

Market Conduct Annual Statement 2017 Data Year Filings

Life & Annuity

Data Elements & Validation



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Market Conduct Annual Statement 2017 Data Year Filings

Life & Annuity Data Elements

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MCAS Resources

Visit the 2017 MCAS Web page at:
http://www.naic.org/mcas_2017.htm

- Important Dates
- Participation Requirements
- Frequently Asked Questions
- Reporting Blanks
- Data Call and Definitions
- MCAS User Guide
- CSV Data Upload Instructions

Remember

The filing deadline is

April 30, 2018

Remember

MCAS Threshold:

\$50,000 in direct written premium
or considerations

Arkansas Threshold:

~~\$7 million in direct written premium~~
\$50,000 in direct written premium

Life Interrogatories		
	Yes	No
	Response	Explanation
01	Individual Life Cash Value - Does the company have data to report for this product type?	
02	Individual Life Non-Cash Value - Does the company have data to report for this product type?	
03/04	Is there a reason that the reported Individual Life Cash Value information may identify the company as an outlier or be substantially different from previously reported data (such as assuming blocks of business; shifting market strategies; underwriting changes, etc)?	
05/06	Is there a reason that the reported Individual Life Non-Cash Value information may identify the company as an outlier or be substantially different from previously reported data (such as assuming blocks of business; shifting market strategies; underwriting changes, etc)?	
07	Additional state specific Individual Life Cash Value comments (optional):	
08	Additional state specific Individual Life Non-Cash Value comments (optional):	

Life Interrogatories		
	Yes	No
	Response	Explanation
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07	Additional state specific Individual Life Cash Value comments (optional):	
08	Additional state specific Individual Life Non-Cash Value comments (optional):	
	Individual Life	Individual Life
	Cash Value	Non-Cash Value
09	Number of replacement policies issued during the period.	
10	Number of internal replacements issued during the period.	
11	Number of external replacements issued during the period.	
12	Number of policies replaced where age of insured at replacement was < 65.	
13	Number of policies replaced where age of insured at replacement was age 65 and over.	

Life Interrogatories		Yes	No	Explanation
		Response		
01	Individual Life Cash Value - Does the company have data to report for this product type?			
02	Individual Life Non-Cash Value - Does the company have data to report for this product type?			
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10	Number of internal replacements issued during the period.			
11	Number of external replacements issued during the period.			
12	Number of policies replaced where age of insured at replacement was < 65.			-
13	Number of policies replaced where age of insured at replacement was age 65 and over.			-

Life Interrogatories		Yes	No	Explanation
		Response		
01	Individual Life Cash Value - Does the company have data to report for this product type?	Y		
02	Individual Life Non-Cash Value - Does the company have data to report for this product type?	Y		
03/04	Is there a reason that the reported Individual Life Cash Value information may identify the company as an outlier or be substantially different from previously reported data (such as assuming blocks of business; shifting market strategies; underwriting changes, etc)?			
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10	Number of internal replacements issued during the period.			
11	Number of external replacements issued during the period.			
12	Number of policies replaced where age of insured at replacement was < 65.			-
13	Number of policies replaced where age of insured at replacement was age 65 and over.			-
14	Number of policies surrendered under 2 years from policy issue.			-
15	Number of policies surrendered between 2 years and 5 years from policy issue.			-
16	Number of policies surrendered between 6 years and 10 years from policy issue.			-
17	Number of policies surrendered during the period.			-
18	Number of new policies issued during the period where age of insured at issue was < 65.			-
19	Number of new policies issued during the period where age of insured at issue was age 65 and over.			-

Life Interrogatories		Yes No Response	Explanation
01	Individual Life Cash Value - Does the company have data to report for this product type?	Y	
02	Individual Life Non-Cash Value - Does the company have data to report for this product type?	N	
03/04	Is there a reason that the reported Individual Life Cash Value information may identify the company as an outlier or be substantially different from previously reported data (such as assuming blocks of business; shifting market strategies; underwriting changes, etc)?		
05/06	Is there a reason that the reported Individual Life Non-Cash Value information may identify the company as an outlier or be substantially different from previously reported data (such as assuming blocks of business; shifting market strategies; underwriting changes, etc)?		
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14	Number of policies surrendered under 2 years from policy issue.		
15	Number of policies surrendered between 2 years and 5 years from policy issue.		-
16	Number of policies surrendered between 6 years and 10 years from policy issue.		-
17	Number of policies surrendered during the period.		-
18	Number of new policies issued during the period where age of insured at issue was < 65.		-
19	Number of new policies issued during the period where age of insured at issue was age 65 and over.		-

Life Interrogatories	
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- 07 Additional state specific Individual Life Cash Value comments (optional):
- 08 Additional state specific Individual Life Non-Cash Value comments (optional):

Life MCAS Data Elements



Market Conduct Data

Life Policies

- Individual Life Cash Value
- Individual Life Non-Cash Value
- Do **not** include Accidental Death and Dismemberment policies

Data Reporting Methodology



Replacements

Life

		Individual Life Cash Value	Individual Life Non-Cash Value
09	Number of replacement policies issued during the period.		
10	Number of internal replacements issued during the period.		
11	Number of external replacements issued during the period.		
12	Number of policies replaced where age of insured at replacement was < 65.		-
13	Number of policies replaced where age of insured at replacement was age 65 and over.		-
14	Number of policies surrendered under 2 years from policy issue.		-
15	Number of policies surrendered between 2 years and 5 years from policy issue.		-
16	Number of policies surrendered between 6 years and 10 years from policy issue.		-
17	Number of policies surrendered during the period.		-
18	Number of new policies issued during the period where age of insured at issue was < 65.		-
19	Number of new policies issued during the period where age of insured at issue was age 65 and over.		-

January 1, 2017 – December 31, 2017

Replacements

Life

		Individual Life Cash Value	Individual Life Non-Cash Value
09	Number of replacement policies issued during the period.		
10	Number of internal replacements issued during the period.		
11	Number of external replacements issued during the period.		
12	Number of policies replaced where age of insured at replacement was < 65.		
13	Number of policies replaced where age of insured at replacement was age 65 and over.		X
14	Number of policies surrendered under 2 years from policy issue.		-
15	Number of policies surrendered between 2 years and 5 years from policy issue.		-
16	Number of policies surrendered between 6 years and 10 years from policy issue.		-
17	Number of policies surrendered during the period.		-
18	Number of new policies issued during the period where age of insured at issue was < 65.		-
19	Number of new policies issued during the period where age of insured at issue was age 65 and over.		-

January 1, 2017 – December 31, 2017

Life & Annuities Data Call & Definitions

Replacement Policy

A policy and/or annuity contract application received by your company that is intended to replace an existing policy and/or annuity contract according to each state's definition of a replacement. This may include both external and internal replacements according to each state's replacement law.

Life & Annuities Data Call & Definitions

Replacements Include:

- Loan purchases, if the original policy is surrendered.
- Surrenders, if a replacement policy is issued in conjunction with the surrender.
- 1035 exchanges.

Life & Annuities Data Call & Definitions

Replacements Do Not Include:

- Policy conversions.
- Exchanges of a group policy for an individual policy.

Replacement



2 Replacements

Internal Replacement



Your Company

Original Policy



Your Company

Replacement



External Replacement



Outside Company

Original Policy



Your Company

Replacement



Surrenders

Life

		Individual Life Cash Value	Individual Life Non-Cash Value
09	Number of replacement policies issued during the period.		
10	Number of internal replacements issued during the period.		
11	Number of external replacements issued during the period.		
12	Number of policies replaced where age of insured at replacement was < 65.		
13	Number of policies replaced where age of insured at replacement was age 65 and over.		
14	Number of policies surrendered under 2 years from policy issue.		
15	Number of policies surrendered between 2 years and 5 years from policy issue.		
16	Number of policies surrendered between 6 years and 10 years from policy issue.		
17	Number of policies surrendered during the period.		
18	Number of new policies issued during the period where age of insured at issue was < 65.		
19	Number of new policies issued during the period where age of insured at issue was age 65 and over.		



Life & Annuities Data Call & Definitions

Surrenders:

- Life Insurance policies or annuity contracts terminated at the request of the policy owner



Life & Annuities Data Call & Definitions

Surrenders Do Not Include:

- Life Insurance policies or annuity contracts not taken or cancelled during the free look period
- For annuities, systematic withdrawals and partial withdrawals

Surrenders

Life

	Individual Life Cash Value	Individual Life Non-Cash Value
09	Number of replacement policies issued during the period.	
10	Number of internal replacements issued during the period.	
11	Number of external replacements issued during the period.	
12	Number of policies replaced where age of insured at replacement was < 65.	
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14	Number of policies surrendered under 2 years from policy issue.	
15	Number of policies surrendered between 2 years and 5 years from policy issue.	
16	Number of policies surrendered between 6 years and 10 years from policy issue.	
17	Number of policies surrendered during the period.	
18	Number of new policies issued during the period where age of insured at issue was < 65.	
19	Number of new policies issued during the period where age of insured at issue was age 65 and over.	



Policies Issued

- 15 Number of policies surrendered between 2 years and 5 years from policy issue.
- 16 Number of policies surrendered between 6 years and 10 years from policy issue.
- 17 Number of policies surrendered during the period.
- 18 Number of new policies issued during the period where age of insured at issue was < 65.
- 19 Number of new policies issued during the period where age of insured at issue was age 65 and over.
- 20 Number of new policies issued during the period.
- 21 Number of policies applied for during the period.

Policies Issued

- | | Individual Life
Cash Value | Individual Life
Non-Cash Value |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 18 Number of new policies issued during the period where age of insured at issue was < 65. | | X |
| 19 Number of new policies issued during the period where age of insured at issue was age 65 and over. | | |

Policies Issued

15	Number of policies surrendered between 2 years and 5 years from policy issue.
16	Number of policies surrendered between 6 years and 10 years from policy issue.
17	Number of policies surrendered during the period.
18	Number of new policies issued during the period where age of insured at issue was < 65.
19	Number of new policies issued during the period where age of insured at issue was age 65 and over.
20	Number of new policies issued during the period.
21	Number of policies applied for during the period.

January 1, 2017 – December 31, 2017

Policies Issued

- Joint policies – Use the age of the oldest insured when reporting policies issued broken out by age
- Internal and External replacements should be reported as new policies/contracts issued during the reporting period, as well as reported in the numbers of internal and external replacements.

Policies Applied For

Life

20	Number of new policies issued during the period.
21	Number of policies applied for during the period.
22	Number of free looks during the period.
23	Number of policies in force at the end of the period.
24	Dollar amount of direct written premium during the period.
25	Face amount of insurance issued during the period.
26	Face amount of insurance in force at the end of the period.
27	Number of complaints received directly from any person or entity other than the DOI.

Life & Annuities Data Call & Definitions

Policies/Contracts Applied For

Applications for life insurance or annuities that are submitted to the company which have or will result in a formal offer of an insurance or annuity contract or a formal declination of the application by the company. Applications that are declined by a broker-dealer or producer and never reviewed by the company are not included in this count.

Free Looks

Life

20	Number of new policies issued during the period.
21	Number of policies applied for during the period.
22	Number of free looks during the period.
23	Number of policies in force at the end of the period.
24	Dollar amount of direct written premium during the period.
25	Face amount of insurance issued during the period.
26	Face amount of insurance in force at the end of the period.
27	Number of complaints received directly from any person or entity other than the DOI.

Life & Annuities Data Call & Definitions

Free Look

A set number of days provided in an insurance or annuity contract that allows time for the purchaser to review the contract provisions with the right to return the contract for a full refund of all monies paid. Report the number of policies or contracts that were returned by the owner under the free look provision during the period, regardless of the original issuance date.

Free Looks



Policies with Free Look Provision



Policies where Free Look Provision was Exercised

Free Looks



Counts as Free Look



Counts as Policy Issued

Free Looks

Life

- 20 Number of new policies issued during the period.
- 21 Number of policies applied for during the period.
- 22 Number of free looks during the period.
- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct written premium during the period.
- 25 Face amount of insurance issued during the period.

January 1, 2017 – December 31, 2017

Policies In Force

Life

- 20 Number of new policies issued during the period.
- 21 Number of policies applied for during the period.
- 22 Number of free looks during the period.
- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct written premium during the period.
- 25 Face amount of insurance issued during the period.

End of Reporting Period December 31, 2017

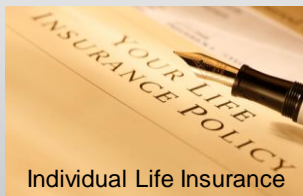
Premiums

Life

- 20 Number of new policies issued during the period.
- 21 Number of policies applied for during the period.
- 22 Number of free looks during the period.
- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct written premium during the period.

The actual amount of direct premiums written during the reporting period and should be determined in the same manner used on the financial annual statement

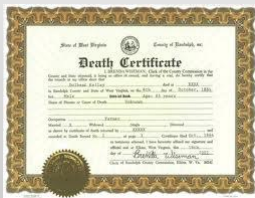
Life Insurance Premium



Face Amount

- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct written premium during the period.
- 25 Face amount of insurance issued during the period.
- 26 Face amount of insurance in force at the end of the period.
- 27 Number of complaints received directly from any person or entity other than the DOI.

Face Amount



Complaints

- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct written premium during the period.
- 25 Face amount of insurance issued during the period.
- 26 Face amount of insurance in force at the end of the period.
- 27 Number of complaints received directly from any person or entity other than the DOI.



Life & Annuities Data Call & Definitions

Complaint

Any written communication that expresses dissatisfaction with a specific person or entity subject to regulation under the state's insurance laws. An oral communication, which is subsequently converted to a written form in order to be analyzed and acted upon, will meet the definition of a complaint for this purpose.

Life & Annuities Data Call & Definitions

Complaints Include:

- Any complaint regardless of the subject of the complaint (claims, underwriting, marketing, etc.)
- Complaints received from third parties.

Claims

23	Number of policies in force at the end of the period.
24	Dollar amount of direct premium during the period.
25	Face amount of insurance issued during the period.
26	Face amount of insurance in force at the end of the period.
27	Number of complaints received directly from any person or entity other than the DOI.
28	Number of death claims closed with payment, during the period, within 60 days from the date the claim was received (Include claims where the final decision was payment in full, and was made within 60 days from when the claim was received)
29	Number of death claims closed with payment, during the period, beyond 60 days from the date the claim was received (Include claims where the final decision was payment in full, and was NOT made within 60 days from when the claim was received)
30	Number of death claims closed with payment, during the period, within 60 days from the date of due proof of loss (Include claims where the final decision was payment in full, and was made within 60 days from when the date of due proof of loss occurred)
31	Number of death claims closed with payment, during the period, beyond 60 days from the date of due proof of loss (Include claims where the final decision was payment in full, and was NOT made within 60 days from the date of due proof of loss occurred)
32	Number of death claims denied, resisted or compromised during the period.
33	Number of death claims closed with payment during the period, which occurred within the contestability period.
34	Number of death claims denied during the period, which occurred within the contestability period.
35	Number of death claims received during the period.

Claims

- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct premium during the period.
- 25 Face amount of insurance issued during the period.
- 26 Face amount of insurance in force at the end of the period.
- 27 Number of complaints received directly from any person or entity other than the DOI.
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- 34 Number of death claims denied during the period, which occurred within the contestability period.
- 35 Number of death claims received during the period.

Claims

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Claims

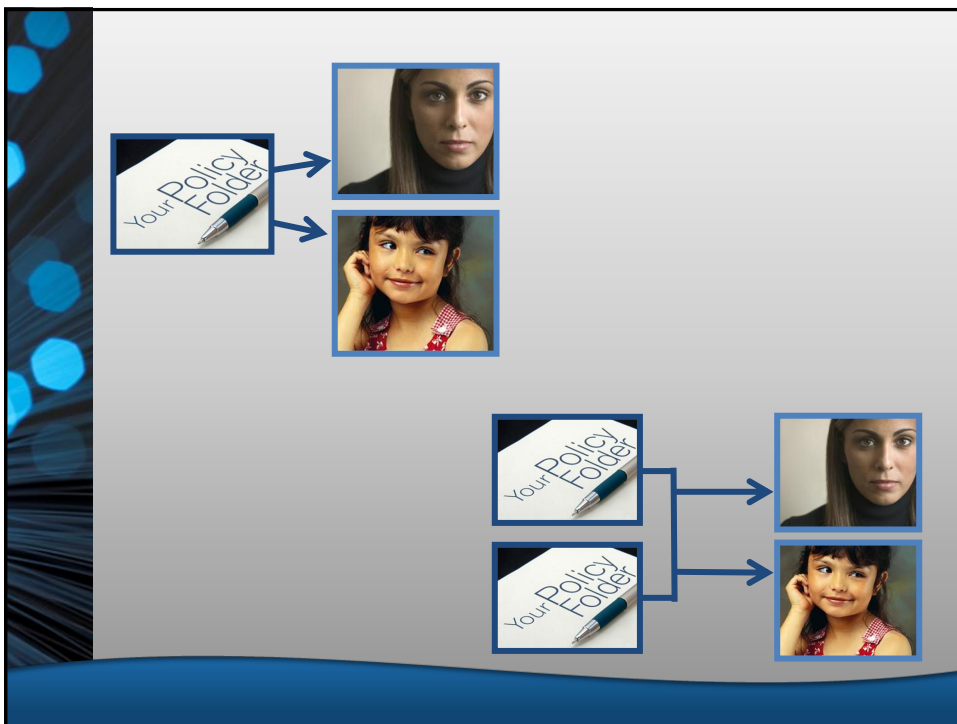
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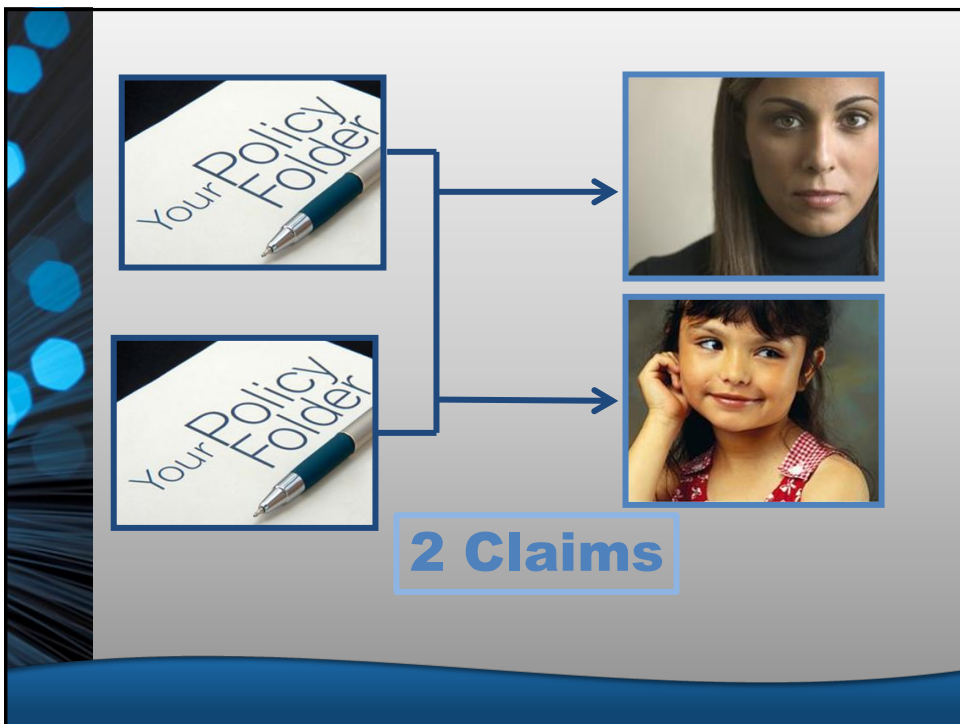
January 1, 2017 – December 31, 2017

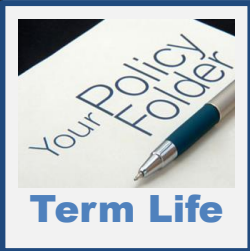
December 2016							
Week	Su	Mo	Tu	We	Th	Fr	Sa
48					1	2	3
49	4	5	6	7	8 Proof of Loss	9	10
50	11	12	13	14	15	16	17
51	18	19	20	21	22	23	24
52	25	26	27	28	29	30	31

Paid within 60 days

January 2017							
Week	Su	Mo	Tu	We	Th	Fr	Sa
1	1	2	3	4	5	6	7
2	8	9	10	11	12	13	14
3	15	16	17	18	19	20	21
4	22	23	24	25	26	27	28
5	29	30	31				





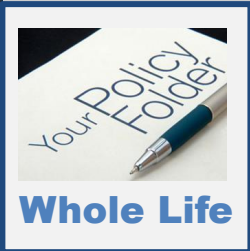


Term Life



1 Claim

**Without
Cash
Value**

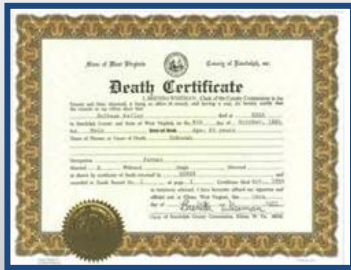


Whole Life



1 Claim

**With
Cash
Value**



Days to payment for due proof of loss is measured from:

**Date the due Proof of Loss was received
To
Date the Payment Issued**



Days to payment for the claim received is measured from:

**Date the claim was received
To
Date the Payment Issued**

Claims

- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct premium during the period.
- 25 Face amount of insurance issued during the period.
- 26 Face amount of insurance in force at the end of the period.
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- 34 Number of death claims denied during the period, which occurred within the contestability period.
- 35 Number of death claims received during the period.



A demand for payment was made, but payment was not made.



A demand for payment was made, but payment was not made.



The settlement amount was less than the policy face amount.





A demand for payment was made, but payment was not made.



The settlement amount was less than the policy face amount.



The claim is in dispute and remains unresolved at the end of the reporting period.



During the Period



End of the Period

Claims

23	Number of policies in force at the end of the period.
24	Dollar amount of direct premium during the period.
25	Face amount of insurance issued during the period.
26	Face amount of insurance in force at the end of the period.
27	Number of complaints received directly from any person or entity other than the DOI.
28	Number of death claims closed with payment, during the period, within 60 days from the date the claim was received (Include claims where the final decision was payment in full, and was made within 60 days from when the claim was received)
29	Number of death claims closed with payment, during the period, beyond 60 days from the date the claim was received (Include claims where the final decision was payment in full, and was NOT made within 60 days from when the claim was received)
30	Number of death claims closed with payment, during the period, within 60 days from the date of due proof of loss (Include claims where the final decision was payment in full, and was made within 60 days from when the date of due proof of loss occurred)
31	Number of death claims closed with payment, during the period, beyond 60 days from the date of due proof of loss (Include claims where the final decision was payment in full, and was NOT made within 60 days from the date of due proof of loss occurred)
32	Number of death claims denied, resisted or compromised during the period.
33	Number of death claims closed with payment during the period, which occurred within the contestability period.
34	Number of death claims denied during the period, which occurred within the contestability period.
35	Number of death claims received during the period.

Life & Annuities Data Call & Definitions

Contestability Period

- The contestability period is the period of time before a policy's incontestability clause becomes effective.
- During this period, a company may contest a claim based upon material misrepresentation or concealment during the policy application process.
- The contestability period is usually 2 years.

Life & Annuities Data Call & Definitions

Contestability Period

Do not report claims on guaranteed issue life policies and do not report claims that are contested after the incontestability clause is in effect.



Guaranteed Issue



Contested after Incontestability Clause in effect

Life & Annuities Data Call & Definitions

REPORT:



During Contestability Period

Claims

- 23 Number of policies in force at the end of the period.
- 24 Dollar amount of direct premium during the period.
- 25 Face amount of insurance issued during the period.
- 26 Face amount of insurance in force at the end of the period.
- 27 Number of complaints received directly from any person or entity other than the DOI.
- 28 Number of death claims closed with payment, during the period, within 60 days from the date the claim was received (Include claims where the final decision was payment in full, and was made within 60 days from when the claim was received)
- 29 Number of death claims closed with payment, during the period, beyond 60 days from the date the claim was received (Include claims where the final decision was payment in full, and was NOT made within 60 days from when the claim was received)
- 30 Number of death claims closed with payment, during the period, within 60 days from the date of due proof of loss (Include claims where the final decision was payment in full, and was made within 60 days from when the date of due proof of loss occurred)
- 31 Number of death claims closed with payment, during the period, beyond 60 days from the date of due proof of loss (Include claims where the final decision was payment in full, and was NOT made within 60 days from the date of due proof of loss occurred)
- 32 Number of death claims denied, resisted or compromised during the period.
- 33 Number of death claims closed with payment during the period, which occurred within the contestability period.
- 34 Number of death claims denied during the period, which occurred within the contestability period.
- 35 Number of death claims received during the period.

MCAS Data Element Differences for Annuities

Annuity Replacement Age Breakout

Annuities

09	Number of replacement contracts issued during the period.
10	Number of internal replacement contracts issued during the period.
11	Number of external replacement contracts issued during the period.
12	Number of contracts replaced where age of annuitant at replacement was < 65.
13	Number of contracts replaced where age of annuitant at replacement was 65 to 80.
14	Number of contracts replaced where age of annuitant at replacement was > 80.
15	Number of new immediate contracts issued during the period.
16	Number of new deferred contracts issued during the period where age of annuitant was < 65.
17	Number of new deferred contracts issued during the period where age of annuitant was 65 to 80.
18	Number of new deferred contracts issued during the period where age of annuitant was > 80.
19	Number of new deferred contracts issued during the period.

Immediate and Deferred Contracts

Annuities

09	Number of replacement contracts issued during the period.
10	Number of internal replacement contracts issued during the period.
11	Number of external replacement contracts issued during the period.
12	Number of contracts replaced where age of annuitant at replacement was < 65.
13	Number of contracts replaced where age of annuitant at replacement was 65 to 80.
14	Number of contracts replaced where age of annuitant at replacement was > 80.
15	Number of new immediate contracts issued during the period.
16	Number of new deferred contracts issued during the period where age of annuitant was < 65.
17	Number of new deferred contracts issued during the period where age of annuitant was 65 to 80.
18	Number of new deferred contracts issued during the period where age of annuitant was > 80.
19	Number of new deferred contracts issued during the period.

Life & Annuities Data Call & Definitions

Annuity Considerations

Funds deposited to or used to purchase annuity contracts issued by the company.

- Do not report “Other Considerations” or “Deposit-Type Contract” considerations.
- MCAS requires that you report only allocated considerations on contracts that have a mortality or morbidity risk.

Annuity Considerations





Concludes
Market Conduct Annual Statement
2017 Data Year Filings

Life & Annuity
Data Elements



Market Conduct Annual Statement
2017 Data Year Filings

Validation and Review

MCAS Market Conduct Annual Statement
ABC Insurance Company (XXXX)

Home Filing Matrix Data Upload Waivers & Extensions Attestation Company Ratios User Assignment Help Desk Form

FILING MATRIX

	Private Passenger Auto	Homeowners	Long Term Care		Private Passenger Auto	Homeowners	Long Term Care		Private Passenger Auto	Homeowners	Long Term Care
Alabama	---	---	---	Kentucky	---	✓	---	Oklahoma	---	---	---
Alaska	---	---	---	Louisiana	---	✓	---	Oregon	→	---	---
Arizona	---	✓	---	Maine	---	---	---	Pennsylvania	→	✓	---
Arkansas	---	---	---	Maryland	---	---	---	Rhode Island	---	✓	---
California	→	---	---	Massachusetts	---	---	---	South Carolina	---	---	---
Colorado	→	✓	---	Michigan	---	---	---	South Dakota	---	---	---
Connecticut	---	---	---	Minnesota	→	---	---	Tennessee	---	---	---
Delaware	---	✓	---	Mississippi	---	✓	---	Texas	---	---	---
District Of Columbia	---	---	---	Missouri	---	---	---	Utah	---	---	---
Florida	---	🔧	---	Montana	---	---	---	Vermont	---	---	---
Georgia	---	---	---	Nebraska	---	---	---	Virginia	---	✓	---
Hawaii	---	---	---	Nevada	---	🔧	---	Washington	---	---	---
Idaho	---	✓	---	New Hampshire	---	---	---	West Virginia	---	---	---
Illinois	---	---	---	New Jersey	---	✓	---	Wisconsin	---	✓	---
Indiana	---	✓	---	New Mexico	---	---	---	Wyoming	---	---	---
Iowa	---	---	---	North Carolina	---	✓	---				
Kansas	---	---	---	Ohio	---	---	---				

Legend: 🌟 =Required 🔧 =In Progress ✓ =Filed ✖ =Error 🚫 =Waived 🕒 =Extended --- =Not Required

Validation and Review

- Listed warnings

Validation and Review

- Listed warnings
- Ratios

2017 Market Conduct Annual Statement Ratios

Property & Casualty (Private Passenger Auto & Homeowner)

Ratio 1. The number of claims closed without payment compared to the total number of claims closed

$$\left(\frac{\text{\# of claims closed without payment}}{\text{\# of claims closed with payment} + \text{\# of claims closed without payment}} \right)$$

Ratio 2. Percentage of claims unprocessed at the end of the period

$$\left(\frac{\text{\# of claims open at the beginning of period} + \text{\# of claims opened during period} - \text{\# of claims closed with payment} - \text{\# of claims closed without payment}}{\text{\# of claims open at the beginning of period} + \text{\# of claims opened during period}} \right)$$

Ratio 3. Percentage of claims paid beyond 60 days

$$\left(\frac{\text{\# of claims settled beyond 60 days}}{\text{\# of claims settled for all durations}} \right)$$

Ratio 4. Non-renewals to policies in force

$$\left(\frac{\text{\# of non-renewals}}{\text{\# of policies in force}} \right)$$

Ratio 5. Cancellations over 60 days to policies in force

$$\left(\frac{\text{\# of cancellations 60 days or more after effective date}}{\text{\# of policies in force}} \right)$$

Ratio 6. Cancellations under 60 days to new policies issued

$$\left(\frac{\text{\# of cancellations that occur in the first 59 days after effective date}}{\text{\# of new policies issued}} \right)$$

Ratio 7. Suits opened during the period to claims closed without payment

$$\left(\frac{\text{\# of suits opened during the period}}{\text{\# of claims closed without payment}} \right)$$



Validation and Review

- Listed warnings
- Ratios
- Data comparisons



Validation and Review

- Listed warnings
- Ratios
- Data comparisons
- General review

[Log In](#)

Don't have an MCAS login?
Click Here to get it.

[Help](#) | [FAQ \(PDF\)](#) | [Contact](#)

GENERAL FILING INFORMATION

[Participation Requirements \(PDF\)](#)

RESOURCES

Data Collection Worksheets (Blanks)

- Annuity (PDF)
- Health (PDF)
- Homeowners (PDF)
- Life (PDF)
- Long-Term Care (PDF)
- Private Passenger Auto (PDF)

Data Call and Definitions (Instructions)

- Health (PDF)
- Homeowners (PDF)
- Life & Annuity (PDF)
- Hybrid LTC (PDF)
- Standalone LTC (PDF)
- Private Passenger Auto (PDF)

Summary of 2017 Changes (PDF)

[2017 MCAS User Guide \(PDF\)](#)

CSV Instructions and Resources

- CSV Data Upload Instructions (PDF)
- CSV Assistant Instructions (PDF)

Key 2017 MCAS Dates

Date	Event
December 15, 2017	Call letters to companies
January 24, 2018	Last day to submit 2016 corrections (See FAQ Document)
February - March, 2018	MCAS training webinars (Webinar information coming later this year)
March 15, 2018	2017 filings may be submitted via the online MCAS filing tool
April 30, 2018	MCAS submissions due for all lines of business except Health
July 1, 2018	MCAS industry scorecards posted to MCAS Web page for all lines of business except Health
September 30, 2018	MCAS submissions due for Health only
December 1, 2018	MCAS industry scorecards posted to MCAS Web page for Health only

New for 2017 Data Year

- The Health MCAS was adopted on August 29, 2016 at the NAIC Executive/Plenary session during the NAIC Summer National Meeting. Health MCAS data will be collected for the first time beginning with the 2017 data year. The reporting deadline for the first filing year will be September 30, 2018.
- The reporting threshold for Arkansas has changed. The Arkansas threshold was previously \$7 million in premium for all MCAS lines of business. Beginning with the 2017 data year, the Arkansas threshold is \$50,000 for all MCAS lines of business. Please note that LTC for all other participating jurisdictions requires reporting for any business written.

What Do Documents Found on this Web Page Tell Me?

General Filing Information

- Participation Requirements – Detailed information to assist in determining if your company is required to submit MCAS data

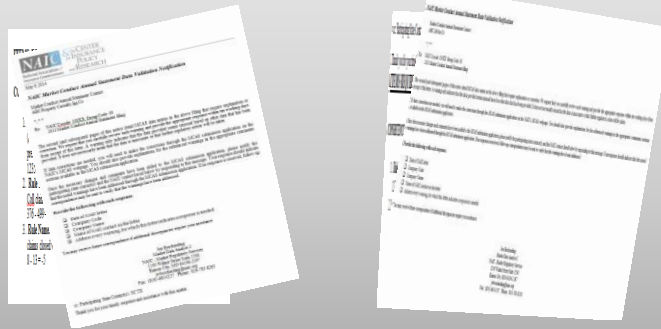
Resources

- Data Collection Worksheets (Blanks) – Table layout representation of the required data elements
- Data Call and Definitions (Instructions) – Listing of MCAS data elements and definitions to follow when preparing data for submission
- MCAS User Guide – Information about how to use the MCAS application and a listing of data validations used within the application
- CSV Data Upload Instructions – Layout guidelines for preparing a CSV file for uploading to the MCAS application (The use of a CSV file is not required.)
- CSV Assistant Instructions – Guidance for using the CSV Assistance Files

State Regulators have Oversight



Data Validation Notifications



The ABC Group

Company A

Company B

Company C

Private Passenger Auto Interrogatories		Yes No	Explanation
		Response	
01	Were there policies in force during the reporting period that provided Collision coverage?	--	
02	Were there policies in force during the reporting period that provided Comprehensive coverage?	--	
03	Were there policies in force during the reporting period that provided Bodily Injury coverage?	--	
04	Were there policies in force during the reporting period that provided Property Damage coverage?	--	
05	Were there policies in force during the reporting period that provided Uninsured Motorists and Underinsured Motorists (UMBI) coverage?	--	
06	Were there policies in force during the reporting period that provided Uninsured Motorists and Underinsured Motorists (UMPD) coverage?	--	
07	Were there policies in force during the reporting period that provided Medical Payments coverage?	--	
08	Were there policies in force during the reporting period that provided Combined Single Limits coverage?	--	
09	Were there policies in force during the reporting period that provided Personal Injury Protection coverage?	--	
10	Was the company actively writing policies in the state at year end?	--	
11	Does the company write in the non-standard market?	--	
12	If Yes, what percentage of your business is non-standard?	--	
13	If Yes, how is non-standard defined?	--	
14/15	Has the company had a significant event/business strategy that would affect data for this reporting period?	--	
16/17	Has all or part of this block of business been sold, closed or moved to another company during the year?	--	Comments
18	How does the company treat subsequent supplemental or additional payments on previously closed claims?	--	
19	Additional state specific Claims comments (optional):	--	
20	Additional state specific Underwriting comments (optional):	--	

ABC Insurance Company (XXXXX)

Home | Filing Matrix | Data Upload | Waivers & Extensions | **Attestation** | Company Ratios | User Assignment | Help Desk Form

ATTESTATION

By checking the "I attest" box below, I understand, agree and certify on behalf of the named company that:

- I am authorized to submit the Market Conduct Annual Statement on behalf of the named company and to bind the company to the statements in this attestation;
- I am knowledgeable of the information required to be provided in the Market Conduct Annual Statement filed by this company and have reviewed this filing;
- To the best of my knowledge and belief, this filing represents a full and accurate statement of the information required to be provided in the Market Conduct Annual Statement pursuant to the applicable instructions; and
- I am aware that the state insurance department(s) receiving the data may initiate regulatory action as authorized by law in a specific jurisdiction if the data submitted in the MCAS is inaccurate, incomplete, or found to be materially false, misleading or emissive;
- I affirm that the company is able to accurately trace the data as reported to its source within the company and if necessary recreate the MCAS results as reported in this filing.

I attest:

First Name MI Last Name Suffix Company Title

I attest:

First Name MI Last Name Suffix Company Title

NOTE regarding signature requirements: The company must provide the name for at least two individuals who are able to attest that the criteria listed above have been met, and attest to the overall accuracy of the MCAS filing. Both attestors should have participated in the review and validation of the filing. We recommend that one person be the individual with operational responsibility for the source data such as a responsible individual from claims, underwriting or compliance. We recommend that the second person should be a responsible IT person that participated in the creation of the data in the filing.

Overall Company Comments for 2014 Filing Year

