

PLEASE READ THIS ENDORSEMENT CAREFULLY AS IT CHANGES YOUR POLICY

PERSONAL INJURY PROTECTION COVERAGE – TEXAS

SCHEDULE

Personal Injury Protection Benefits	Limit Of Liability
Medical And Funeral Expenses	No Specific Dollar Amount
Loss Of Income	No Specific Dollar Amount
Replacement Services	No Specific Dollar Amount
Maximum Limit For The Total Of All Personal Injury Protection Benefits	\$
With respect to the coverage provided by this endorsement, the provisions of the policy apply unless modified by the endorsement.	

DEFINITIONS

The following definitions are replaced for purposes of this endorsement:

“Family member” means a person related to the “named insured” by blood, marriage, or adoption who is a resident of the “named insured’s” household. This includes a ward or foster child.

If the spouse of the “named insured” ceases to be a resident of the same household during the policy period, the spouse will be considered a “family member” under this endorsement during a period of separation in contemplation of divorce and only until the effective date of another policy listing the spouse as a “named insured”.

“Your covered auto” means a “motor vehicle” owned by the “named insured”:

1. To which the bodily injury liability coverage of this policy applies and for which a specific premium is charged; and
2. For which the “named insured” is required by the Texas Motor Vehicle Safety Responsibility Act to maintain financial responsibility.

“Your covered auto” also includes a “newly acquired collector vehicle”.

The following definitions are added for purposes of this endorsement:

“Motor vehicle” means a:

1. Self-propelled vehicle designed for use on a highway;
2. Trailer or semitrailer designed for use with a self-propelled vehicle; or
3. Vehicle propelled by electric power obtained from overhead wires, but not operated on rails.

However, “motor vehicle” does not include:

1. Traction engines;
2. Road rollers or graders;
3. Tractor cranes;
4. Power shovels;
5. Well drillers; or
6. Implements of husbandry.

“Named insured” means the person named in the Declarations.

As used in this endorsement, “insured” means:

1. The “named insured” or a “family member”:
 - a. While “occupying”; or
 - b. When struck by; a “motor vehicle”.

2. Any other person while “occupying” “your covered auto” with your permission.

INSURING AGREEMENT

- A. We will pay, in accordance with the Texas Insurance Code, personal injury protection benefits to an “insured” who sustains “bodily injury”. The “bodily injury” must:
1. Result from an accident with a “motor vehicle”; and
 2. Arise out of the ownership, maintenance, or use of a “motor vehicle”.
- B. Subject to the limits shown in the Declarations or Schedule, personal injury protection benefits consist of the following:

1. Medical And Funeral Expenses

Payment for all reasonable expenses incurred within 3 years from the date of the accident for necessary:

- a. Medical, surgical, X-ray, and dental services, including prosthetic devices;
- b. Ambulance, hospital, professional nursing, and funeral services; and
- c. Services for remedial treatment and care rendered in accordance with a recognized religious healing method.

2. Loss Of Income

- a. 80% of an “insured’s” loss of income from employment, provided that, at the time of the accident, the “insured”:

- 1) Was an income producer; and
- 2) Was in an occupational status.

These benefits do not apply to any loss after the “insured” dies.

- b. Loss of income is the difference between:

- 1) Income which would have been earned had the “insured” not been injured; and
- 2) The amount of income actually received from employment during the disability.

- c. If the income being earned as of the date of the accident is a salary or fixed remuneration, it shall be used in determining the amount of income which would have been earned. Otherwise, the average monthly income earned during the period, not to exceed 12 months, before the date of the accident, shall be used.

3. Replacement Services

Reasonable expenses incurred for obtaining services that replace those an “insured” would normally have performed:

- a. Without pay;
- b. During a period of disability; and
- c. For the care and maintenance of the family or household.

These benefits apply only if, at the time of the accident, the “insured”:

- a. Was not an income producer; and
- b. Was not in an occupational status.

These benefits do not apply to any loss after the “insured” dies.

If a lapse occurs:

1. In the period of total disability; or
2. In the medical treatment;

of an “insured” who has received medical and funeral expenses benefits under B.1. or loss of income benefits under B.2. above, and that “insured” subsequently claims additional benefits based upon a recurrence of

the “bodily injury” for which the original claim for benefits was made, that “insured” must provide us with reasonable proof of the recurrence of the “bodily injury”.

However, in no event shall the maximum limit for the total of all personal injury protection benefits payable to any “insured” exceed the maximum limit for the total of all personal injury protection benefits shown in the Declarations or Schedule.

EXCLUSIONS

- A. We do not provide **Personal Injury Protection Coverage** for any “insured” for “bodily injury” sustained:
1. In an accident caused intentionally by that “insured”.
 2. By that “insured” while in the commission of a felony.
 3. By that “insured” while attempting to elude arrest by a law enforcement official.
- B. We do not provide **Personal Injury Protection Coverage** for “bodily injury” sustained by:
1. The “named insured” or a “family member” as a result of the use or operation of any “motor vehicle”, other than “your covered auto”, owned by the “named insured”.
 2. A “family member” as a result of the use or operation of any “motor vehicle” which is owned by that “family member” and for which the financial responsibility required by the Texas Motor Vehicle Safety Responsibility Act is not in effect.
- C. We do not provide **Personal Injury Protection Coverage** for any “insured” for “bodily injury” that arises out of the “insured” operating or using “your covered auto” or OPERATING any other vehicle while logged onto a “transportation network company’s” digital network as a driver; or is engaged in a “prearranged ride”.

LIMIT OF LIABILITY

- A. The Limit Of Liability shown in the Declarations or Schedule for **Personal Injury Protection Coverage** is our maximum limit of liability for each “insured” injured in any one accident. This is the most we will pay regardless of the number of:
1. “Insureds”;
 2. Claims made;
 3. “Your covered autos” or premiums shown in the Declarations; or
 4. “Your covered autos” involved in the accident.

OTHER INSURANCE

If there is other personal injury protection coverage, we will pay only our share of the loss. Our share is the proportion that our limit of liability bears to the total of all applicable limits. However, any insurance we provide with respect to a vehicle you do not own, including any vehicle while used as a temporary substitute for “your covered auto”, shall be excess over any other collectible personal injury protection coverage.

PART E – DUTIES AFTER AN ACCIDENT OR LOSS

Duty B.5. is replaced by the following:

5. Submit a proof of loss when required by us no later than 6 months after the date of the accident.

PART F – GENERAL PROVISIONS

- A. The following is added to the **Our Right To Recover Payment** provision:

However, our rights under paragraphs A. and B. only apply against a person causing or contributing to the accident if, on the date of loss, the minimum limits required by Texas law have not been established for a motor vehicle involved in the accident and operated by that person.

- B. The following provisions are added:

LOSS PAYMENTS

Benefits are payable:

1. No more frequently than every 2 weeks; and

2. Within 30 days after satisfactory proof of claim is received.

ASSIGNMENT OF PAYMENTS

1. An “insured” may assign, in writing, payments of medical expenses for services provided to the “insured” that are covered under this endorsement to a physician or other health care provider that furnished such services to the “insured”.
2. If we receive an “insured’s” written assignment of such payments, we will pay the medical expenses covered under this endorsement directly to the physician or other health care provider that furnished the services to the “insured”.

All other policy provisions apply.