

CONSUMER EDITION • 2026

PROTECTING YOUR FAMILY ON MICHIGAN ROADS

Michigan Auto Insurance Guide 2026

PIP, no-fault benefits, liability, UM/UIM, and coverage choices before a crash.

THE FIVE-LAYER PROTECTION PLAN

PIP Medical • Bodily Injury Liability • Uninsured Motorist • Underinsured Motorist • Vehicle Protection

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Important Notice

This publication provides general information about Michigan automobile insurance and injury claims. It is not legal advice, insurance advice, a coverage opinion, or a substitute for reviewing your policy with a licensed Michigan insurance professional and, when appropriate, an attorney. Insurance policies differ. Endorsements, exclusions, definitions, household circumstances, health coverage, vehicle use, and later changes in statutes or court decisions can affect the result.

No attorney-client relationship is created by reading this guide. Past results do not guarantee a similar outcome. Examples are fictional composites created for education; they are not descriptions of a particular client or a promise of coverage. Dollar figures that adjust annually are identified as such. Verify current requirements with the Michigan Department of Insurance and Financial Services (DIFS), your insurer, and your licensed agent before purchasing or changing coverage.

ANNUAL REVIEW

Auto insurance should be reviewed at every renewal and whenever a household member, vehicle, address, job, health plan, marital status, or driving pattern changes.

A promise to the reader

This guide will not tell you that the cheapest policy is always wrong, or that one choice fits every household. It will show you what each coverage does, what it does not do, and which questions deserve an answer before you sign.

About the author

Joseph Dedvukaj is a Michigan personal injury attorney and the founder of The Joseph Dedvukaj Firm, P.C. Since 1994 he has represented injured people and families in automobile, motorcycle, truck, wrongful-death, catastrophic-injury, Michigan no-fault, and insurance matters. His perspective here is deliberately practical: coverage language that appears routine at purchase can become decisive after a serious collision.

How to use this guide

1. Read Chapters 1 through 9 before requesting quotes.
2. Read Chapter 16 with your declarations page in hand.
3. Complete the worksheet in Chapter 17 and ask your agent the questions in Chapter 18. Request answers in writing.
4. Keep the checklist in Chapter 19 with your policy records and repeat the review annually.

Common Michigan auto insurance questions

Start with these distinctions, then use the chapter guide and worksheet to compare actual quotes.

Does no-fault insurance pay for my car?

PIP pays defined injury benefits. Collision coverage ordinarily pays for covered damage to your moving vehicle; PPI and mini-tort have different roles. See Chapter 9.

Does health insurance replace unlimited PIP?

No. Eligibility to exclude or opt out is different from having equivalent benefits. Compare care needs, exclusions, deductibles, and the risk of losing the health plan. See Chapters 3 and 5.

Are UM and UIM required in Michigan?

They are optional coverages governed by the policy. Ask for both, compare limits, and review settlement consent, exclusions, setoffs, and deadlines. See Chapter 8.

Does PIP pay pain and suffering?

No. A claim against a legally responsible driver generally requires Michigan's injury threshold. UM/UIM may provide another source if the contract applies. See Chapters 7 and 8.

If You Read Nothing Else

The rest of this guide explains why. This page is the what. Every item below is covered in detail later, and every one of them is a decision you make before a crash, not after.

1. Ask for the price of unlimited PIP medical in dollars per year, not per month. Compare it against \$500,000 and \$250,000 before you decide.
2. Do not exclude anyone from PIP medical without holding their written qualified health coverage letter in your hand.
3. If you excluded or opted out and your health coverage ends, you have 30 days to tell your auto insurer and fix it.
4. Buy uninsured and underinsured motorist coverage, and ask for both at limits matching your bodily injury limits.
5. If your BI limits read 50/100, request the signed lower-limit selection and confirm that it reflects your intended coverage.
6. Keep required insurance in force. Before reducing coverage on a stored vehicle, obtain written guidance. See Chapter 11.
7. No-fault work loss generally pays 85% of lost income, subject to a 30-day maximum and the first three years after the crash.
8. Know that a spouse or parent providing care at home runs into a 56-hour weekly framework.
9. Ask whether anyone in the house drives for a rideshare or delivery app, then ask the insurer what that changes.
10. Get every answer in writing, and keep the declarations page, the endorsements, and the forms list together.

ONE SENTENCE

Buy for the loss your family could not absorb, then confirm once a year that the policy still says what you think it says.

Guide at a Glance

Chapter	What you will learn
1. The Real Purchase	Why buying insurance means choosing who absorbs financial risk.
2. Michigan No-Fault	The three mandatory coverage components and how they interact.
3. PIP Medical	The six choices, the attendant-care rider, and the consequences of a cap.
4. The Other PIP Benefits	Wage loss, replacement services, survivor's loss, and their limits.
5. Health Coverage	Why QHC, coordination, Medicare, Medicaid, and PIP are not interchangeable.
6. Liability	How BI limits protect income and assets when you cause serious harm.
7. When You Can Sue	The tort threshold, excess economic loss, and what no-fault does not pay.
8. UM / UIM	How to protect yourself when the at-fault driver cannot fully compensate you.
9. Your Vehicle	Collision, comprehensive, deductibles, rental, towing, PPI, and mini-tort.
10. Policy Traps	Household, vehicle, notice, consent, rideshare, and exclusion problems.
11. Disqualification	The circumstances that can bar a person from PIP benefits entirely.
12. Special Situations	Motorcycles, pedestrians, passengers, nonresidents, and business vehicles.
13. After a Crash	Immediate steps that preserve safety, evidence, notice, and claims.
14. When the Insurer Says No	Examinations, records demands, and the DIFS complaint process.

Chapter	What you will learn
15. Five-Layer Plan	A disciplined framework for requesting and comparing protection.
16–19. Tools	Reading a declarations page, the worksheet, agent questions, and the annual checklist.

Insurance Is a Transfer of Risk

Most consumers shop for automobile insurance by asking one question: what is the monthly price? Price matters. But an auto policy is not merely a bill required to obtain a license plate. It is a written agreement deciding which risks the insurer will accept, which risks you will retain, and how much protection exists when an ordinary day becomes a life-changing event.

A lower premium may reflect efficient pricing. It may also reflect a lower PIP medical cap, lower bodily-injury limits, the absence of UM/UIM coverage, a larger collision deductible, coordinated medical benefits, excluded household members, or narrower endorsements. The premium cannot be evaluated intelligently until the coverage differences are visible.

The three financial directions of a crash

Direction	The question your policy must answer
Inward	Who pays for your own medical care, wage loss, replacement services, rehabilitation, and long-term needs?
Outward	Who protects you if you cause serious injury or death and the claim exceeds your savings?
Back toward you	Who compensates you if another driver causes the crash but has no insurance or too little insurance?

CORE PRINCIPLE

Do not buy one number. Build a coordinated protection plan in which PIP, BI, UM/UIM, health coverage, vehicle coverage, and any umbrella policy work together.

The coverage gap usually appears after the loss

Before a collision, a \$50,000, \$250,000, or \$500,000 number may look large. After a severe brain injury, spinal injury, amputation, prolonged hospitalization, or lifetime attendant-care need, the same number may represent only a portion of the loss. Before a collision, UM/UIM can look optional. After a collision with an insolvent or minimally insured driver, it may be the only collectible source for pain and suffering and excess economic loss.

CONSUMER EXAMPLE

A family chooses lower PIP medical limits because every member has employer health coverage. Six months later, a job change ends that health plan. If the family does not revisit the auto policy, the protection assumed at renewal may no longer exist when a crash occurs.

Michigan No-Fault in Plain English

Michigan generally requires the owner or registrant of a motor vehicle required to be registered here to maintain no-fault security while it is driven or moved on a highway. The policy includes Personal Injury Protection (PIP), Property Protection Insurance (PPI), and residual Bodily Injury and Property Damage liability (BI/PD), subject to permitted PIP medical elections. Optional coverages fill important gaps.

The three required components

Coverage	Primary job	Important limit
PIP	Pays defined first-party benefits arising from accidental bodily injury, without making fault the starting question.	PIP medical is subject to the level selected; other statutory limits apply.
PPI	Pays for qualifying damage in Michigan to tangible property, including buildings, fences, and properly parked vehicles.	Up to \$1 million. It is not ordinary collision coverage for moving vehicles.
BI / PD	Defends and indemnifies you, up to policy limits, for covered legal liability to others.	Default BI is \$250,000 / \$500,000; eligible insureds may affirmatively select lower limits down to \$50,000 / \$100,000.

PIP has several components. Allowable expenses, commonly called PIP medical, are only one of them. Work loss, replacement services, survivor’s loss, and funeral and burial expenses are separate benefits with their own rules and limits. Which insurer must pay is determined by Michigan’s statutory priority rules and is not necessarily determined only by the vehicle occupied. Household relationships, vehicle ownership, and the policies involved can matter. Chapter 4 covers the benefits themselves.

Fault still matters

No-fault does not mean nobody can be sued. Fault remains important for non-economic damages, excess economic loss, certain out-of-state and nonresident claims, property claims, and liability exposure. Chapter 7 explains when a claim against the at-fault driver is available.

DO NOT ASSUME

The phrase “full coverage” has no dependable legal meaning. Ask for the declarations page and endorsements. Identify each coverage and limit separately.

Who qualifies for restricted PIP options?

The six choices in Chapter 3 have different eligibility rules. A health insurance card alone is not enough. Obtain the selection form, proof of coverage, and written confirmation of each household member's status.

\$250,000 with exclusions

A named insured seeking exclusion must have qualifying non-Medicare health coverage. A spouse or resident relative seeking exclusion must have QHC. People not validly excluded retain the selected PIP medical protection. See MCL 500.3109a(2).

\$50,000 Medicaid option

The applicant or named insured must be enrolled in Medicaid. The spouse and resident relatives must have Medicaid, QHC, or qualifying PIP medical coverage through another auto policy. See MCL 500.3107c(1)(a).

Medicare opt-out

The applicant or named insured must have Medicare Parts A and B. The spouse and resident relatives must have QHC or qualifying PIP medical coverage. The election removes PIP medical under that policy; other PIP benefits have separate rules. See MCL 500.3107d.

Choosing PIP Medical Coverage

Michigan drivers may choose among six PIP medical structures. The selected limit generally represents the maximum the responsible auto insurer will pay per person, per accident, for PIP medical benefits under that policy. For policies with a \$50,000, \$250,000, or \$500,000 PIP medical limit, insurers must also offer an optional rider providing attendant-care coverage above the selected limit. Eligibility for exclusions, the Medicaid option, and opt-out depends on statutory conditions and supporting documentation.

The six options

Option	General description	Central risk
Unlimited	No aggregate dollar cap on allowable PIP medical expenses.	Higher premium; unlimited coverage includes the MCCA anticipated-claims assessment plus any deficit assessment. Claims remain subject to legal and policy requirements.
\$500,000	Up to \$500,000 per person, per accident.	Catastrophic care can exceed the cap.
\$250,000	Up to \$250,000 per person, per accident.	A serious hospitalization and rehabilitation course can consume the limit.
\$250,000 with exclusions	Eligible household members with qualifying health coverage may be excluded.	An excluded person has no PIP medical coverage under the policy.
\$50,000 Medicaid option	Available only when statutory Medicaid and household conditions are satisfied.	The cap is small relative to severe-injury costs.
Opt-out	Available when Medicare and household requirements are satisfied.	No PIP medical protection; other coverage becomes critical.

Why unlimited PIP deserves serious consideration

Unlimited PIP medical supplies the broadest available protection against the financial scale of catastrophic injury. PIP may pay for services that ordinary

health plans frequently restrict or exclude, including attendant care, transportation, vehicle modifications, case management, residential treatment, and long-term or custodial care. DIFS specifically warns consumers to compare those differences.

Unlimited does not mean automatic payment of every invoice. The treatment must satisfy applicable standards, the claimed expense must be related to the accident, and reimbursement remains subject to Michigan law, utilization review, documentation requirements, fee limitations, and disputes over reasonableness and necessity.

The family attendant-care limit

For accidents governed by the current statute, MCL 500.3157(10) generally does not require an insurer to pay for more than 56 hours per week of in-home attendant care provided by a relative, a person domiciled in the injured person's household, or a person with whom the injured person had a business or social relationship before the injury.

The 56-hour rule is not a limit per caregiver and does not cap all necessary care. Additional care may be supplied by a provider outside the listed categories, or the insurer may contract for additional hours from a listed person. Medical necessity, documentation, PIP limits, and governing law still apply. Older accidents may be governed by different rules.

PLAN FOR THIS BEFORE IT HAPPENS

A household that expects a spouse or parent to provide full-time care after a catastrophic injury should understand the 56-hour framework, and should ask what agency-provided care costs in their area, before choosing a PIP medical level.

A better question than “can I afford unlimited?”

Ask two questions together. What is the annual premium difference, and what financial and medical plan exists if a catastrophic injury exceeds the selected cap? Request actual quotes for each available level. Do not assume the price difference without seeing it.

The PIP Benefits Nobody Explains

Most conversations about Michigan no-fault stop at medical coverage. But PIP also pays wage loss, replacement services, survivor's loss, and funeral and burial expenses. These benefits have their own limits, and those limits surprise people at the worst possible moment.

READ THIS TWICE

The PIP medical exclusion and opt-out options apply to the medical portion of PIP only. According to DIFS, wage loss, survivor's loss, replacement services, and some funeral and burial expenses remain in the policy, and the insurer may charge a premium for them.

Work loss

Work loss benefits generally pay 85% of the income an injured person would have earned, and they are payable only for the first three years after the date of the accident. They are also subject to a maximum per 30-day period that DIFS adjusts each October. The maximum in effect on the date of the crash is the one that applies to that claim.

Accident date range	Maximum per 30-day period
October 1, 2025 – September 30, 2026	\$7,201
October 1, 2026 – September 30, 2027	\$7,455 (announced by DIFS)

Two consequences deserve attention. First, a person earning more than the monthly maximum is not made whole by statutory PIP work loss alone. Second, statutory work loss stops after three years even if the disability continues. Depending on the facts and the coverage purchased, additional protection may come from a claim against an at-fault driver, from UM/UIM, from optional additional first-party benefits, or from disability insurance. This is why BI, UM, and UIM limits matter to your household and not only to strangers.

Replacement services

Replacement services pay for household tasks an injured person can no longer perform, such as cooking, cleaning, laundry, yard work, and childcare. The

benefit is limited to \$20 per day, and like work loss it is available for the first three years after the accident.

Survivor's loss and funeral expenses

If a crash is fatal, dependents may be entitled to survivor's loss benefits for the contributions of economic value they would have received, subject to a maximum per 30-day period and to the same three-year framework. Funeral and burial expenses are payable in the amount stated in the policy, which by statute must be no less than \$1,750 and no more than \$5,000. Because the policy sets the figure within that range, it is worth asking which amount your policy uses.

ASK YOUR AGENT

Ask what funeral benefit is included and what a higher amount costs.

PIP and Health Insurance Are Not the Same

Health insurance, Medicare, Medicaid, and PIP operate under different statutes, contracts, networks, deductibles, authorization rules, and benefit designs. A health plan may qualify a person for a PIP selection while still leaving meaningful differences in what will be paid after a crash.

Qualified health coverage is an eligibility concept

Qualified health coverage, commonly called QHC, is defined by Michigan law. For July 1, 2026 through June 30, 2027, DIFS states that qualifying non-Medicare health coverage must not exclude or limit motor-vehicle-accident injuries and must have an individual annual deductible of \$6,579 or less. Medicare Parts A and B also qualify under the statute. A person selecting an exclusion or opt-out option that depends on health coverage must provide the required proof at every renewal. Because DIFS updates the deductible threshold annually, confirm the current figure before relying on it.

VETERANS AND MILITARY FAMILIES

DIFS states that VA coverage is not Qualified Health Coverage, so VA coverage cannot be used to exclude or opt out of PIP medical. DIFS has confirmed that TRICARE and CHAMPVA do constitute QHC. Obtain written proof from the program before making an election, and confirm current guidance at every renewal.

THE THIRTY-DAY RULE NOBODY MENTIONS

If required QHC ends, notify the auto insurer immediately and arrange PIP medical within 30 days. Confirm any replacement health coverage preserves eligibility. Limited Assigned Claims Plan rights may exist during the gap; do not assume continued PIP medical protection.

Coordination is a payment-order concept

Coordination of benefits addresses which insurer pays first. A coordinated auto policy may reduce premium because health insurance pays first for covered medical care and auto insurance pays second, subject to the contracts. QHC and

coordination are not synonyms. A plan can satisfy one concept without resolving every issue under the other.

Questions to ask before relying on health coverage

- Does the health plan cover injuries from automobile accidents without an exclusion or special limitation?
- What are the deductible, coinsurance, copayments, network rules, and out-of-pocket maximum?
- Will the plan cover rehabilitation, attendant care, transportation, home modification, residential care, and custodial care?
- What happens if employment ends, the plan changes, the household changes, or Medicare or Medicaid eligibility changes?
- Is the health plan self-funded and governed by federal law, and what do its written plan documents say?
- Which plan pays first, and has the answer been provided in writing?

COVERAGE WARNING

Never opt out or exclude a household member based solely on the statement “we have health insurance.” Obtain the written QHC documentation and compare actual benefits and exclusions.

Liability Coverage Protects What You Have

Bodily injury liability coverage protects an insured when a covered driver is legally responsible for another person's death or bodily injury. The insurer provides a defense and pays covered damages up to the policy limit. When damages exceed the available limit, the responsible person may face personal exposure.

Default and lower limits

Michigan's default BI limits are \$250,000 per injured person and \$500,000 per accident. Eligible applicants may affirmatively choose limits as low as \$50,000 / \$100,000. The difference is not cosmetic. A single serious injury claim may exceed the lower per-person limit, and a crash injuring several occupants can exhaust the per-accident limit.

What should you consider?

- Current assets, home equity, savings, business interests, and expected future income.
- How many people regularly operate the vehicles, and their experience levels.
- Passenger capacity and the possibility of injuring multiple people.
- Whether vehicles are used for work, deliveries, rideshare, or other business activity.
- The cost of \$250,000 / \$500,000, higher split limits, or a combined single limit.
- Whether a personal umbrella policy is available and what underlying limits it requires.

PRACTICAL RECOMMENDATION

Request quotes for at least \$250,000 / \$500,000, for higher available limits, and for an umbrella policy. Select only after comparing the premium with the assets and future income placed at risk.

Why the per-accident limit matters

A \$250,000 / \$500,000 policy generally means no more than \$250,000 for one injured person and no more than \$500,000 for all injured people in one covered

accident. If several occupants sustain major injuries, the aggregate limit may become the controlling constraint.

When You Can Sue, and For What

No-fault pays defined benefits without making fault the starting question. It does not pay for pain and suffering, and it does not pay economic losses above its own statutory limits. Those recoveries come from a claim against an at-fault driver, and Michigan places conditions on that claim.

The threshold for pain and suffering

Non-economic damages, including compensation for pain, suffering, disability, and loss of enjoyment of life, are generally available only when the injured person has suffered death, permanent serious disfigurement, or serious impairment of body function. Michigan defines serious impairment as an objectively manifested impairment of an important body function that affects the person's general ability to lead a normal life. That inquiry compares the person's life before and after the injury, is individualized, and does not impose a minimum duration. Application of the standard is frequently disputed.

WHY THIS BELONGS IN AN INSURANCE GUIDE

A reader who understands the threshold understands why UM and UIM matter. Those coverages step into the shoes of the at-fault driver, so the same threshold questions generally apply to them, subject to the policy language.

Excess economic loss

A claim against a legally responsible driver may include medical expenses above an applicable PIP cap and qualifying wage or survivor losses above statutory limits. Medical expenses may also be recoverable after a valid PIP medical exclusion or opt-out. For Michigan residents, excess economic loss does not require the pain-and-suffering threshold. Liability, proof, collectibility, and policy terms still matter.

The arithmetic worth doing once

If household income exceeds the PIP monthly maximum, or disability extends beyond three years, the gap is not theoretical. UM/UIM may address excess economic loss when an uninsured or underinsured driver is legally responsible, subject to the policy. Optional additional first-party benefits and private disability insurance may also be available. No single product closes every gap.

UM and UIM: Coverage You Buy for Other Drivers' Failures

Uninsured motorist (UM) coverage generally responds when a legally responsible driver has no applicable liability insurance. Underinsured motorist (UIM) coverage generally responds when the at-fault driver has insurance but the available limits are insufficient under the terms of your policy. Michigan UM/UIM coverage is optional and contractual: the policy language controls.

Why matching limits is a strong starting point

There is a basic fairness problem in carrying substantial liability protection for strangers while buying little or no protection for yourself and your family. Asking that UM and UIM match your BI limits creates symmetry: the policy recognizes comparable human-loss limits whether the inadequate insurance belongs to you or to the negligent driver.

The contract traps

- The policy may require prompt notice of a hit-and-run or unidentified vehicle.
- Some policies require physical contact or corroborating evidence for certain phantom-vehicle claims.
- The insurer may require consent before settling with an at-fault driver or releasing claims.
- Definitions of insured person, resident relative, occupied vehicle, and covered auto can restrict eligibility.
- Owned-but-not-insured, regular-use, business-use, or household exclusions can become decisive.
- Setoff, reduction, anti-stacking, and priority provisions may affect the amount recoverable.
- A contractual limitations period may be shorter than a consumer expects.

COVERAGE WARNING

Never settle with or release an at-fault party when a potential UIM claim exists until the UIM policy has been reviewed and every consent and notice requirement has been satisfied.

Questions for the agent

- Do you offer both UM and UIM, and at what limits?
- Can the limits match my BI limits?
- Are economic losses above PIP limits included, excluded, or set off?
- What are the hit-and-run, notice, consent-to-settle, physical-contact, and suit-deadline provisions?
- Does coverage follow household members as pedestrians, passengers, or occupants of other vehicles, and what happens when a household member drives an owned vehicle not insured under this policy?

Protecting the Vehicle and Property

PPI is not collision coverage

Property Protection Insurance pays up to \$1 million for qualifying accidental damage in Michigan to tangible property arising from the ownership, operation, maintenance, or use of a motor vehicle. Common examples include buildings, fences, and another person’s properly parked vehicle. PPI generally does not pay ordinary collision damage to moving vehicles. Michigan policies also carry a mandatory property-damage liability limit, at least \$10,000 under current law, which is distinct from PPI and is principally relevant to out-of-state losses and other situations in which tort liability applies.

Collision coverage

Collision coverage pays for covered damage to your own vehicle resulting from a collision, subject to the policy and deductible. Michigan law identifies limited, standard, and broad-form collision. Broad and standard coverage generally pay covered collision damage regardless of fault; broad form generally waives the deductible when the operator is not substantially at fault. Limited collision generally pays only when the operator is not substantially at fault. Michigan defines substantially at fault as conduct that was more than 50% of the cause of the accident. Confirm the issued policy and deductible.

Collision form	General consumer question
Broad	Generally pays regardless of fault; the deductible is generally waived when the operator is not substantially at fault. Confirm the policy.
Standard	Generally pays regardless of fault; the deductible generally applies. Confirm the policy.
Limited	Generally pays only when the operator is not substantially at fault; the deductible generally applies. Confirm the policy.

Comprehensive coverage

Comprehensive coverage typically protects against covered losses such as theft, fire, flood, vandalism, falling objects, glass damage, and animal contact, subject to the contract and the deductible. A lender or lessor may require collision and comprehensive coverage.

Mini-tort

For accidents after July 1, 2020, mini-tort may cover up to \$3,000 of uninsured vehicle damage, including a deductible. Recovery is reduced by the claimant's fault and barred if that fault exceeds 50%. It is also barred if the damaged vehicle was operated without required insurance. Liability must be established; a deductible is not automatically reimbursed. Optional mini-tort liability coverage protects against covered claims by others. See MCL 500.3135(3)(e) and (4).

Small coverages that matter on a bad day

- Rental reimbursement: daily and total limits, eligible events, and duration.
- Towing and roadside assistance: mileage, event limits, and reimbursement procedure.
- Custom equipment: whether modifications and aftermarket equipment are covered.
- Gap coverage: the difference between vehicle value and a loan or lease balance.
- Deductibles: whether the household could comfortably pay them tomorrow.

Policy Traps Hidden in Ordinary Life

Coverage disputes often begin with facts consumers did not recognize as insurance facts. A child returns from college. A relative moves in. A vehicle is titled to a business. A driver begins food delivery. A couple separates. A new car is purchased on a weekend. A policy application describes one use while daily life reflects another.

Household and driver issues

- List every licensed household member accurately and disclose changes promptly.
- Understand the difference between a listed driver, a named insured, an excluded driver, and a resident relative.
- Ask how a temporary move, college attendance, military service, separation, or shared custody affects residence.
- Do not assume permissive use cures a household or regular-use exclusion.

Vehicle and use issues

- Confirm that the titled owner, registrant, primary operator, garaging address, and business or personal use are accurate.
- Disclose rideshare, delivery, commercial, rental, or regular use of a non-owned vehicle.
- Ask how newly acquired, replacement, classic, modified, leased, or company vehicles are treated.
- Review coverage before allowing a household member to regularly drive a vehicle insured elsewhere.

Rideshare and delivery: the three periods

Personal auto policies commonly exclude commercial use, and rideshare and delivery platforms typically provide coverage that changes depending on what the driver is doing at that moment. Coverage is usually analyzed in three periods, and the protection available in each can differ substantially.

Period	What the driver is doing	What to confirm in writing
1	App is off. Personal use only.	That the personal policy applies normally.

Period	What the driver is doing	What to confirm in writing
2	App is on, waiting for a request.	What the platform provides, what the personal policy excludes, and whether a gap exists.
3	Request accepted, or passenger or order on board.	Platform limits, deductible, and whether collision and comprehensive apply to your vehicle.

IF ANYONE IN THE HOUSEHOLD DRIVES FOR AN APP

Ask the personal auto carrier whether a rideshare or delivery endorsement is available, and ask the platform for its written coverage summary. Do not rely on a verbal assurance from either one.

Notice and cooperation

Policies impose duties after a loss, including notice, cooperation, examinations, records, proof of loss, medical authorizations, and protection of subrogation rights. UM/UIM policies may add consent and contractual filing deadlines. The safest practice is prompt written notice to every potentially applicable insurer, while preserving copies and confirmation of delivery.

CONSUMER EXAMPLE

A parent buys a vehicle for an adult child but keeps title, insurance, and garaging information inconsistent across documents. After a serious crash, the insurer investigates ownership, residence, regular use, and application representations. The cheapest administrative shortcut becomes the central coverage dispute.

The Coverage Gap That Ends the Claim

Every other chapter in this guide is about how much protection to buy. This one addresses a smaller set of circumstances in which a person may receive no PIP benefits at all. The uninsured-owner outcome is often preventable through careful paperwork and continuous compliance, which is why it belongs in a guide written before a crash rather than after one.

What the statute does

MCL 500.3113 lists circumstances in which a person is not entitled to PIP benefits for accidental bodily injury. The following are especially important.

Circumstance	General effect
Owner or registrant of a vehicle or motorcycle involved in the accident for which the required security was not in effect.	The person is generally not entitled to PIP benefits if the statutory requirements are met. Fault for the crash does not eliminate this ownership or registration disqualification.
Willingly operating or using a vehicle or motorcycle taken unlawfully, where the person knew or should have known it was taken unlawfully.	The person is generally not entitled to PIP benefits.
Nonresident without an owned motor vehicle registered and insured in Michigan.	MCL 500.3113(c) bars PIP absent that ownership, registration, and insurance. The rule is not limited to vehicle occupants.

Why it reaches further than people expect

Ownership is not limited to the name on the title. Michigan's definition can include a person renting or having use of a motor vehicle for a period greater than 30 days, even without title. Courts examine the nature and pattern of use; occasional borrowing is not automatically ownership. Registration expiration alone is not the test. The questions include ownership or registration,

whether the vehicle was involved, and whether the security required by law was in effect.

The consequences can compound. An uninsured owner or registrant may lose PIP under MCL 500.3113(b). An owner driving an uninsured vehicle may also lose noneconomic damages under MCL 500.3135(2)(c); do not assume that provision bars every economic claim. Mini-tort has its own uninsured-vehicle restriction. The Assigned Claims Plan's servicing insurer may pursue statutory reimbursement from an uninsured owner or registrant. Liability depends on the facts and the security required.

THE ANNUAL PREVENTION

Once a year, confirm who owns, registers, regularly uses, and insures every household vehicle. Never drive or move a vehicle on a public highway without the security Michigan law requires. Before dropping coverage on a stored or unused vehicle, obtain written guidance from the insurer and the Secretary of State about the policy, the registration, and the plate. Keep proof of coverage and any cancellation or storage instructions.

This chapter is not a prediction and it is not a substitute for advice about a specific situation. Michigan courts continue to interpret these provisions, and outcomes depend on facts, dates, documents, and current law. Anyone who believes a disqualification may apply should seek advice promptly rather than assume the claim is lost.

Other statutory PIP exclusions

MCL 500.3113(d) also addresses a person operating a vehicle as a named excluded operator. Subsection (e) addresses certain owners or operators subject to authorized transportation-network or vehicle-sharing exclusions. A PIP medical opt-out is different from a named-driver exclusion. Review the actual statute and endorsement.

Special Situations Require Special Questions

Motorcycles

A Michigan motorcycle policy generally does not provide PIP benefits in the same manner as an automobile policy. When a motorcycle accident involves a motor vehicle, the motorcyclist may obtain PIP benefits through a statutory order of priority, subject to the selected PIP medical limit on the applicable auto policy. A single-motorcycle crash with no motor vehicle involvement presents a different analysis.

Pedestrians and bicyclists

A person injured as a pedestrian or bicyclist in an accident involving a motor vehicle may have potential PIP rights, but the correct insurer depends on priority rules and the facts. UM/UIM coverage may also matter when the striking vehicle is uninsured, underinsured, or unidentified.

When no insurer applies: the Assigned Claims Plan

The Michigan Assigned Claims Plan may provide benefits when its eligibility requirements are met. It does not cure statutory disqualification. Its PIP medical limit is generally \$250,000, subject to statutory exceptions. Notify the Michigan Automobile Insurance Placement Facility of the claim within one year after the crash; separate lawsuit rules also apply. Other health coverage or an at-fault claim may help with excess bills, but payment is not guaranteed.

WHAT THIS MEANS WHEN YOU SHOP

The Assigned Claims Plan is a limited statutory backstop, not a substitute for buying coverage. When a claim qualifies, PIP medical through the Plan is generally capped at \$250,000, subject to statutory exceptions; other PIP benefits have separate rules.

Passengers

Passengers should not assume the driver's policy is their only source. Household policies, vehicle policies, PIP priority, UM/UIM definitions, and available liability coverage must be examined. Promptly identify every policy that may apply.

Nonresidents

Under MCL 500.3113(c), a nonresident is ineligible for PIP unless that person owns a motor vehicle registered and insured in Michigan. Nonresident economic-loss claims under MCL 500.3135(3)(d) also require the statutory injury threshold. Obtain advice specific to the accident and policies.

Business and employer vehicles

Personal policies may restrict commercial activity or exclude vehicles furnished for regular use. Employer policies may contain different UM/UIM selections, deductibles, self-insured layers, and notice requirements. A business owner should coordinate commercial auto, general liability, workers' compensation, umbrella or excess, and personal auto coverage with qualified professionals.

What to Do After a Michigan Crash

1. **Protect life and safety.** Call 911, request medical assistance, and move only when it is safe and lawful.
2. **Report the collision.** Obtain the incident number and identify the responding agency.
3. **Document the scene.** Photograph vehicles, damage, plates, roadway, debris, traffic controls, weather, injuries, and the surrounding area.
4. **Identify people and insurance.** Record drivers, owners, passengers, witnesses, employers, vehicle uses, insurers, policy numbers, and contact information.
5. **Preserve electronic evidence.** Save dashcam video, photographs, texts, app records, location data, and communications. Do not post the incident or your injuries on social media.
6. **Obtain appropriate medical evaluation.** Describe symptoms accurately and follow professional instructions.
7. **Give prompt written notice.** Notify every potentially applicable auto insurer and preserve proof of delivery.
8. **Request the policies and declarations.** Do not rely only on an insurance card or an adjuster's verbal description.
9. **Track losses.** Keep medical bills, mileage, wage information, replacement services, receipts, disability notes, and a contemporaneous recovery record.
10. **Protect deadlines and contractual rights.** Michigan PIP notice and recovery rules are time-sensitive, and UM/UIM policies may contain separate requirements.
11. **Do not sign broad releases prematurely.** A property settlement, liability release, or authorization can affect other claims.
12. **Seek legal advice promptly** when injuries are serious, coverage is disputed, an insurer requests a recorded statement, or a deadline is uncertain.

Several separate deadlines

PIP has separate rules for notice, filing suit, and how far back benefits can be recovered. A timely claim does not remove every deadline. Negligence, Assigned Claims Plan, and contractual UM/UIM claims have additional timing rules. The next page explains the distinctions. Get advice promptly; do not wait for an insurer to finish its review.

PIP notice and lawsuit deadline

MCL 500.3145 generally requires suit within one year after the crash unless the insurer received the required written injury notice within that year or previously paid PIP benefits. With qualifying notice or payment, subsection (2) generally permits suit within one year after the most recent allowable expense, work loss, or survivor's loss was incurred.

The one-year-back rule and tolling

Recovery is ordinarily limited to losses incurred within one year before suit. Under subsection (3), the subsection (2) periods are tolled from a specific claim for benefits until formal denial, provided the claimant pursues the claim with reasonable diligence. General negotiations do not safely substitute for a specific claim or timely suit.

Notice must identify the injury

Written notice must identify the claimant and address, the injured person, and the time, place, and nature of the injury. Keep delivery records and proof of each specific benefit claim.

Other claims have their own clocks

Notify the Assigned Claims Plan within one year under MCL 500.3174. Ordinary injury negligence claims generally have a three-year period, subject to exceptions and special notice rules. UM/UIM policies can impose different notice and suit requirements. Government-related claims can require earlier action. A DIFS complaint does not extend deadlines.

When the Insurer Says No

A denial, a reduction, or a long silence is not the end of a claim, and it is not necessarily a statement about the merits. Several routine steps in the claims process are commonly misunderstood, and how a consumer handles them matters.

Things an insurer may ask for

Request	What it generally is
Recorded statement	A recorded interview about the crash and the injuries. What is said becomes part of the file.
Insurer-requested medical examination (often called an IME)	An examination by a physician selected and paid by the insurer. “Independent” is an industry label, not a guarantee of neutrality. The report may affect whether benefits continue.
Examination under oath	A formal, sworn, transcribed examination that many policies require as a condition of coverage. It is not a casual conversation.
Medical authorizations and records	Written permission to obtain records. The scope and time period requested are worth reading before signing.
Proof of loss and wage documentation	Forms, employer verification, and tax records supporting work loss and other benefits.

Policies commonly impose duties to cooperate, and failing to respond can create its own problem. At the same time, the scope of what is requested is not always the scope of what is required. When benefits are significant or a denial has already occurred, this is the point at which advice is most useful and least expensive.

The DIFS complaint process

Michigan consumers may file a complaint with the Department of Insurance and Financial Services regarding an insurer’s conduct. DIFS also answers coverage questions and publishes consumer guidance. A DIFS complaint is not a substitute for protecting a legal deadline, and it does not stop a limitations period from running.

DO NOT LET A DISPUTE RUN OUT THE CLOCK

Negotiation, internal appeals, and a DIFS complaint can all be underway while a statutory or contractual deadline continues to run. Track the deadline separately from the dispute.

The Five-Layer Protection Plan

The following framework reflects a claimant-side attorney’s practical view of strong protection. It is not a universal prescription. Obtain multiple quotes and individualized advice before selecting coverage.

Layer	Strong starting point to quote	Why it matters
1. PIP medical	Unlimited; also price \$500,000 and \$250,000 for comparison, and ask about the excess attendant-care rider.	Protects against catastrophic medical and long-term care costs.
2. BI liability	\$250,000 / \$500,000 or higher; consider a combined single limit and an umbrella.	Protects assets and future income when you cause serious harm.
3. UM	Match BI limits where available.	Protects against an uninsured or unidentified at-fault driver, subject to the policy.
4. UIM	Match BI and UM limits where available.	May cover injury and excess economic loss caused by an underinsured driver, subject to the contract.
5. Vehicle	Broad collision plus comprehensive, sensible deductibles, rental and towing, and mini-tort protection as appropriate.	Protects mobility and the household balance sheet after physical damage.

The quote comparison rule

Ask each carrier to quote the same limits, deductibles, drivers, vehicles, endorsements, and coordination choices. A premium comparison is meaningless when the underlying protection differs.

REQUEST IN WRITING

Please quote unlimited PIP medical; bodily injury limits of \$250,000 / \$500,000 and the next two higher options; matching UM and UIM; broad collision and comprehensive with \$500 and \$1,000 deductibles; mini-tort, rental, and towing; and any umbrella policy available. Please identify every exclusion, coordination choice, and coverage that is not available or not included.

Best Starting Point to Quote

Hand this page to an agent. It asks for the same coverage from every carrier, which is the only way a price comparison means anything. It is a starting point for discussion, not advice about your household.

Coverage	Quote this	Also price
PIP medical	Unlimited	\$500,000 and \$250,000, each as an annual figure
Excess attendant-care rider	Quote it if a capped PIP limit is chosen	Cost at each capped level
Bodily injury liability	\$250,000 / \$500,000	The next two higher options, and a combined single limit
Umbrella policy	At least \$1,000,000	Required underlying auto limits
Uninsured motorist	Matching the BI limits quoted	Whether limits above BI are available
Underinsured motorist	Matching the BI and UM limits quoted	Setoff, consent-to-settle, and notice terms in writing
Collision	Broad form	\$500 and \$1,000 deductibles
Comprehensive	Included	\$500 and \$1,000 deductibles
Mini-tort protection	Included	Cost if separately rated
Rental and towing	Included	Daily limit, total limit, and duration
Rideshare / delivery endorsement	If anyone in the household drives for an app	What the platform covers in each period

ASK FOR THIS IN WRITING

Please identify every coverage in my prior policy that is absent or reduced in this quote, every exclusion and endorsement that applies, and every coverage above that is not available from your company.

When the quotes come back

Compare the same rows across quotes. A lower price may reflect different coverage or the carrier's pricing. Check the following differences before deciding that a quote provides equivalent protection.

- A lower PIP medical level, or a household member excluded from PIP medical.
- Coordinated rather than uncoordinated medical benefits.
- Bodily injury limits below \$250,000 / \$500,000.
- UM present but UIM absent, or both at limits below the BI limits.
- Limited rather than broad collision, or a larger deductible.
- An excluded driver, an excluded vehicle, or a business-use restriction.
- Endorsements on the old policy that are simply missing from the new one.

THE ONLY FAIR COMPARISON

Same limits, same deductibles, same drivers, same vehicles, same endorsements, same coordination choice. Anything else is comparing two different products by price.

How to Read Your Declarations Page

The declarations page is the policy summary an insurer provides at issuance and renewal; its length varies. It identifies many important coverages, limits, vehicles, and insureds, but it does not reproduce every definition, exclusion, condition, or endorsement. Below is a fictional example. Read yours in the order of the numbered notes, then review the complete policy and forms.

MIDWEST MUTUAL CASUALTY — MICHIGAN AUTOMOBILE POLICY		
DECLARATIONS — Policy 000-00-0000 — Term 01/01/2026 to 07/01/2026 — SAMPLE ONLY		
INSURED, DRIVERS AND VEHICLES		
1	Named insured(s)	SAMPLE, A. and SAMPLE, B.
1	Rated drivers	A. Sample, B. Sample, C. Sample (age 17)
1	Excluded driver	NONE — confirm this line every year
2	Vehicle 1 / garaged at	2019 sedan — Bloomfield Hills, MI 48302
PERSONAL INJURY PROTECTION		
3	PIP medical limit	\$250,000 per person, per accident
3	PIP medical exclusions	C. Sample EXCLUDED (QHC on file)
4	PIP coordination	COORDINATED with health coverage
	Work loss, replacement services	Included per statute
	Funeral and burial	\$1,750
	Excess attendant-care rider	NOT PURCHASED
LIABILITY AND MOTORIST COVERAGES		
5	Bodily injury liability	\$50,000 / \$100,000
	Property damage liability	\$10,000
	Property protection (PPI)	Statutory
6	Uninsured motorist	\$50,000 / \$100,000
6	Underinsured motorist	NOT PURCHASED
	Limited property damage (mini-tort)	Included

VEHICLE COVERAGES		
7	Collision	LIMITED — \$1,000 deductible
	Comprehensive	\$1,000 deductible
	Rental / towing	Not included / Included
FORMS AND ENDORSEMENTS		
8	Attached forms	SAMPLE-PIP, SAMPLE-UM, SAMPLE-EX (fictional labels)

Reading it in order

1. Named insureds and drivers. Confirm every licensed household member is accurately disclosed and appears where the policy requires. A named-driver exclusion can eliminate liability and other important protection while that person operates the vehicle, though its effect on a particular claimant or coverage depends on the statute, the exclusion, and the policy. Never permit an excluded driver to operate the vehicle without obtaining advice and appropriate coverage.
2. Vehicles and garaging. Confirm the titled owner, the registrant, and the garaging address match reality. A mismatch here is the beginning of many coverage disputes, and it connects directly to Chapter 11.
3. PIP medical level. This is the single most consequential number on the page. Confirm which of the six options you actually have, and whether any household member is excluded from PIP medical.
4. Coordination. A coordinated policy generally makes available health coverage primary for covered accident-related medical care, with auto insurance paying second, subject to the governing plans and law. If you see coordinated or a similar term, confirm the health plan still exists, permits coordination, and covers auto injuries.
5. Bodily injury liability. The figures mean per person and per accident. If they read 50/100, request the signed selection and verify that the lower limits were validly chosen.
6. Uninsured and underinsured motorist. Look for both. If either is absent, or if the limits are lower than your BI limits, that is a decision, whether or not anyone described it to you as one.
7. Collision form and deductible. The form matters as much as the deductible. See Chapter 9 for what broad, standard, and limited generally mean.

8. Endorsements and forms list. This is usually a column of form numbers in small type. Ask what each one does. Exclusions and limitations live here, not in the coverage summary.

VERIFY THE COMPLETE CONTRACT

The declarations page is a starting point, not the entire policy. Coverage ordinarily depends on the statutes, the declarations, the policy, the endorsements, and the valid selections in effect on the loss date. Preserve applications and written agent communications as well, because they may matter in a coverage or reformation dispute.

Declaration-Page Review Worksheet

Complete this worksheet using your declarations page, policy, endorsements, and the written answers you receive from the insurer or agent.

Item	Current policy	Change / question
Named insured(s)		
Household drivers and exclusions		
Vehicles, titled owners, garaging, and use		
PIP medical level		
Coordinated or uncoordinated PIP		
QHC documentation and renewal date		
Excess attendant-care rider		
BI liability limits		
Property damage liability		
UM limits		
UIM limits		
Collision form and deductible		
Comprehensive deductible		
Mini-tort coverage		
Rental and towing		
Umbrella / excess coverage		
Rideshare or delivery endorsement		

Item	Current policy	Change / question
Contractual notice and suit deadlines		

Questions to Ask Before You Sign

Bring this page to the agent. Ask for the answers in writing.

- Please show the annual, not merely monthly, price difference among unlimited, \$500,000, and \$250,000 PIP medical.
- Who in my household is covered, limited, or excluded under each PIP choice?
- Is the excess attendant-care rider available on this policy, and what does it cost?
- Is my health plan QHC, will it coordinate, and what written proof is required at renewal?
- Which accident-related services could my health plan refuse or limit?
- What funeral and burial amount does this policy state?
- What BI limits are available above \$250,000 / \$500,000, and what does each cost?
- Can I purchase an umbrella, and which underlying auto limits are required?
- Do UM and UIM both exist on this quote, do they match BI, and what exclusions apply?
- What are the UM/UIM notice, hit-and-run, physical-contact, consent-to-settle, setoff, and filing provisions?
- Does UM/UIM cover resident relatives, pedestrians, passengers, and occupants of non-owned vehicles?
- Which collision form is quoted, when is the deductible owed, and what happens if I am at fault?
- Are custom equipment, rental, towing, gap, glass, and mini-tort protection included?
- Are any drivers, vehicles, business activities, delivery activities, or regular-use vehicles excluded?
- Is a rideshare or delivery endorsement available if anyone in the household drives for an app?
- What changes must I report immediately, and how should I document that notice?

- Please identify every coverage shown in the prior policy that is absent or reduced in this quote.
- Please provide the final declarations page, policy, forms, and endorsements before or immediately after issuance.

DOCUMENTATION RULE

Keep the quote, application, signed selection forms, QHC letters, declarations, endorsements, renewal notices, payment confirmations, and written agent communications together in one place.

Record the answer, the date, and the name of the person who gave it. Attach or staple any written confirmation you receive.

YOUR RECORD

Notes

Continue here.

Annual Coverage Checklist

- ☐ All named insureds, resident relatives, and drivers are correctly identified.
- ☐ No excluded driver is expected to operate a vehicle.
- ☐ Vehicle title, registration, and insurance are accurate; stored vehicles have a documented coverage plan.
- ☐ Vehicle ownership, registration, garaging, and use are accurate.
- ☐ PIP medical remains appropriate for the household's needs and budget.
- ☐ QHC and coordination letters are current and accurately understood.
- ☐ BI limits reflect assets, future income, and umbrella requirements.
- ☐ UM and UIM are both present at the intended limits.
- ☐ Collision type and deductibles remain affordable after a loss.
- ☐ Comprehensive, rental, towing, gap, and mini-tort needs are addressed.
- ☐ Business, rideshare, delivery, and regular-use exposures have been disclosed.
- ☐ Policy notice and contractual claim deadlines have been located.
- ☐ Digital and paper copies of the complete policy are safely stored.

Events that trigger an immediate review

- A new driver, vehicle, residence, marriage, separation, divorce, or household member.
- A child leaving for or returning from college.
- A job change, retirement, Medicare eligibility, Medicaid change, or loss of health coverage.
- Rideshare, delivery, business use, or regular access to an employer vehicle.
- A newly formed business, increased assets, home purchase, inheritance, or significant income change.
- A policy cancellation, nonrenewal, replacement, lapse, or major premium change.

Myths That Leave Families Exposed

Myth	Reality
“Full coverage means everything is covered.”	There is no reliable universal definition. Verify each coverage, limit, exclusion, and deductible.
“Michigan no-fault pays for my car.”	PIP concerns injury benefits. Damage to your moving vehicle usually requires collision coverage.
“Health insurance makes PIP unnecessary.”	Health plans and PIP cover different services and operate under different rules.
“Unlimited PIP means my spouse can be paid to care for me full time.”	Family-provided in-home attendant care is generally subject to a 56-hour weekly framework. See Chapter 3.
“No-fault will replace my paycheck.”	Work loss is generally 85% of income, capped monthly, and payable for three years. See Chapter 4.
“The other driver will have enough insurance.”	Michigan permits low BI limits, and some drivers are uninsured. UM/UIM addresses this risk, subject to contract terms.
“If I am not at fault, I am protected.”	An uninsured owner may be disqualified from PIP even when another driver caused the crash. See Chapter 11.
“My umbrella automatically fixes everything.”	Umbrellas have required underlying limits, exclusions, and scope. Confirm whether UM/UIM is included or separately available.
“My agent will remember every life change.”	The insured must communicate accurate, current information and review the issued documents.
“I can buy more coverage after the crash.”	The coverage and policy terms in effect at the time of loss generally control.

Glossary

Term	What it means here
Allowable expenses	The PIP benefit that pays reasonable charges for reasonably necessary care, recovery, and rehabilitation. Commonly called PIP medical.
Assigned Claims Plan	The statutory backstop when no applicable no-fault insurer can be identified. PIP medical through the Plan is generally capped at \$250,000.
Statutory owner	May include a person renting or having use of a motor vehicle for more than 30 days, even without title. The nature and pattern of use matter.
Coordination	A policy election making health insurance pay first for covered medical care, with auto insurance paying second.
Declarations page	The insurer's summary of who and what is covered, at what limits, for what period.
Excess economic loss	Qualifying economic losses beyond PIP limits, potentially recoverable from an at-fault party or UM/UIM if covered.
Excluded driver	A named operator whose driving can eliminate liability coverage and bar PIP. See Chapter 11.
MCCA	The Michigan Catastrophic Claims Association, which reimburses insurers for very large PIP medical claims and assesses policies to fund that.
Mini-tort	A limited property-damage remedy of up to \$3,000 against an at-fault owner or driver for vehicle damage not covered by insurance.
One-year-back rule	Generally limits PIP recovery to the year before suit, subject to statutory tolling. See Chapter 13.
PPI	Property Protection Insurance. Pays for qualifying damage in Michigan to tangible property such as buildings, fences, and properly parked vehicles.

Term	What it means here
QHC	Qualified health coverage. A statutory eligibility concept that can permit certain PIP medical exclusions or an opt-out.
Resident relative	A relative living in the household, whose status can determine which policy applies. Definitions vary by policy.
Setoff	A policy provision reducing what UM or UIM pays by amounts recovered from another source.
Subrogation	An insurer's right to step into your position and recover what it paid from a responsible party.
Tort threshold	The requirement, for non-economic damages, of death, permanent serious disfigurement, or serious impairment of an important body function.
UM / UIM	Uninsured and underinsured motorist coverage. Optional, contractual protection against drivers with no insurance or too little.

Primary Sources and Further Reading

Updated September 19, 2026. This consumer guide summarizes the sources below. Statutes, court decisions, administrative guidance, and policy terms can change. The accident date and applicable contract matter. Click the references and links on the next page to consult the source material.

1. Michigan Department of Insurance and Financial Services, Michigan Auto Insurance Frequently Asked Questions.
2. Michigan Department of Insurance and Financial Services, Choosing PIP Medical Coverage.
3. Michigan Department of Insurance and Financial Services, Brief Explanation of Michigan No-Fault Insurance, publication FIS-PUB 0202A.
4. DIFS Bulletins 2026-20-INS (work and survivor loss), 2026-08-INS (QHC deductible), and 2023-17-INS (QHC documentation and eligibility).
5. MCL 500.3009 and 500.3037 (liability limits, selection requirements, and collision forms).
6. MCL 500.3101 et seq. (Michigan no-fault security and coverage framework).
7. MCL 500.3107, 500.3107c, 500.3107d, and 500.3109a (PIP benefits, medical coverage elections, and coordination).
8. MCL 500.3108 (survivor's loss benefits).
9. MCL 500.3113 (circumstances in which a person is not entitled to PIP benefits).
10. MCL 500.3114 and 500.3115 (PIP priority provisions).
11. MCL 500.3121–500.3125 (Property Protection Insurance).
12. MCL 500.3135 (tort liability, threshold, and limited property damage).
13. MCL 500.3142 and 500.3145 (payment timing, notice, limitations, and recovery restrictions).
14. MCL 500.3157 (provider reimbursement and attendant-care provisions).
15. MCL 500.3171 et seq. and MCL 500.3174 (Michigan Assigned Claims Plan and filing period).
16. MCL 600.5805 (general limitations provisions for injury actions).

Consumer assistance

For auto insurance questions, call DIFS at 833-ASK-DIFS (833-275-3437), or use Michigan.gov/AutoInsurance. A complaint does not extend claim or lawsuit deadlines.

Open the source material

DIFS: PIP coverage choices

DIFS: bodily injury liability choices

DIFS: auto insurance reform FAQ

2026-20-INS: work and survivor loss limits

2026-08-INS: QHC deductible threshold

2023-17-INS: QHC documentation

Michigan Legislature: current compiled laws

DIFS: current bulletins and updates

Keep this edition current

Work-loss maximums change each October and depend on the accident date. The QHC deductible is reviewed annually for July 1. Recheck DIFS bulletins and legal developments before relying on this guide or changing coverage. Earlier accidents can involve different statutory rules.

A Final Word

The most difficult conversations about auto insurance happen after a collision, when a family learns that coverage was rejected, capped, coordinated, excluded, or never purchased. Coverage generally cannot be purchased or increased retroactively after a loss. Courts may still resolve disputes involving statutory compliance, policy interpretation, or a legally available remedy such as reformation, but those doctrines are not substitutes for buying the intended protection before a crash.

The purpose of this guide is not to frighten Michigan drivers, or to suggest that the most expensive policy is always the correct one. Its purpose is to make the decision visible. Ask what the policy will do after a catastrophic injury. Ask what protects your assets if you cause harm. Ask what protects your family if the negligent driver has nothing. Ask what happens to your car and your ability to work while it is repaired.

Then insist on written answers, compare equivalent quotes, and keep the documents. A careful hour before renewal can protect years of work, savings, health, and family security.

THE SIMPLEST RULE

Buy insurance for the loss your family could not afford to absorb, not merely for the premium you would prefer to pay.

Joseph Dedvukaj

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Companion Publications

If this guide was useful, these companion publications explore related subjects in greater depth. Contact the firm to confirm current titles, formats, and availability.

Title	For the reader who...
TOTAL LOSS	has already been in a Michigan car accident and is dealing with an insurance company right now.
164,000 POUNDS	was hit by a commercial truck and needs to understand why the first seventy-two hours matter.
NOT A MOTOR VEHICLE	rides a motorcycle and needs to know how Michigan no-fault treats them differently.
CRASH TO VERDICT	wants to follow an entire Michigan injury case from the crash through the verdict.
WHAT THE LAWYER TAKES	wants to understand contingency fees, case costs, liens, and the final check.

IF THE WORST HAS ALREADY HAPPENED

This guide is about the decisions you make before a crash. If you or someone in your family has already been hurt, the questions change, and they change quickly.

Michigan PIP notice rules, the one-year-back limitation, the Assigned Claims Plan filing period, and contractual UM/UIM deadlines can all begin running immediately. Recorded statements, broad releases, and early settlement offers can affect claims a consumer does not yet know exist.

The Joseph Dedvukaj Firm, P.C. has represented injured Michigan people and families since 1994. Initial consultations concerning potential injury matters are available without charge. If the firm accepts a matter, fees and responsibility for litigation expenses are governed by a written representation agreement and are explained before representation begins.

TALK TO A LAWYER BEFORE YOU TALK TO AN ADJUSTER

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PROTECTING YOUR FAMILY ON MICHIGAN ROADS

*The coverage decisions Michigan families make before a crash, explained by
a trial lawyer who sees what happens after one.*

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