Medicare Supplement Insurance Report Online User Guide

Missouri Department of Commerce and Insurance

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Summary

To further assist our patrons, Medicare Supplement Claim reports can now be created and updated online through DCI Statistics Claim Reporting Portal. This tutorial guides users through the online system for data management. This guide does not provide information about requirements or regulations.

Site Address

https://apps.dci.mo.gov/ProfLiab/MedMal/Login.aspx

Account Management

Users require an approved account to create or update data. New users must create an account and receive approval prior to creating or updating data. Existing users will need to sign in to manage their account information.

Account Registration

Required Information: Users will need to create and/or provide the following information when registering for an account with DCI:

- Create a User Name
- Provide a valid Email Address
- Create a Password
- Provide Contact Name
- Provide Contact Phone Number
- Provide Contact Address Information
- Provide NAIC number(s) associated with type of filing(s)

Registration Process

New users must register with DCI to gain access to the application. See instruction for new user sign up: https://apps.dci.mo.gov/ProfLiab/MedMal/Login.aspx

Contact Information Updates

It is important to keep your contact information up-to-date, log into the account to manage account settings. You can change your password, email account, and contact information online through the account settings option. The system automatically approves updates immediately but account changes process nightly.

To log in, provide your username and password.

• If you forget your account login information, you may request your information sent to your onfile email address by selecting the "Can't access your account?" link.



Once you log in, the page redirects to the portal homepage. From the portal homepage, you can navigate to your account settings; select your NAIC code and form type.

Reporting

Once you have selected the NAIC code and form selection, you will be directed to the reporting form. Verify the Name of Company, NAIC group and company codes are correct. NOTE: Companies who have nothing to report are not required to file.

The Medicare Supplement Insurance Report form will appear as follows:

Note: If your company has data reported on Missouri Experience, the Countrywide Experience needs to be filled out too. If your company has no Missouri Experience to report, a report is not to be filed.

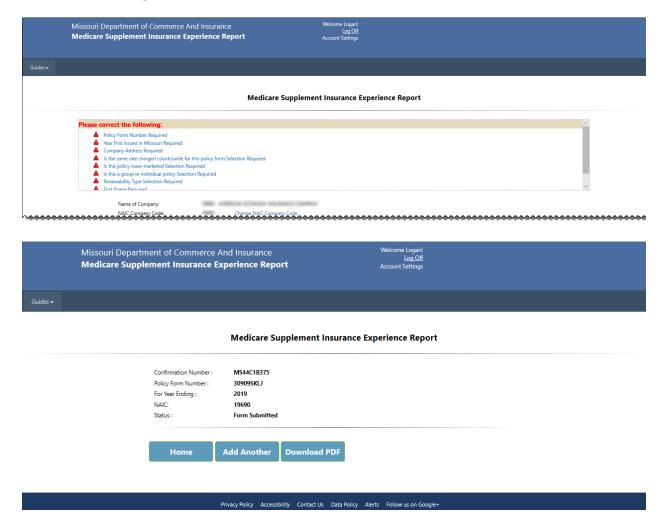
Screen shot appears in full on next page.

			Medicare S	Supplement I	nsurance Expe	erience Repo	rt		
Name of Compi NAIC Company NAIC Group Co Veer Ending: Name of Submi Title : Telephone Num EMAIL :	Code: de: tter:	y Code							
Is this policy m	d in Missouric ress; e charged countryw ass-marketed; or individual policy;	de for this policy for	Select Select		7987)		
Missouri Experi	ence Number of					1	1	1	
iE	Policies In Force 0 0 0 Claims Change TANK Reserves IBNR Re Change Ch	Whiten Premium of the	Total Loss	Paid Claim Count	Paid Loses	Total ciss Reserves 0 0 0 0	Incurred Claim Count 0 0 sscription	locured Loses 0 0 0	Eess Ratio
Countrywide Ea	perience							*	
Duration (Policy Year) 5+ 4 3 2 1 0 Yotal		Witten Previous 0 Same as Above	Farned Premium	Paid Claim Count	Paid Losses	Total loss Reserves	Incurred Claim Count	Incurred Losses	Loss Ratio

To SUBMIT the completed form:

Check the SAME AS ABOVE checkbox to fill the following preparer information with the information from the User Account. If other Preparer information is desired, it may be entered in the boxes.

Entry errors will appear after SUBMIT is selected. A notice box will appear at the top of the screen and will also give direction to what and where the error is.



Once a form has been SUBMITTED and ACCEPTED by our office, a CONFIRMATION NUMBER and STATUS will be displayed. Please download the PDF for your records. Use the HOME button to return to the home screen.

SAVE: Save the form in its current form.

PRINT: Print the form.

HOME: Returns to the HOME screen for form selection OR to enter/submit data for another company you are reporting for.

CANCEL: Removes all unsaved entries and returns to the HOME screen.

Contact Us

Contact the Department of Commerce and Insurance, Statistics Section, for help with completing this online data system by email at: Statistics@insurance.mo.gov

User Guide

This User Guide can be obtained from the *User Guide* menu as well as from the DCI web site at http://insurance.mo.gov/industry/filings/stats/Medicare Supplement User Guide v2.pdf

Logout

Before closing the application, be sure to logout. To logout, select the LOG OFF hyperlink at the top right corner of the page. Upon successful logout, the system redirects you to a confirmation page.