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01/28/2015

Kansas House Committee on Insurance
Topeka, KS

Dear Kansas House Committee on Insurance:

This letter describes my testimony that I will give in reference to HB 2067.

On 03/01/2014, at about 7:30pm, I was driving my tractor south bound on US-59 Highway, approximately one half mile north of Oskaloosa, when I was struck from behind by a car going sixty miles per hour. The accident report listed the driver for being asleep at the wheel. As you can imagine from being struck at that speed, damage to my tractor was catastrophic. I sustained multiple injuries that required ambulance transport and emergency room treatment. Over the course of the next few weeks other medical treatments were required. Fortunately, despite the fierce nature of the collision, I was incredibly lucky that my injuries were not serious and have been corrected or have healed normally.

Pursuant to the Kansas No Fault Insurance Act, my medical expenses were first submitted to my Personal Injury Protection coverage extended through my car insurance. That coverage has a limit of \$5,000 that was exhausted before all of my medical bills were paid. In all I incurred over \$7,500 in medical bills from injuries that by extreme fortune were not life-threatening. In the months following the accident I learned that the other driver had the type of liability coverage set to the minimums of what the current statutes mandate. Those current statutes stipulate \$10,000 of property damage and \$25,000 of medical expenses. With the current statutes so unrealistically low, the \$10,000 of property damage coverage I received for my destroyed tractor, I have had to endure a financial hardship of more than \$10,000 of lost value. Truly, all committee members easily recognize that no vehicle of their own that sustained significant damage

or total destruction, through no fault of their own, could be fixed or equally replaced at this low value in today's world. Additionally, I sustained further expenses because of the loss of use of my tractor. As a practicing large animal veterinarian, that tractor was used for snow removal from my clinic driveway and cattle pens. I also have personal livestock and hay production enterprises. That tractor was heavily involved in animal feeding and fertilizer application at that time of year. Due to its loss, I had to lease a tractor to bridge the gap until another tractor could be located and purchased, further increasing my financial loss through no fault of my own. Currently, expenses such as these are not mandated to be available in the current statutes and I believe them to be a prudent inclusion in the presented legislation.

On the medical side, by only through extreme good fortune, my expenses did not exceed the current limit. I ask you though, with medical costs the way we all know they are now, had I been seriously injured or required surgery, just how fast do you think that current limit would have been used up? As I stated earlier, not all of my medical expenses were covered by my Personal Injury Protection coverage. I am still trying to get my health insurance to cover those medical expenses beyond the PIP exhaustion level. All of this happening through no fault of my own and assisted by an outdated statute badly in need of update. To illustrate just exactly this thing, I sent my representative, Ramon Gonzalez, a recent newspaper article from the Lincoln Journal Star. The article describes a teenage boy who is at a local restaurant in Lincoln, Nebraska waiting for a ride home from his father. While waiting outside the boy is struck by a car and pinned against the building. The driver leaves the scene and is later found by police. The driver's car insurance has the same medical and property damage levels as the driver in my accident and the article states that the statutes there are the same as the current Kansas statutes. The boy sustains serious injuries requiring surgery and much treatment from no fault of his own. Currently the medical bills have added up to around \$200,000 and the driver's medical coverage only has to pay \$25,000 as mandated by statute. The boy's parents have health insurance and are trying to get that to pick-up from there, but health insurance is refusing and treatment the boy needs is not getting administered. Think it can't happen, think again.

In closing, I believe that hearing the facts of my ordeal and the similar case in Nebraska will enlighten you to the needs of updating the current statute from the outdated entity

that it is. The governing bodies of our state are charged with the protection of its citizens from such insufficiencies, and once pointed out, are ethically bound to act and correct them.

Respectfully submitted,

Dr. Carl F. Meyer, Jr.