

PERSONAL PROTECTION INSURANCE COVERAGE - MICHIGAN

Michigan law requires you to purchase Personal Protection Insurance Coverage (PIP), which protects you, other passengers in your auto, and pedestrians if you and/or they are injured in a covered automobile accident. For a more detailed explanation of this coverage please refer to Part B - Personal Protection Insurance and Property Protection Insurance Coverage in your policy.

PIP provides benefits for medical expenses, work loss, replacement services, funeral expenses and survivors' loss. These benefits are subject to the limits shown on your Declarations Page.

You may be able to reduce the premium for this coverage by selecting one of the options listed below. To make your selection, review the explanations provided, mark the appropriate box, sign the form and return it to the Customer Service Center that is listed on your Declarations Page. If you have previously completed and signed a PIP Coverage selection form, no further action is required.

Excess Coverage Options

If you have a primary health and disability insurance provided by an insurer, **other than Medicaid, Medicare or a Medical Supplemental policy**, that provides you and your family with medical and/or work loss benefits, you may select one of the options below. In this case your provider will become the primary payor for medical and/or work loss benefits and your auto policy will pay reasonable expenses above those covered by your primary policy/ies if you are injured in a covered automobile accident.

* I select PIP Medical Benefits as Excess Coverage

My Health Care Provider is _____ Policy/Member # _____

I select PIP Benefits for Work Loss as Excess Coverage

* I select PIP Medical Benefits and Work Loss as Excess Coverage

My Health Care Provider is _____ Policy/Member # _____

* Please Note - you cannot elect this option if the health insurer for you and your family is Medicaid, Medicare or a Medicare Supplemental policy. Also, some self-funded health plans do not allow this option. Please check with your health insurer and confirm that they will pay for injuries related to a car accident before selecting this option.

Please be advised that if you fail to provide truthful information you may jeopardize coverage at the time of a loss.

Deductibles for Personal Protection Insurance Coverage

By selecting one of the deductible options below, you are agreeing to pay the selected amount before any PIP benefits are paid for injuries sustained in a covered automobile accident. If you select any of these deductible options, you may not select Rejection of Work Loss on the back of this form.

I select a PIP deductible of \$100

I select a PIP deductible \$200

I select a PIP deductible of \$300

See the back of this form for additional options and acknowledgement of your selections.

Rejection of Work Loss

You may reject Work Loss Benefits from Personal Protection Insurance Coverage if you or an insured relative are age 60 or older and have no expectation of actual income loss. If you choose to reject Work Loss Benefits you may **not** select either PIP Benefits for Work Loss as Excess Coverage or a Deductible for PIP in the previous boxes.

I reject Work Loss Benefits for the following insureds:

Name: _____

Name: _____

Name: _____

IF YOU DO NOT MAKE ANY SELECTIONS ON THIS FORM, YOUR POLICY WILL PROVIDE FULL PERSONAL PROTECTION INSURANCE COVERAGE.

Named Insured's Signature

Date

Named Insured

Policy Number

If you have any questions about this form please call .