

AN ACT

**Bill 19-890**  
**Act 19-646**  
effective  
January 25,  
2013

**Codification**  
**District of**  
**Columbia**  
**Official Code**  
**2001 Edition**

*To amend the Compulsory/No-Fault Motor Vehicle Insurance Act of 1982 to require pre-litigation disclosure of any insurance agreement under which certain persons may be liable to satisfy all or part of the claim or to indemnify or reimburse for payments made to satisfy the claim by insurance companies in order to facilitate settlements and to reduce the amount of litigation in the Superior Court of the District of Columbia.*

**Pre-litigation**  
**Discovery of**  
**Insurance**  
**Coverage**  
**Amendment**  
**Act of 2012**

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Pre-litigation Discovery of Insurance Coverage Amendment Act of 2012”.

Sec. 2. The Compulsory/No-Fault Motor Vehicle Insurance Act of 1982, effective September 18, 1982 (D.C. Law 4-155; D.C. Official Code § 31-2401 *et seq.*), is amended by adding a new section 4a to read as follows:

“Sec. 4a. Pre-litigation discovery of insurance.

**New**  
**§ 31-2403.01**

“(a) After a claimant makes a written claim for compensation or damages concerning a vehicle accident, and provides the documents described in subsection (b) or (c) of this section to an insurer, the claimant shall be entitled to obtain from the insurer documentation of the applicable limits of coverage in any insurance agreement under which the insurer may be liable to:

“(1) Satisfy all or part of the claim; or

“(2) Indemnify or reimburse for payments made to satisfy the claim.

“(b) For a claimant to obtain the documentation described in subsection (a) of this section from the insurer, the claimant shall provide the following, in writing, to the insurer:

“(1) The date of the vehicle accident;

“(2) The name and last known address of the alleged tortfeasor;

“(3) A copy of the vehicle accident report, if any;

“(4) The insurer's claim number, if available;

“(5) The claimant's health care bills and documentation of the claimant's loss of income, if any, resulting from the vehicle accident; and

“(6) The records of health care treatment for the claimant's injuries caused by the vehicle accident.

“(c) If the claim is brought by the estate of an individual or a beneficiary of the individual, whose death resulted from a vehicle accident, the insurer must provide the documentation described in subsection (a) of this section if the claimant provides the following, in writing, to the insurer:

“(1) The date of the vehicle accident;

“(2) The name and last known address of the alleged tortfeasor;

- “(3) A copy of the vehicle accident report, if any;
  - “(4) The insurer's claim number, if available;
  - “(5) A copy of the decedent's death certificate issued in the District of Columbia or another jurisdiction;
  - “(6) A copy of the letters of administration issued to appoint the personal representative of the decedent's estate in the District of Columbia or a substantially similar document issued by another jurisdiction;
  - “(7) The name of each beneficiary of the decedent, if known;
  - “(8) The relationship to the decedent of each known beneficiary of the decedent;
  - “(9) The health care bills for health care treatment, if any, of the decedent resulting from the vehicle accident; and
  - “(10) The records of health care treatment for injuries to the decedent caused by the vehicle accident.
- “(d) After receipt of the documents pursuant to either subsection (b) or (c) of this section, the insurer shall respond in writing within 30 days of receipt of the request issued pursuant to subsection (a) of this section and shall disclose the limits of coverage, of all policies, regardless of whether the insurer contests the applicability of the policy to the claim.
- “(e) Disclosure of documentation required under this section shall not constitute:
- “(1) An admission that the asserted claim is subject to the applicable agreement between the insurer and the alleged tortfeasor; or
  - “(2) A waiver of any term or condition of the applicable agreement between the insurer and the alleged tortfeasor or any right of the insurer, including any potential defense concerning coverage or liability.
- “(f) An insurer, and the employees and agents of an insurer, may not be civilly or criminally liable for disclosure of the required documentation.
- “(g) Information concerning the insurance policy is not, by reason of disclosure pursuant to this section, admissible as evidence at trial.
- “(h) For the purposes of this section, the term “vehicle accident” includes accidents involving bicyclists.”.

### **Sec. 3. Fiscal impact statement.**

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 602(c)(3) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(3)).

### **Sec. 4. Effective date.**

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of Congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.