

NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

<p style="text-align: right;">DATE: <u>05/05/2016</u></p> <p>CONTACT PERSON: <u>Bob Schump</u></p> <p>TELEPHONE: _____</p> <p>EMAIL ADDRESS: <u>rschump@naic.org</u></p> <p>ON BEHALF OF: <u>Surplus Lines (C) Working Group</u></p> <p>NAME: <u>Bob Schump</u></p> <p>TITLE: <u>IID Manager</u></p> <p>AFFILIATION: <u>NAIC staff</u></p> <p>ADDRESS: _____</p>	<p style="text-align: center;">FOR NAIC USE ONLY</p> <p>Agenda Item # <u>2016-24BWG MOD</u></p> <p>Year <u>2017</u></p> <p>Changes to Existing Reporting [X]</p> <p>New Reporting Requirement []</p> <hr/> <p style="text-align: center;">REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT</p> <p>No Impact [X]</p> <p>Modifies Required Disclosure []</p> <hr/> <p style="text-align: center;">DISPOSITION</p> <p>[] Rejected For Public Comment</p> <p>[] Referred To Another NAIC Group</p> <p>[] Received For Public Comment</p> <p>[X] Adopted Date <u>08/09/2016</u></p> <p>[] Rejected Date _____</p> <p>[] Deferred Date _____</p> <p>[] Other (Specify) _____</p>
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BLANK(S) TO WHICH PROPOSAL APPLIES

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> ANNUAL STATEMENT | <input checked="" type="checkbox"/> QUARTERLY STATEMENT | |
| <input checked="" type="checkbox"/> INSTRUCTIONS | <input type="checkbox"/> CROSSCHECKS | <input checked="" type="checkbox"/> BLANK |
| <input type="checkbox"/> Life and Accident & Health | <input checked="" type="checkbox"/> Property/Casualty | <input type="checkbox"/> Health |
| <input type="checkbox"/> Separate Accounts | <input type="checkbox"/> Fraternal | <input type="checkbox"/> Title |
| <input type="checkbox"/> Other Specify | | |

Anticipated Effective Date: 1st Quarter 2017

IDENTIFICATION OF ITEM(S) TO CHANGE

It is requested that an additional letter code (D) and a code description be added to the "Explanation of basis of allocation of premiums by states, etc." section for use on Schedule T-Exhibit of Premiums Written Allocated by States and Territories. The change would apply to both the Quarterly and Annual Statement Blanks and referenced in the Quarterly and Annual Statement Instructions.

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

Ten states have approved to allow their domestic P/C insurers to write excess and surplus lines insurance in their state of domicile. There is presently no coding option available to accurately identify these insurers commonly known as Domestic Surplus Lines Insurers (DSLIs). The addition of a new letter code will allow for DSLI insurers to correctly identify themselves in the Active Status column of Schedule T, thus allowing for a more accurate total of excess and surplus lines premiums. Looking forward, it is anticipated that additional states will enact legislation/regulation allowing this type of insurer. The new code will correctly identify DSLIs and prevent an underreporting of surplus lines premiums and end the current conflict for DSLIs between using the codes (L) Licensed, and (E) Eligible.

NAIC STAFF COMMENTS

Comment on Effective Reporting Date: _____

Other Comments:

The proposed coding will allow users to correctly query DSLI premium amounts from the domiciliary state.

** This section must be completed on all forms.

Revised 6/13/2009

ANNUAL STATEMENT BLANK – PROPERTY

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN
Allocated By States And Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premium Written for Federal Purchasing Groups (Included in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums 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. Dist. 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. No. Carolina.....NC									
35. No. Dakota.....ND									
36. Ohio.....OH									
37. Oklahoma.....OK									
38. Oregon.....OR									
39. Pennsylvania.....PA									
40. Rhode Island.....RI									
41. So. Carolina.....SC									
42. So. 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. U.S. Virgin Islands.....VI									
56. Northern Mariana Islands.....MP									
57. Canada.....CAN									
58. Aggregate other alien.....OT	XXX								
59. Totals	(a)								
DETAILS OF WRITE-INS									
58001.....	XXX								
58002.....	XXX								
58003.....	XXX								
58998. Sum. of remaining write-ins for Line 58 from overflow page.....	XXX								
58999. Totals (Lines 58001 through 58003+58998) (Line 58 above)	XXX								

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI); (D) DSLI - Domestic Surplus Lines Insurer (DSLII) - Reporting Entities eligible or approved to write Surplus Lines in the state of domicile; (N) None of the above - Not allowed to write business in the state

Explanation of basis of allocation of premiums by states, etc.

(a) Insert the number of D and L responses except for Canada and Other Alien

ANNUAL STATEMENT INSTRUCTIONS – PROPERTY

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

ALLOCATED BY STATES AND TERRITORIES

This schedule is intended to report premiums, losses and other items allocated to each state or territory during the current reporting period, regardless of the reporting entity’s license status in that state or territory. Allocation of premiums and the other items reported on this schedule should be based on the physical location of the insured risk (except individual and group health insurance). Amounts reported as losses should be assigned to the state in which the associated premium has been allocated.

All U.S. business must be allocated by state regardless of license status.

Column 1 – Active Status

Use the following codes to identify the Reporting Entity’s status for each state or territory reported in the schedule as of the end of the reporting period. Enter the code that applies to the Reporting Entity’s status in the state or territory.

L – Licensed or Chartered (Licensed Carrier and Domiciled Risk Retention Groups referred to in some states as admitted.)

R – Registered (Non-domiciled Risk Retention Groups)

E – Eligible (Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile – see DSLI). In some states referred to as nonadmitted.)

Q – Qualified (Qualified or Accredited Reinsurer)

D – DSLI (Domestic Surplus Lines Insurer (DSLI) – Reporting Entities eligible or approved authorized to write Surplus Lines in the state of domicile)

N – None of the above (Not allowed to write business in the state)

Column 2 – Direct Premiums Written

Total to agree with the total of Column 1 in Underwriting and Investment Exhibit, Part 1B.

Column 5 – Direct Losses Paid (Deducting Salvage)

Total to agree with the total of Column 1 in Underwriting and Investment Exhibit, Part 2.

=====**Detail Eliminated To Conserve Space**=====

QUARTERLY STATEMENT BLANK – PROPERTY

**SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN
Current Year to Date – Allocated by States and Territories**

States, etc.	1 Active Status	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
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. Dist. 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. No. Carolina.....NC							
35. No. Dakota.....ND							
36. Ohio.....OH							
37. Oklahoma.....OK							
38. Oregon.....OR							
39. Pennsylvania.....PA							
40. Rhode Island.....RI							
41. So. Carolina.....SC							
42. So. 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. U.S. Virgin Islands.....VI							
56. Northern Mariana Islands.....MP							
57. Canada.....CAN							
58. Aggregate Other Alien.....OT	XXX						
59. Totals	(a)						
DETAILS OF WRITE-INS							
58001.....	XXX						
58002.....	XXX						
58003.....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX						
58999. TOTALS (Lines 58001 through 58003 plus 58998) Line 58 above)	XXX						

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile - see DSLI); (D) DSLI - Domestic Surplus Lines Insurer (DSLI) - Reporting Entities eligible or approved authorized to write Surplus Lines in the state of domicile; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

QUARTERLY STATEMENT INSTRUCTIONS – PROPERTY

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

CURRENT YEAR TO DATE – ALLOCATED BY STATES AND TERRITORIES

This schedule is intended to report premiums, losses and other items allocated to each state or territory during the current reporting period, regardless of the reporting entity’s license status in that state or territory. Allocation of premiums and the other items reported on this schedule should be based on the physical location of the insured risk (except individual and group health insurance). Amounts reported as losses should be assigned to the state in which the associated premium has been allocated.

All U.S. business must be allocated by state regardless of license status.

Column 1 – Active Status

Use the following codes to identify the Reporting Entity’s status for each state or territory reported in the schedule as of the end of the reporting period. Enter the code that applies to the Reporting Entity’s status in the state or territory.

- L – Licensed or Chartered (Licensed Insurance Carrier and Domiciled Risk Retention Groups referred to in some states as admitted.)
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- E – Eligible (Reporting Entities eligible or approved to write Surplus Lines in the state (other than their state of domicile – see DSLI). In some states referred to as nonadmitted.)
- Q – Qualified (Qualified or Accredited Reinsurer)
- D – DSLI (Domestic Surplus Lines Insurer (DSLII) – Reporting Entities eligible or approved authorized to write Surplus Lines in the state of domicile)
- N – None of the above (Not allowed to write business in the state)

Columns 2 & 3 – Direct Premiums Written

Display year-to-date direct premiums written by state for both the current and the prior year.

Include: Gross premiums, including policy and membership fees, less return premiums and premiums on policies not taken.



Detail Eliminated To Conserve Space

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