analysis to the Legislature and to the Chairmen of the Senate Labor, Industry and Professions Committee and the Assembly Insurance Committee, or their successor committees. 1
- ²6. Section 10 of P.L.1988, c.119 (C.39:6A-4.6) is amended to read as follows:
- 10. The Commissioner of Insurance shall, within 90 days after the effective date of P.L.1990, c.8 (C.17:33B-1 et al.), promulgate medical fee schedules on a regional basis for the reimbursement of health care providers providing services or

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equipment for medical expense benefits for which payment is to be made by an automobile insurer under personal injury protection coverage pursuant to P.L.1972, c.70 (C.39:6A-1 et seq.), or by an insurer under medical expense benefits coverage pursuant to section 2 of P.L. , c. (C.)(now pending before the Legislature as this bill). These fee schedules shall be promulgated on the basis of the type of service provided, and shall incorporate the reasonable and prevailing fees of 75% of the practitioners within the region. If, in the case of a specialist provider, there are fewer than 50 specialists within a region, the fee schedule shall incorporate the reasonable and prevailing fees of the specialist providers on a Statewide basis. These schedules shall be reviewed biannually by the commissioner.

No health care provider may demand or request any payment from any person in excess of those permitted by the medical fee schedules established pursuant to this section, nor shall any person be liable to any health care provider for any amount of money which results from the charging of fees in excess of those permitted by the medical fee schedules established pursuant to this section.²

(cf: P.L.1990, c.8, s.7)

 1 [5.] 2 [6. 1] $^{7.2}$ This act shall take effect on the 2 [30th] 12 0th day following enactment.

INSURANCE

 Requires \$250,000 medical expense benefits coverage for motor bus passengers and provides a verbal tort threshold for certain pain and suffering suits.

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hereby exempted from tort liability for nonecomonic loss to a passenger who has a right to receive benefits under section 2 of this act as a result of bodily injury arising out of the ownership, operation, maintenance or use of a motor vehicle in this State, unless that person has sustained a personal injury which results in 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 a medically determined injury or impairment of a non-permanent nature which prevents the injured person from performing substantially all of the material acts which constitute that person's usual and customary daily activities for not less than 90 days during the 180 days

4. Evidence of the amounts collectible or paid to an injured passenger pursuant to section 2 of this act is inadmissible in a civil action against an owner, registrant or operator of a motor bus for recovery of damages for bodily injury by such injured passenger.

immediately following the occurrence of the injury or impairment.

The court shall instruct the jury that, in arriving at a verdict as to the amount of the damages for noneconomic loss to be recovered by the injured passenger, the jury shall not speculate as to the amount of the medical expense benefits paid or payable under section 2 to the injured passenger.

Nothing in this section shall be construed to limit the right of recovery, against the tortfeasor, of uncompensated economic loss sustained by the injured passenger.

5. This act shall take effect on the 30th day following enactment.

Spanson STATEMENT

Many of the motor bus carriers in this State are facing increasing insurance premiums because of the escalation of suits filed by their passengers for minor injuries. These increases in premiums are high enough in some urban areas to threaten the existence of this necessary form of public transportation. This bill address these concerns in a constructive and equitable manner.

This bill requires that the owners and operators of motor buses must provide \$250,000 medical expense benefit coverage on a no-fault basis for any passenger injured as a result of an accident while occupying, entering into or alighting from a motor bus. In return for that coverage, an injured passenger would be subject to a verbal threshold in any suit the passenger may file for noneconomic loss against the owner or operator of the motor bus.

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1	INSURANCE
2	
3	Requires \$250,000 medical expense benefits coverage for motor
4	bus passengers and provides a verbal tort threshold for certain
5	pain and suffering suits.

ASSEMBLY INSURANCE COMMITTEE

STATEMENT TO

ASSEMBLY, No. 3325

with Assembly committee amendments

STATE OF NEW JERSEY

DATED: JANUARY 10, 1991

The Assembly Insurance Committee reports favorably and with committee amendments Assembly Bill No. 3325.

This bill requires that owners and operators of private commercial motor buses must provide \$250,000 medical expense benefit coverage on a no-fault basis for any passenger injured as a result of an accident while occupying, entering into or alighting from a motor bus. In return for that coverage, an injured passenger would be subject to a "verbal threshold" in any suit the passenger may file for noneconomic loss against the owner or operator of the bus.

COMMITTEE AMENDMENTS

The committee amended the bill to require the Commissioner of Insurance to conduct an analysis of the impact of the enactment of the bill on the liability insurance market for motor buses subject to its provisions during the first twelve months the bill is in effect and to report the results of that analysis to the Legislature and to the Chairmen of the Senate Labor, Industry and Professions Committee and the Assembly Insurance Committee, or their successor committees, within 120 days after the close of that twelve month period. The analysis shall include, but not be limited to, a study of the availability of, and the rates and premiums for, that insurance. A technical amendment was also made to change one reference in the bill from "motor vehicle" to "motor bus."

SENATE LABOR, INDUSTRY AND PROFESSIONS COMMITTEE

STATEMENT TO

[FIRST REPRINT] ASSEMBLY, No. 3325

with Senate committee amendments

STATE OF NEW JERSEY

DATED: MARCH 11, 1991

The Senate Labor, Industry and Professions Committee reports favorably and with committee amendments Assembly, No. 3325 (1R).

This bill, as amended, requires that owners or operators of private, commercial motor buses which operate regular route, casino, charter or special bus service must provide \$250,000 medical expense benefits coverage on a no-fault basis for any passenger injured as a result of an accident while occupying, entering into or alighting from a motor bus. In return for that coverage, an injured passenger would be subject to a "verbal threshold" in any suit the passenger may file for noneconomic loss (pain, suffering and inconvenience) against the owner or operator of the bus. The committee amendments provide that the medical fee schedules currently in effect for medical expense benefits paid by private passenger automobile insurers would apply to the medical expense benefits provided for motor bus passengers under this bill.

The amount of medical expense benefits collectible or paid to an injured passenger would be inadmissible in any action against an owner or operator of a motor bus for damages by that passenger. An injured passenger would have the right to sue for uncompensated economic loss without regard to the verbal threshold.

The Commissioner of Insurance is required to conduct an analysis of the impact of the enactment of the bill on the liability insurance market for motor buses subject to its provisions during the first 12 months the bill is in effect and to report the results of that analysis to the Legislature and to the Chairmen of the Senate Labor, Industry and Professions Committee and the Assembly Insurance Committee, or their successor committees, within 120 days after the close of that 12-month period. The analysis shall include, but is not limited to, a study of the availability of, and the rates and premiums for, that insurance.

The bill was also amended to take effect on the 120th day after enactment instead of the 30th day.