

TO: Phil Vigliaturo, Chair; Rich Piazza, Vice Chair
Casualty Actuarial and Statistical (C) Task Force

FROM: Jake Garn, Utah Chief Financial Examiner, Chair
Blanks (E) Working Group

DATE: May 28, 2021

RE: 2021-11BWG – New Supplement to Detail Direct Exposures Written and Earned
2021-13BWG – Exhibit of Other Liabilities by Lines of Business

The Blanks (E) Working Group exposed two proposals at its May 26 meeting. Interested parties asked that the proposals be concurrently referred to the Casualty Actuarial and Statistical (C) Task Force for comment. Some concerns expressed by interested parties were in the reporting breakout level of exposures in proposal 2021-11BWG, indicating that there are mid-term cancellations and additions as well as multi-auto policies, which may be difficult to record. Interested parties also indicated that the additional breakout in proposal 2021-13BWG could affect the accuracy of the incurred but not reported amounts. The Working Group would like the Task Force to review the proposals and evaluate any issues that may affect the work of the Task Force, as well as comment on the interested parties' concerns.

In proposal 2021-11BWG, the sponsor requests the addition of a new Property and Casualty annual statement supplement to capture "Direct Exposures Written" and "Direct Exposures Earned," which will be reported initially only for annual statement line 2.5 (Private Flood), line 4 (Homeowners), line 19.1 (PPA No Fault), line 19.2 (PPA Liability) and line 21.1 (PPA Physical Damage). The sponsor requests a first quarter 2022 effective date.

In proposal 2021-13BWG, the sponsor requests the addition of a new supplement to capture premium and loss data on a more granular level for annual statement line 17.1, line 17.2 and line 17.3 of the Exhibit of Premiums and Losses (State Page) – Other Liability. The purpose of this proposal is to provide state insurance regulators greater detail of the premium and losses of these diverse lines of business. The sponsor requests an annual 2022 effective date.

To facilitate the sponsors' effective dates and the Blanks (E) Working Group time frame, NAIC staff request that comments be provided by June 25 to Mary Caswell (NAIC) at mcaswell@naic.org.

cc: Kris DeFrain, NAIC, Director, Research and Actuarial Department

NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

CONTACT PERSON: <u>Birny Birnbaum</u> TELEPHONE: <u>512 784 7663</u> EMAIL ADDRESS: <u>birny@cej-online.org</u> ON BEHALF OF: <u>Center for Economic Justice</u> NAME: <u>Birny Birnbaum</u> TITLE: <u>Director</u> AFFILIATION: <u>NAIC Designated Consumer Representative</u> ADDRESS: <u>1701A South Second St</u> <u>Austin, TX 78704</u>	DATE: <u>04/15/2021</u>	FOR NAIC USE ONLY
	Agenda Item # <u>2021-11BWG</u> Year <u>2022</u> Changes to Existing Reporting <input checked="" type="checkbox"/> [X] New Reporting Requirement <input type="checkbox"/> []	REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT
	No Impact <input checked="" type="checkbox"/> [X] Modifies Required Disclosure <input type="checkbox"/> []	DISPOSITION
	<input type="checkbox"/> [] Rejected For Public Comment <input checked="" type="checkbox"/> [X] Referred To Another NAIC Group CASTF <input checked="" type="checkbox"/> [X] Received For Public Comment <input type="checkbox"/> [] Adopted Date _____ <input type="checkbox"/> [] Rejected Date _____ <input type="checkbox"/> [] Deferred Date _____ <input type="checkbox"/> [] Other (Specify) _____	

BLANK(S) TO WHICH PROPOSAL APPLIES

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> [X] ANNUAL STATEMENT | <input checked="" type="checkbox"/> [X] INSTRUCTIONS | <input checked="" type="checkbox"/> [X] CROSSCHECKS |
| <input checked="" type="checkbox"/> [X] QUARTERLY STATEMENT | <input checked="" type="checkbox"/> [X] BLANK | |
| <input type="checkbox"/> [] Life, Accident & Health/Fraternal | <input type="checkbox"/> [] Separate Accounts | <input type="checkbox"/> [] Title |
| <input checked="" type="checkbox"/> [X] Property/Casualty | <input type="checkbox"/> [] Protected Cell | <input type="checkbox"/> [] Other _____ |
| <input type="checkbox"/> [] Health | <input type="checkbox"/> [] Health (Life Supplement) | |

Anticipated Effective Date: 1st Quarter 2022

IDENTIFICATION OF ITEM(S) TO CHANGE

Add a new annual statement supplement to capture exposure data for Annual Statement Lines 2.5, 4, 19.1, 19.2 and 21.2.
 Add a column to the Quarterly Parts 1 and 2 to capture exposure data for these annual statement lines for the quarter.

See Next Page For More Details

REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

See Next Page For Details

NAIC STAFF COMMENTS

Comment on Effective Reporting Date: _____

Other Comments:

IDENTIFICATION OF ITEM(S) TO CHANGE

Add a new annual statement supplement to the Property and Casualty annual statement to capture “Direct Exposures Written” and “Direct Exposures Earned” which will be reported, initially only for Annual Statement Lines 2.5 (Private Flood), 4 (Homeowners), 19.1 (PPA No Fault), 19.2 (PPA Liability) and 21.1 (PPA Physical Damage).

Add one column to property casualty quarterly statement Part 1 Loss experience between current columns 1 and 2 for “Direct Exposures Earned” only for only for lines 2.5 (Private Flood) 4 (Homeowners), 19.1 (PPA No Fault), 19.2 (PPA Liability) and 21.1 (PPA Physical Damage).

Add one column to property casualty quarterly statement Part 2 Direct Premium Written between current columns 1 and 2 for “Direct Exposures Written” only for only for lines 2.5 (Private Flood) 4 (Homeowners), 19.1 (PPA No Fault), 19.2 (PPA Liability) and 21.1 (PPA Physical Damage).

Add instructions for reporting the additional data elements, consisting of definitions and examples for the new data elements.

REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

The average written and average earned premium per exposure is an important metric for a variety of regulatory and public policy purposes. The NAIC annually produces reports of average personal auto and homeowners premiums, but the data in these reports are old and stale for timely assessment of absolute average premium and changes in average premium over time. Both reports are typically produced 24 months after the end of the experience period and 36 months after the beginning of the experience period. Homeowners average premiums for 2018 was published in January 2021 in the “Dwelling Fire, Homeowners Owner-Occupied, and Homeowners Tenant and Condominium/Cooperative Unit Owners’ Insurance Report: Data for 2018.” Personal auto average premiums for 2018 was published in March 2021 in the “Auto Database Report.” While there are valid reasons for the length of time needed to produce these reports – primarily because these reports contain information beyond average premium – the average premium numbers lose significant relevance because of their age.

This AS and QS Blanks proposals would allow the calculation of average written and average earned premium for residential property and personal auto coverages in a far more timely fashion – within three to four months following the reporting year instead of 24 months and would provide timely and useful quarterly information. The benefits of timelier average premium data are considerable. Timely average premium data would permit financial analysts to utilize changes in average premium as part of financial analysis. Similarly, the more-timely average premium data would become a valuable tool for market regulation analysts, including, but not limited to, an added data point for use with the Market Conduct Annual Statement. Last, but not least, this proposal would allow the NAIC to calculate and publish average annual premium data for residential property and personal auto insurance by state in a time frame to both make the data meaningful for describing market conditions and to inform individual state regulators and policymakers of actual changes in personal lines average premiums – as opposed to expected changes gleaned from rate filings.

Consider how valuable timely average premium values would have been for personal lines as the pandemic unfolded. Consider also the value of quarterly data for average premium for personal lines versus only an annual average. The lack of timeliness of the average premium values means that these data have very limited or no use for either financial or market analysis. The lack of timeliness also means that the data are no use in informing public policy debates about personal lines insurance costs. In addition, the severe time lag between actual experience and reporting fails to inform the public or policymakers of recent trends or outcomes and can, consequently, mislead the public and policymakers.

ANNUAL STATEMENT INSTRUCTIONS – PROPERTY

DIRECT PREMIUM AND EXPOSURES
Annual Statement Lines 2.5, 4, 19.1, 19.2 and 21.1
Allocated by States and Territories

This supplement must be filed with the NAIC by March 1 each year.

This supplement should be completed by those reporting entities that write direct business reported on the Exhibit of Premiums and Losses for each Annual Statement Lines (ASL) listed below. A separate page will be completed for each ASL.

ASL 2.5 (Private Flood)

ASL 4 (Homeowners)

ASL 19.1 (Private Passenger Auto No-Fault – Personal Injury Protection)

ASL 19.2 (Other Private Passenger Auto Liability)

ASL 21.1 (Private Passenger Auto Physical Damage).

Column 1 – Direct Premiums Written

The amounts reported for each line should agree with the amounts reported for the corresponding Annual Statement Line in Column 1, Line 35 of the Exhibit of Premiums and Losses for that state.

Column 2 – Direct Written Exposures

A Written Exposure for Annual Statement Lines 2.5 and 4 is defined as a single residential property for which coverage was written at any time during the calendar reporting period and remained in force through the end of the calendar reporting year. If the coverage was written and cancelled within the calendar reporting year, the written exposure is the fraction of the year the coverage was in force.

A Written exposure for Annual Statement Lines 19.1, 19.2 and 21.1 is defined as single motor vehicle for which coverage was written at any time during the calendar reporting year and remained in force through the end of the calendar reporting year. If the coverage was written and cancelled within the calendar reporting year, the written exposure is the fraction of the year the coverage was in force.

Examples. Assume a homeowners policy is written on July 1 during the reporting year and remains in force through the end of the reporting year. This activity would be reported as one (1.0) written exposure.

Assume a private passenger policy with No-Fault, Liability and Physical Damage coverages was written on April 1 and cancelled by the insured on July 1. This activity would be reported as 0.25 written exposure.

Column 3 – Direct Premiums Earned

The amounts reported for each line should agree with the amounts reported for the corresponding Annual Statement Line in Column 2, Line 35 of the Exhibit of Premiums and Losses for each state.

Column 4 – Direct Earned Exposures

An Earned Exposure for Annual Statement Lines 2.5 and 4 is defined as the fraction of the calendar reporting year for which a single residential property had coverage in force.

An Earned Exposure for Annual Statement Lines 19.1, 19.2 and 21.2 is defined as the fraction of the calendar reporting year for which a single motor vehicle had coverage in force.

Examples. Assume a homeowners policy is written on July 1 during the reporting year and remains in force through the end of the reporting year. This activity would be reported as 0.5 earned exposure.

Assume a private passenger policy with No-Fault, Liability and Physical Damage coverages was written on April 1 and cancelled by the insured on July 1. This activity would be reported as 0.25 earned exposure.

QUARTERLY STATEMENT INSTRUCTIONS – PROPERTY

PART 1 – LOSS EXPERIENCE

Column 1 – Direct Premiums Earned

Display direct premiums earned by line of business. The total must agree with the Statement of Income Page 4, Direct Premiums Earned Line 1.1, Column 1.

Column 2 – Direct Earned Exposures

An Earned Exposure for Annual Statement Lines 2.5 and 4 is defined as the fraction of the calendar reporting year for which a single residential property had coverage in force.

An Earned Exposure for Annual Statement Lines 19.1, 19.2 and 21.2 is defined as the fraction of the calendar reporting year for which a single motor vehicle had coverage in force.

Examples. Assume a homeowners policy is written on July 1 during the reporting year and remains in force through the end of the reporting year. This activity would be reported as 0.5 earned exposure.

Assume a private passenger policy with No-Fault, Liability and Physical Damage coverages was written on April 1 and cancelled by the insured on July 1. This activity would be reported as 0.25 earned exposure.

Column ~~2~~3 – Direct Losses Incurred

Display direct losses incurred by line of business. The total must agree with the Statement of Income Page 4, Direct Losses Incurred Line 2.1, Column 1.

Column ~~3~~4 – Direct Loss Percentage

Column ~~2~~3 (Direct Losses Incurred)/Column 1 (Direct Premiums Earned) multiplied by 100.

Column ~~4~~5 – Prior Year to Date Direct Loss Percentage

Display year-to-date direct loss percentages by line of business for the same quarter of the prior year.

Line 30 – Warranty

Data for this line should be reported prospectively (i.e., Prior year amounts need not be restated) starting with the 2008 reporting year.

PART 2 – DIRECT PREMIUMS WRITTEN

Column 1 – Current Quarter

Display current quarter direct premiums written by line of business.

Column 2 – Direct Written Exposures

A Written Exposure for Annual Statement Lines 2.5 and 4 is defined as a single residential property for which coverage was written at any time during the calendar reporting period and remained in force through the end of the calendar reporting year. If the coverage was written and cancelled within the calendar reporting year, the written exposure is the fraction of the year the coverage was in force.

A Written exposure for Annual Statement Lines 19.1, 19.2 and 21.1 is defined as single motor vehicle for which coverage was written at any time during the calendar reporting year and remained in force through the end of the calendar reporting year. If the coverage was written and cancelled within the calendar reporting year, the written exposure is the fraction of the year the coverage was in force.

Examples. Assume a homeowners policy is written on July 1 during the reporting year and remains in force through the end of the reporting year. This activity would be reported as one (1.0) written exposure.

Assume a private passenger policy with No-Fault, Liability and Physical Damage coverages was written on April 1 and cancelled by the insured on July 1. This activity would be reported as 0.25 written exposure.

Column 23 – Current Year to Date

Display year-to-date direct premiums written.

Column 34 – Prior Year, Year to Date

Display year-to-date direct premiums written from the same quarter of the prior year.

Line 30 – Warranty

Data for this line should be reported prospectively (i.e., Prior year amounts need not be restated) starting with the 2008 reporting year.

ANNUAL STATEMENT BLANK – PROPERTY

DIRECT PREMIUM AND EXPOSURES

Allocated by States and Territories

For The Year Ended December 31, 20__

(To Be Filed by March 1)

Private Flood

Annual Statement Line 2.5

	<u>1</u> Direct Premiums Written	<u>2</u> Direct Exposures Written	<u>3</u> Direct Premiums Earned	<u>4</u> Direct Exposures Earned
1. Alabama.....AL
2. Alaska.....AK
3. Arizona.....AZ
4. Arkansas.....AR
5. California.....CA
6. Colorado.....CO
7. Connecticut.....CT
8. Delaware.....DE
9. District of Columbia.....DC
10. Florida.....FL
11. Georgia.....GA
12. Hawaii.....HI
13. Idaho.....ID
14. Illinois.....IL
15. Indiana.....IN
16. Iowa.....IA
17. Kansas.....KS
18. Kentucky.....KY
19. Louisiana.....LA
20. Maine.....ME
21. Maryland.....MD
22. Massachusetts.....MA
23. Michigan.....MI
24. Minnesota.....MN
25. Mississippi.....MS
26. Missouri.....MO
27. Montana.....MT
28. Nebraska.....NE
29. Nevada.....NV
30. New Hampshire.....NH
31. New Jersey.....NJ
32. New Mexico.....NM
33. New York.....NY
34. North Carolina.....NC
35. North Dakota.....ND
36. Ohio.....OH
37. Oklahoma.....OK
38. Oregon.....OR
39. Pennsylvania.....PA
40. Rhode Island.....RI
41. South Carolina.....SC
42. South Dakota.....SD
43. Tennessee.....TN
44. Texas.....TX
45. Utah.....UT
46. Vermont.....VT
47. Virginia.....VA
48. Washington.....WA
49. West Virginia.....WV
50. Wisconsin.....WI
51. Wyoming.....WY
52. American Samoa.....AS
53. Guam.....GU
54. Puerto Rico.....PR
55. US Virgin Islands.....VI
56. Northern Mariana Islands.....MP
57. Canada.....CAN
58. Aggregate Other Alien.....OT
59. Total

**Homeowners
Annual Statement Line 4**

	<u>1</u> Direct Premiums Written	<u>2</u> Direct Exposures Written	<u>3</u> Direct Premiums Earned	<u>4</u> Direct Exposures Earned
1. Alabama.....AL
2. Alaska.....AK
3. Arizona.....AZ
4. Arkansas.....AR
5. California.....CA
6. Colorado.....CO
7. Connecticut.....CT
8. Delaware.....DE
9. District of Columbia.....DC
10. Florida.....FL
11. Georgia.....GA
12. Hawaii.....HI
13. Idaho.....ID
14. Illinois.....IL
15. Indiana.....IN
16. Iowa.....IA
17. Kansas.....KS
18. Kentucky.....KY
19. Louisiana.....LA
20. Maine.....ME
21. Maryland.....MD
22. Massachusetts.....MA
23. Michigan.....MI
24. Minnesota.....MN
25. Mississippi.....MS
26. Missouri.....MO
27. Montana.....MT
28. Nebraska.....NE
29. Nevada.....NV
30. New Hampshire.....NH
31. New Jersey.....NJ
32. New Mexico.....NM
33. New York.....NY
34. North Carolina.....NC
35. North Dakota.....ND
36. Ohio.....OH
37. Oklahoma.....OK
38. Oregon.....OR
39. Pennsylvania.....PA
40. Rhode Island.....RI
41. South Carolina.....SC
42. South Dakota.....SD
43. Tennessee.....TN
44. Texas.....TX
45. Utah.....UT
46. Vermont.....VT
47. Virginia.....VA
48. Washington.....WA
49. West Virginia.....WV
50. Wisconsin.....WI
51. Wyoming.....WY
52. American Samoa.....AS
53. Guam.....GU
54. Puerto Rico.....PR
55. US Virgin Islands.....VI
56. Northern Mariana Islands.....MP
57. Canada.....CAN
58. Aggregate Other Alien.....OT
59. Total

Private Passenger Auto No-Fault (Personal Injury Protection)
Annual Statement Line 19.1

	<u>1</u> Direct Premiums Written	<u>2</u> Direct Exposures Written	<u>3</u> Direct Premiums Earned	<u>4</u> Direct Exposures Earned
1. Alabama.....AL
2. Alaska.....AK
3. Arizona.....AZ
4. Arkansas.....AR
5. California.....CA
6. Colorado.....CO
7. Connecticut.....CT
8. Delaware.....DE
9. District of Columbia.....DC
10. Florida.....FL
11. Georgia.....GA
12. Hawaii.....HI
13. Idaho.....ID
14. Illinois.....IL
15. Indiana.....IN
16. Iowa.....IA
17. Kansas.....KS
18. Kentucky.....KY
19. Louisiana.....LA
20. Maine.....ME
21. Maryland.....MD
22. Massachusetts.....MA
23. Michigan.....MI
24. Minnesota.....MN
25. Mississippi.....MS
26. Missouri.....MO
27. Montana.....MT
28. Nebraska.....NE
29. Nevada.....NV
30. New Hampshire.....NH
31. New Jersey.....NJ
32. New Mexico.....NM
33. New York.....NY
34. North Carolina.....NC
35. North Dakota.....ND
36. Ohio.....OH
37. Oklahoma.....OK
38. Oregon.....OR
39. Pennsylvania.....PA
40. Rhode Island.....RI
41. South Carolina.....SC
42. South Dakota.....SD
43. Tennessee.....TN
44. Texas.....TX
45. Utah.....UT
46. Vermont.....VT
47. Virginia.....VA
48. Washington.....WA
49. West Virginia.....WV
50. Wisconsin.....WI
51. Wyoming.....WY
52. American Samoa.....AS
53. Guam.....GU
54. Puerto Rico.....PR
55. US Virgin Islands.....VI
56. Northern Mariana Islands.....MP
57. Canada.....CAN
58. Aggregate Other Alien.....OT
59. Total

Other Private Passenger Auto Liability
Annual Statement Line 19.2

	<u>1</u> Direct Premiums Written	<u>2</u> Direct Exposures Written	<u>3</u> Direct Premiums Earned	<u>4</u> Direct Exposures Earned
1. Alabama.....AL
2. Alaska.....AK
3. Arizona.....AZ
4. Arkansas.....AR
5. California.....CA
6. Colorado.....CO
7. Connecticut.....CT
8. Delaware.....DE
9. District of Columbia.....DC
10. Florida.....FL
11. Georgia.....GA
12. Hawaii.....HI
13. Idaho.....ID
14. Illinois.....IL
15. Indiana.....IN
16. Iowa.....IA
17. Kansas.....KS
18. Kentucky.....KY
19. Louisiana.....LA
20. Maine.....ME
21. Maryland.....MD
22. Massachusetts.....MA
23. Michigan.....MI
24. Minnesota.....MN
25. Mississippi.....MS
26. Missouri.....MO
27. Montana.....MT
28. Nebraska.....NE
29. Nevada.....NV
30. New Hampshire.....NH
31. New Jersey.....NJ
32. New Mexico.....NM
33. New York.....NY
34. North Carolina.....NC
35. North Dakota.....ND
36. Ohio.....OH
37. Oklahoma.....OK
38. Oregon.....OR
39. Pennsylvania.....PA
40. Rhode Island.....RI
41. South Carolina.....SC
42. South Dakota.....SD
43. Tennessee.....TN
44. Texas.....TX
45. Utah.....UT
46. Vermont.....VT
47. Virginia.....VA
48. Washington.....WA
49. West Virginia.....WV
50. Wisconsin.....WI
51. Wyoming.....WY
52. American Samoa.....AS
53. Guam.....GU
54. Puerto Rico.....PR
55. US Virgin Islands.....VI
56. Northern Mariana Islands.....MP
57. Canada.....CAN
58. Aggregate Other Alien.....OT
59. Total				

**Private Passenger Auto Physical Damage
Annual Statement Line 21.1**

	<u>1</u> Direct Premiums Written	<u>2</u> Direct Exposures Written	<u>3</u> Direct Premiums Earned	<u>4</u> Direct Exposures Earned
1. Alabama.....AL
2. Alaska.....AK
3. Arizona.....AZ
4. Arkansas.....AR
5. California.....CA
6. Colorado.....CO
7. Connecticut.....CT
8. Delaware.....DE
9. District of Columbia.....DC
10. Florida.....FL
11. Georgia.....GA
12. Hawaii.....HI
13. Idaho.....ID
14. Illinois.....IL
15. Indiana.....IN
16. Iowa.....IA
17. Kansas.....KS
18. Kentucky.....KY
19. Louisiana.....LA
20. Maine.....ME
21. Maryland.....MD
22. Massachusetts.....MA
23. Michigan.....MI
24. Minnesota.....MN
25. Mississippi.....MS
26. Missouri.....MO
27. Montana.....MT
28. Nebraska.....NE
29. Nevada.....NV
30. New Hampshire.....NH
31. New Jersey.....NJ
32. New Mexico.....NM
33. New York.....NY
34. North Carolina.....NC
35. North Dakota.....ND
36. Ohio.....OH
37. Oklahoma.....OK
38. Oregon.....OR
39. Pennsylvania.....PA
40. Rhode Island.....RI
41. South Carolina.....SC
42. South Dakota.....SD
43. Tennessee.....TN
44. Texas.....TX
45. Utah.....UT
46. Vermont.....VT
47. Virginia.....VA
48. Washington.....WA
49. West Virginia.....WV
50. Wisconsin.....WI
51. Wyoming.....WY
52. American Samoa.....AS
53. Guam.....GU
54. Puerto Rico.....PR
55. US Virgin Islands.....VI
56. Northern Mariana Islands.....MP
57. Canada.....CAN
58. Aggregate Other Alien.....OT
59. Total

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

- | MARCH FILING | <u>RESPONSES</u> |
|---|------------------|
| 1. Will an actuarial opinion be filed by March 1? | |
| 2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? | |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? | |
| APRIL FILING | |
| 5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? | |
| 6. Will Management's Discussion and Analysis be filed by April 1? | |
| 7. Will the Supplemental Investment Risks Interrogatories be filed by April 1? | |
| MAY FILING | |
| 8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1? | |
| JUNE FILING | |
| 9. Will an audited financial report be filed by June 1? | |
| 10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | |

The following supplemental reports are required to be filed as part of your statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

- | MARCH FILING | |
|--|------------------|
| 11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | ..... |
| 12. Will the Financial Guaranty Insurance Exhibit be filed by March 1? | ..... |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | ..... |
| 14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? | ..... |
| 15. Will the Trustee Surplus Statement be filed with the state of domicile and the NAIC by March 1? | ..... |
| 16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? | ..... |
| 17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? | ..... |
| 18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | ..... |
| 19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)? | ..... |
| 20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? | ..... |
| 21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? | ..... |
| 22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? | ..... |
| 23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | ..... |
| 24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | ..... |
| 25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | ..... |
| 26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | ..... |
| 27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1? | ..... |
| 28. Will the Direct Premium and Exposures Supplement be filed with NAIC by March 1? | ..... |

- | APRIL FILING | |
|---|-------|
| 2829. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? | ..... |
| 2930. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? | ..... |
| 3031. Will the Accident and Health Policy Experience Exhibit be filed by April 1? | ..... |
| 3132. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? | ..... |
| 3233. Will the regulator-only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1? | ..... |
| 3334. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? | ..... |
| 3435. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? | ..... |
| 3536. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? | ..... |

- | AUGUST FILING | |
|---|-------|
| 3637. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | ..... |

Explanation:

Bar Code:

QUARTERLY STATEMENT BLANK – PROPERTY

PART 1 – LOSS EXPERIENCE

Line of Business	Current Year to Date				45 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Earned Exposures	23 Direct Losses Incurred	34 Direct Loss Percentage	
1. Fire.....		XXX			
2.1 Allied Lines.....		XXX			
2.2 Multiple Peril Crop.....		XXX			
2.3 Federal Flood.....		XXX			
2.4 Private Crop.....		XXX			
2.5 Private Flood.....		XXX			
3. Farmowners Multiple Peril.....		XXX			
4. Homeowners Multiple Peril.....		XXX			
5.1 Commercial Multiple Peril (Non-Liability Portion).....		XXX			
5.2 Commercial Multiple Peril (Liability Portion).....		XXX			
6. Mortgage Guaranty.....		XXX			
8. Ocean Marine.....		XXX			
9. Inland Marine.....		XXX			
10. Financial Guaranty.....		XXX			
11.1 Medical Professional Liability—Occurrence.....		XXX			
11.2 Medical Professional Liability—Claims-Made.....		XXX			
12. Earthquake.....		XXX			
13.1 Comprehensive Individual Accident and Health.....		XXX			
13.2 Comprehensive Group Accident and Health.....		XXX			
14. Credit A&H (Group and Individual).....		XXX			
15.1 Vision Only.....		XXX			
15.2 Dental Only.....		XXX			
15.3 Disability Income.....		XXX			
15.4 Medicare Supplement.....		XXX			
15.5 Medicaid Title XIX.....		XXX			
15.6 Medicare Title XVIII Exempt from State Taxes or Fees.....		XXX			
15.7 Long-Term Care.....		XXX			
15.8 Federal Employees Health Benefits Plan Premium.....		XXX			
15.9 Other Health.....		XXX			
16. Workers' Compensation.....		XXX			
17.1 Other Liability—Occurrence.....		XXX			
17.2 Other Liability—Claims-Made.....		XXX			
17.3 Excess Workers' Compensation.....		XXX			
18.1 Products Liability—Occurrence.....		XXX			
18.2 Products Liability—Claims-Made.....		XXX			
19.1 Private Passenger Auto No-Fault (Personal Injury Protection).....		XXX			
19.2 Other Private Passenger Auto Liability.....		XXX			
19.3 Commercial Auto No-Fault (Personal Injury Protection).....		XXX			
19.4 Other Commercial Auto Liability.....		XXX			
21.1 Private Passenger Auto Physical Damage.....		XXX			
21.2 Commercial Auto Physical Damage.....		XXX			
22. Aircraft (all perils).....		XXX			
23. Fidelity.....		XXX			
24. Surety.....		XXX			
26. Burglary and Theft.....		XXX			
27. Boiler and Machinery.....		XXX			
28. Credit.....		XXX			
29. International.....		XXX			
30. Warranty.....		XXX			
31. Reinsurance-Nonproportional Assumed Property.....	XXX	XXX	XXX	XXX	XXX
32. Reinsurance-Nonproportional Assumed Liability.....	XXX	XXX	XXX	XXX	XXX
33. Reinsurance-Nonproportional Assumed Financial Lines.....	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....		XXX			
35. TOTALS.....		XXX			
DETAILS OF WRITE-INS					
3401.		XXX			
3402.		XXX			
3403.		XXX			
3498. Sum. of remaining write-ins for ... Line 34 from overflow page		XXX			
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)		XXX			

PART 2 – DIRECT PREMIUMS WRITTEN

Line of Business	Current Quarter		²³	³⁴
	1 Direct Premiums Written	2 Direct Written Exposures	Current Year to Date Direct Premiums Written	Prior Year to Date
1. Fire.....		XXX		
2.1 Allied Lines		XXX		
2.2 Multiple Peril Crop.....		XXX		
2.3 Federal Flood.....		XXX		
2.4 Private Crop.....		XXX		
2.5 Private Flood		-----		
3. Farmowners Multiple Peril		XXX		
4. Homeowners Multiple Peril		-----		
5.1 Commercial Multiple Peril (Non-Liability Portion).....		XXX		
5.2 Commercial Multiple Peril (Liability Portion).....		XXX		
6. Mortgage Guaranty.....		XXX		
8. Ocean Marine		XXX		
9. Inland Marine		XXX		
10. Financial Guaranty		XXX		
11.1 Medical Professional Liability—Occurrence.....		XXX		
11.2 Medical Professional Liability—Claims-Made.....		XXX		
12. Earthquake.....		XXX		
13.1 Comprehensive Individual Accident and Health.....		XXX		
13.2 Comprehensive Group Accident and Health.....		XXX		
14. Credit A&H (Group and Individual)		XXX		
15.1 Vision Only		XXX		
15.2 Dental Only		XXX		
15.3 Disability Income		XXX		
15.4 Medicare Supplement		XXX		
15.5 Medicaid Title XIX.....		XXX		
15.6 Medicare Title XVIII Exempt from State Taxes or Fees.....		XXX		
15.7 Long-Term Care		XXX		
15.8 Federal Employees Health Benefits Plan Premium.....		XXX		
15.9 Other Health		XXX		
16. Workers' Compensation		XXX		
17.1 Other Liability—Occurrence.....		XXX		
17.2 Other Liability—Claims-Made		XXX		
17.3 Excess Workers' Compensation.....		XXX		
18.1 Products Liability—Occurrence.....		XXX		
18.2 Products Liability—Claims-Made.....		XXX		
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) ..		-----		
19.2 Other Private Passenger Auto Liability		-----		
19.3 Commercial Auto No-Fault (Personal Injury Protection).....		XXX		
19.4 Other Commercial Auto Liability		XXX		
21.1 Private Passenger Auto Physical Damage		-----		
21.2 Commercial Auto Physical Damage.....		XXX		
22. Aircraft (all perils).....		XXX		
23. Fidelity		XXX		
24. Surety.....		XXX		
26. Burglary and Theft.....		XXX		
27. Boiler and Machinery		XXX		
28. Credit		XXX		
29. International		XXX		
30. Warranty.....		XXX		
31. Reinsurance-Nonproportional Assumed Property.....	XXX	XXX	XXX	XXX
32. Reinsurance-Nonproportional Assumed Liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business.....		XXX		
35. TOTALS		XXX		
DETAILS OF WRITE-INS				
3401.		XXX		
3402.		XXX		
3403.		XXX		
3498. Sum. of remaining write-ins for ... Line 34 from overflow page		XXX		
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)		XXX		

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NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

CONTACT PERSON: _____ TELEPHONE: _____ EMAIL ADDRESS: _____ ON BEHALF OF: _____ NAME: <u>Patricia Gosselin</u> TITLE: _____ AFFILIATION: <u>New Hampshire Insurance Department</u> ADDRESS: <u>215 S. Fruit St., Ste. 14</u> <u>Concord, NH 03301</u>	DATE: <u>04/15/2021</u>	FOR NAIC USE ONLY
	Agenda Item # <u>2021-13BWG</u> Year <u>2022</u> Changes to Existing Reporting <input checked="" type="checkbox"/> [X] New Reporting Requirement <input type="checkbox"/> []	REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT
	No Impact <input type="checkbox"/> [] Modifies Required Disclosure <input type="checkbox"/> []	DISPOSITION
	<input type="checkbox"/> [] Rejected For Public Comment <input checked="" type="checkbox"/> [X] Referred To Another NAIC Group CASTF <input checked="" type="checkbox"/> [X] Received For Public Comment <input type="checkbox"/> [] Adopted Date _____ <input type="checkbox"/> [] Rejected Date _____ <input type="checkbox"/> [] Deferred Date _____ <input type="checkbox"/> [] Other (Specify) _____	

BLANK(S) TO WHICH PROPOSAL APPLIES

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> [X] ANNUAL STATEMENT | <input checked="" type="checkbox"/> [X] INSTRUCTIONS | <input checked="" type="checkbox"/> [X] CROSSCHECKS |
| <input type="checkbox"/> [] QUARTERLY STATEMENT | <input checked="" type="checkbox"/> [X] BLANK | |
| <input type="checkbox"/> [] Life, Accident & Health/Fraternal | <input type="checkbox"/> [] Separate Accounts | <input type="checkbox"/> [] Title |
| <input checked="" type="checkbox"/> [X] Property/Casualty | <input type="checkbox"/> [] Protected Cell | <input type="checkbox"/> [] Other _____ |
| <input type="checkbox"/> [] Health | <input type="checkbox"/> [] Health (Life Supplement) | |

Anticipated Effective Date: Annual 2022

IDENTIFICATION OF ITEM(S) TO CHANGE

Add a new supplement to capture premium and loss data for Annual Statement Lines 17.1, 17.2 & 17.3 of the Exhibit of Premiums and Losses (State Page) – Other Liability by more granular lines of business.

REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

The purpose of this proposal is to provide regulators more granular detail of the premium and losses of the diverse lines of business reported on Annual Statement Lines 17.1, 17.2 & 17.3 of the Exhibit of Premiums and Losses (State Page).

NAIC STAFF COMMENTS

Comment on Effective Reporting Date: _____

Other Comments:

** This section must be completed on all forms.

ANNUAL STATEMENT INSTRUCTIONS – PROPERTY

Exhibit of Other Liabilities by Lines of Business As Reported on Line 17 of The Exhibit of Premiums and Losses

All reporting entities reporting “Other Liability” on Line 17 of the Exhibit of Premiums and Losses must prepare this exhibit. The exhibit is to be prepared and filed by all reporting entities no later than March 1 of each year.

The purpose of the Exhibit of Other Liabilities by Lines of Business is to provide more information on the diverse lines of business filed on Annual Statement Line 17. The exhibit should be reported on a direct basis (before assumed and ceded reinsurance).

For definitions of the products reported on Lines 1 through 28, see the appendix of these instructions. Line 26 – All Other will include all products not reported on Lines 1 through 28.

Column 1 – Written Premium

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 1, Line 17.1 + Line 17.2 + Line 17.3.

Column 2 – Earned Premium

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 2, Line 17.1 + Line 17.2 + Line 17.3.

Column 3 – Unearned Premium Reserve

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 4, Line 17.1 + Line 17.2 + Line 17.3.

Column 4 – Losses Paid (Deducting Salvage)

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 5, Line 17.1 + Line 17.2 + Line 17.3.

Column 5 – Losses Incurred

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 6, Line 17.1 + Line 17.2 + Line 17.3.

Column 6 – Losses Unpaid

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 7, Line 17.1 + Line 17.2 + Line 17.3.

Column 7 – Defense and Cost Containment Paid

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 8, Line 17.1 + Line 17.2 + Line 17.3.

Column 8 – Defense and Cost Containment Incurred

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 9, Line 17.1 + Line 17.2 + Line 17.3.

Column 9 – Defense and Cost Containment Unpaid

Line 30 should equal Exhibit of Premiums and Losses Grand Total Page Column 10, Line 17.1 + Line 17.2 + Line 17.3.

ANNUAL STATEMENT BLANK – PROPERTY

SUPPLEMENT FOR THE YEAR OF THE

.....
Affix Bar Code Above

**EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS
AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES
(To Be Filed by March 1)**

NAIC Group Code

NAIC Company Code

Company Name

	Direct Business Only								
	1	2	3	4	5	6	7	8	9
	Written Premium	Earned Premium	Unearned Premium Reserve	Losses Paid (deducting salvage)	Losses Incurred	Losses Unpaid	Defense and Cost Containment Paid	Defense and Cost Containment Incurred	Defense and Cost Containment Unpaid
1. Completed Operations Liability
2. Construction and Alteration Liability
3. Contingent Liability
4. Contractual Liability
5. Elevators and Escalators Liability
6. Errors and Omissions Liability Professional Liability Other Than Medical
7. Environmental Pollution Liability
8. Excess and Umbrella Liability
9. Liquor Liability
10. Personal Injury Liability
11. Premises and Operations Liability
12. Excess Workers' Compensation
13. Commercial General Liability
14. Comprehensive Personal Liability
15. Day Care Centers
16. Directors and Officers Liability
17. Employee Benefit Liability
18. Employers' Liability
19. Employment Practices Liability
20. Fire Legal Liability
21. Municipal Liability
22. Nuclear Energy Liability
23. Veterinarian
24. Internet Liability
25. Cyber Liability
26. Fiduciary Liability
27. Premises and Operations (OL&T and M&C)
28. Professional Errors and Omissions Liability
29. All Other
30. Total ASL 17 – Other Liability (Sum of Lines 1 through 29)									

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