

NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

CONTACT PERSON: _____ TELEPHONE: _____ EMAIL ADDRESS: _____ ON BEHALF OF: _____ NAME: <u>Mary Caswell and Calvin Ferguson</u> TITLE: _____ AFFILIATION: <u>NAIC</u> ADDRESS: _____ _____ _____	DATE: <u>01/19/2022</u>	FOR NAIC USE ONLY
	Agenda Item # <u>2022-03BWG</u> Year <u>2023</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 type="checkbox"/> [] Referred To Another NAIC Group <input type="checkbox"/> [] Received For Public Comment <input checked="" type="checkbox"/> [X] Adopted Date <u>05/25/2022</u> <input type="checkbox"/> [] Rejected Date _____ <input type="checkbox"/> [] Deferred Date _____ <input type="checkbox"/> [] Other (Specify) _____	

BLANK(S) TO WHICH PROPOSAL APPLIES

- | | | |
|--|---|--|
| <input type="checkbox"/> [] ANNUAL STATEMENT | <input type="checkbox"/> [] INSTRUCTIONS | <input type="checkbox"/> [] 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 2023

IDENTIFICATION OF ITEM(S) TO CHANGE

Split Line 5 of the Quarterly Part 1 – Loss Experience and Part 2 – Direct Premiums Written into Line 5.1 – Commercial multiple peril (non-liability portion) and Line 5.2 – Commercial multiple peril (liability portion).

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

The purpose of this proposal is to fix the reporting of Line 5 to be reported as Line 5.1 – Commercial multiple peril (non-liability portion) and Line 5.2 – Commercial multiple peril (liability portion) on the Quarterly Part 1 and Part 2 to be consistent with the annual reporting. This change was missed on proposal 2020-33BWG.

NAIC STAFF COMMENTS

Comment on Effective Reporting Date: _____

Other Comments:

** This section must be completed on all forms.

QUARTERLY STATEMENT BLANK – PROPERTY

PART 1 – LOSS EXPERIENCE and PART 2 – DIRECT PREMIUMS WRITTEN

Line of Business	
1.	Fire.....
2.1	Allied lines.....
2.2	Multiple peril crop.....
2.3	Federal flood.....
2.4	Private crop.....
2.5	Private flood.....
3.	Farmowners multiple peril.....
4.	Homeowners multiple peril.....
5.1	Commercial multiple peril (non-liability portion).....
5.2	Commercial multiple peril (liability portion).....
6.	Mortgage guaranty.....
8.	Ocean marine.....
9.	Inland marine.....
10.	Financial guaranty.....
11.1.	Medical professional liability -occurrence.....
11.2.	Medical professional liability -claims made.....
12.	Earthquake.....
13.1	Comprehensive (hospital and medical) individual.....
13.2	Comprehensive (hospital and medical) group.....
14.	Credit accident and health.....
15.1	Vision only.....
15.2	Dental only.....
15.3	Disability income.....
15.4	Medicare supplement.....
15.5	Medicaid Title XIX.....
15.6	Medicare Title XVIII.....
15.7	Long-term care.....
15.8	Federal employees health benefits plan.....
15.9	Other health.....
16.	Workers' compensation.....
17.1.	Other liability occurrence.....
17.2.	Other liability-claims made.....
17.3.	Excess Workers' Compensation.....
18.1.	Products liability-occurrence.....
18.2.	Products liability-claims made.....
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).....
19.4	Other commercial auto liability.....
21.1	Private passenger auto physical damage.....
21.2	Commercial auto physical damage.....
22.	Aircraft (all perils).....
23.	Fidelity.....
24.	Surety.....
26.	Burglary and theft.....
27.	Boiler and machinery.....
28.	Credit.....
29.	International.....
30.	Warranty.....
31.	Reinsurance-Nonproportional Assumed Property.....
32.	Reinsurance-Nonproportional Assumed Liability.....
33.	Reinsurance-Nonproportional Assumed Financial Lines.....
34.	Aggregate write-ins for other lines of business.....
35.	TOTALS
DETAILS OF WRITE-INS	
3401.
3402.
3403.
3498.	Sum. of remaining write-ins for Line 34 from overflow page.....
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34)

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