

Reduced PIP, Fee Schedules, and Attendant Care Legislation introduced in Michigan

On April 29, 2010, House Bills 6094 and 6095 were introduced into the Michigan House of Representatives by Rep. Pete Lund (R) of Shelby Township, Mich. and referred on to the House Insurance Committee¹.

HB 6094 proposes to allow Michigan drivers to purchase less Personal Protection Insurance (PIP) coverage than the currently required "lifetime" coverage. Under the bill, insurance companies would be allowed to offer, and drivers could purchase, as little as \$50,000 of coverage. As we know in the case with catastrophic injuries, \$50,000 would quickly be depleted and accident victims would effectively be forced to spend personal assets before going on to the Medicaid system. Michigan Medicaid has very limited rehabilitation coverage for the uninsured. Further, the promise of national health care is unlikely to cover the scope of needed services.

HB 6095 proposes to, among other things, limit the payment for attendant care or nursing services provided in the injured person's home to 56 hours per week where the care provider is not certified, registered, or licensed, and limit those payments to \$11 per hour. In those instances where the care provider is certified, registered, or licensed, the number of hours would be limited to what is reasonable and necessary and also limited to \$17 per hour. This bill is not limited to family provided attendant care, rather this would apply to agency-provided attendants and nursing services. Furthermore, this bill proposes to limit all payments under PIP to the Worker's Compensation fee schedule.

In a recent article written by Mark J. Ashley, he states, "There is strong evidence that community-based rehabilitation improves productivity, reduces long-term supervision requirements, and decreases institutionalization"².

The impact of this type of legislation on those catastrophically injured would further reduce access to community-based rehabilitation treatments and effectively take Michigan back decades by limiting access to care. These bills would also have the likely result of increased taxes (shift costs to Medicaid and public services), increased litigation, loss of jobs, and increased insurance premiums for liability coverage. Please take the time to look at the bills at michiganvotes.org and let your voice be heard by our state's leadership. ❖

Footnotes

1. *HB 6094 and HB 6095, michiganvotes.org.*
2. *Ashley, Mark J. "Treatment Parameters and Evidence-Based Medical Guidelines." Brain Injury Source Feb. 2010: 11-21.*

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