Governor Michael L. Parson State of Missouri



Division of Insurance Market Regulation

INSTRUCTIONS FOR FILING PAGE 19 SUPPLEMENT TO THE ANNUAL STATEMENTS FOR MISSOURI FOR YEAR ENDING DECEMBER 31, 2024

PLEASE READ CAREFULLY.

The Page 19 Supplement to the Annual Statements for Missouri form filing, due by March 1, 2025, can be filed electronically. Hard copies of this form will not be mailed.

The Page 19 Supplement to the Annual Statements for Missouri form collects data in greater detail than that of the Missouri State Page of the Annual Statement. All Property & Casualty companies must submit an accurate and complete business report for all lines specified per 20 CSR 200-1.037. The Supplement form may be found by going to insurance.mo.gov/forms and scrolling down to "Statistics Forms." A list of edits is included with the instructions to ensure data accuracy.

Before submission, please ensure that data conforms to the criteria enumerated under the **EDITS** section below. If amounts on the supplement form fail to reconcile to the corresponding amount on the annual statement, email an explanation to the address below explaining such discrepancies to avoid being contacted by this office.

A NONE report is required for companies with no Missouri business (i.e. a zero-filled report).

The Supplement is to be completed and received by the Missouri Department of Commerce & Insurance by March 1, 2025. Each company must file a separate submission. If your company cannot submit electronically, contact the Business Analytics/Statistics section to discuss filing options.

A copy of both the Supplement and the Missouri State Page of the Annual Statement should accompany your premium tax return. Please note that if you submit the Supplement using our online portal, you can print a copy before submitting it. Also note that the premium tax return is not the same filing as the Supplement, and the two filings go to two different divisions of the department. The premium tax return FAQs can be found on the DCI website <u>here</u>.

If you have any questions, please email the Business Analytics/Statistics Section at Statistics@insurance.mo.gov or call 573-751-3163.

Missouri Department of Commerce & Insurance Business Analytics/Statistics Section P.O. Box 690 Jefferson City, MO 65102 Missouri Department of Commerce & Insurance Business Analytics/Statistics Section Truman State Office Bldg. 301 W. High St., 5th Floor, Room 530 Jefferson City, MO 65101

ELECTRONIC FILING INSTRUCTIONS

The fillable form can be accessed on our electronic filing system <u>at this link</u>. Instructions for how to register for the portal can be found in the User Guide section of this document.

Once you complete all data fields on this form, you can print it by selecting the print button or click on the "SUBMIT" button to submit the report. A popup will appear saying the filing was submitted successfully. The data entered on the portal will be automatically saved if you need to edit your submission. Any subsequent submission will override the prior submission.

SUPPLEMENT INSTRUCTIONS AND EDIT VERIFICATION FORM

Data Edits for those who file the P&C (Yellow) Blank

For each of the following lines, test to ensure that amounts reported on the Missouri Supplement correspond to the following data elements on the State Page of the Annual Statement:

		Supplem	ient	State I	Page
Line of Business	Field Name	Line #	Column #	Line #	Column #
	Property & Casu	alty			
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Fire & Allied	Direct Defense & Cost Containment Expense Incurred	Sum(1(A), 1(B), 1(C))	4	Sum(1, 2.1)	9
Lines	Direct Losses Paid	1(C))	5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Federal Crop	Direct Defense & Cost Containment Expense Incurred	3(A)	4	2.2	9
-	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
National Flood	Direct Defense & Cost Containment Expense Incurred	4(A)	4	2.3	9
	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Private Crop	Direct Defense & Cost Containment Expense Incurred	3(B)	4	2.4	9
-	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Private Flood	Direct Defense & Cost Containment Expense Incurred	4(B)	4	2.5	9
	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Farmowners	Direct Defense & Cost Containment Expense Incurred	5	4	3	9
	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3	•	2
Homeowners	Direct Defense & Cost Containment Expense Incurred	Sum(6(A), 6(B),	4	4	9
	Direct Losses Paid	0(C))	5	1	5
	Direct Losses Incurred		6		6

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Direct Losses Paid5Direct Losses Incurred6	Earthquake	Direct Defense & Cost Containment Expense Incurred	13	4	12	9
Direct Losses Incurred 6 6	*	Direct Losses Paid		5		5
		Direct Losses Incurred		6		6

All A&Hincert Writen Premiums Examed331All A&HDirect Defense & Cost Containment Expense Incurred1413,2,14,15,1190Direct Losses Naud6660Direct Losses Incurred61012Workers00101012120Direct Defense & Cost Containment Expense Incurred1610121200001010121200001010121212000016101212120000161612121212000016161612 <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>						
All A&HImage: matrix part of the sector of the		Direct Written Premium		2		1
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Intert Losses Paid 5 -15.9 5 More Losses Incurred 0 6	All A&H	Direct Defense & Cost Containment Expense Incurred	14	4	13.2, 14, 15.1	9
Image: constraint of the section of		Direct Losses Paid		5	- 15.9)	5
Workers CompensationDirect Defense & Cost Containnent Expense Incurred Direct Losses Paid12Morkers CompensationDirect Defense & Cost Containnent Expense Incurred Direct Versien Premium Direct Written Premium Direct Defense & Cost Containnent Expense Incurred Direct Deses Paid31Other LiabilityDirect Defense & Cost Containnent Expense Incurred Direct Deses PaidSun(16(A), 12(A), 28(A), 28(B), 28(B), 28(A), 28(B), 28(A), 		Direct Losses Incurred		6		6
Workers CompensationImage definitionImage definition<		Direct Written Premium		2		1
Workers CompensationDirect Defense & Cost Containment Expense Incurred154169CompensationDirect Defense & Cost Containment Expense Incurred5666Other LiabilityDirect Defense & Cost Containment Expense Incurred55555Direct Defense & Cost Containment Expense Incurred0666<	TT 7 1	Direct Premiums Earned		3		2
CompensationDirect Losses Paid5Orbert Losses Incurred00Direct Defense & Cost Containment Expense IncurredSum(16(A), 16(B), 28, 10, 28(B), 29)11, 17, 2, 304Other LiabilityDirect Defense & Cost Containment Expense IncurredSum(16(A), 16(B), 28, 10, 28(B), 29)11, 17, 2, 304Direct Defense & Cost Containment Expense IncurredDirect Losses Paid20, 28(B), 28(B), 29)5Direct Defense & Cost Containment Expense Incurred16(C)417, 3Direct Defense & Cost Containment Expense Incurred16(C)417, 3Direct Defense & Cost Containment Expense Incurred16(C)417, 3Direct Defense & Cost Containment Expense Incurred16(C)418, 20Direct Defense & Cost Containment Expense Incurred16(C)418, 20Direct Defense & Cost Containment Expense Incurred1655Direct Defense & Cost Containment Expense Incurred1655Direct Defense & Cost Containment Expense Incurred18(A)(1)18(A)(1)18(A)(1)Private PassengerDirect Losses Incurred18(A)(1)18(A)(1)19(A)(2)Direct Defense & Cost Containment Expense Incurred18(A)(1)18(A)(1)19(A)(2)5Direct Defense & Cost Containment Expense Incurred18(A)(1)18(A)(1)19(A)(2)5Direct Defense & Cost Containment Expense Incurred18(A)(1)18(A)(1)19(A)(2)5Direct Defense & Cost Containment Expense Incurred18(A)(1)18(A)(1)19(A)(2)5 <td>Workers</td> <td>Direct Defense & Cost Containment Expense Incurred</td> <td>15</td> <td>4</td> <td>16</td> <td>9</td>	Workers	Direct Defense & Cost Containment Expense Incurred	15	4	16	9
Image: constraint of the constra	Compensation	Direct Losses Paid		5		5
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Other LiabilityImage: Direct Defense & Cost Containment Expense Incurred Direct Losses PaidSum(16,1), 28, 16(1), 28, 28(1), 28(1), 28(1), 28(1), 29(1), 28(1), 29(1), 28(1), 29(1), 2		Direct Written Premium		2		1
Other Liability Direct Defense & Cost Containment Expense Incurred 16(B), 28, 28(A), 28(B),		Direct Premiums Earned	Sum(16(A),	3		2
Direct Losses Paid 25(A), 26(B), 29 5 11.2, 30 55 Mired Direct Losses Incurred 0 6 6 6 Excess Workers Comp Direct Defense & Cost Containment Expense Incurred 16(C) 4 17.3, 30 55 Direct Defense & Cost Containment Expense Incurred 16(C) 4 17.3, 39 9 Product Liability Direct Defense & Cost Containment Expense Incurred 16(C) 4 17.3, 39 9 Product Liability Direct Defense & Cost Containment Expense Incurred 16 5 </td <td>Other Liability</td> <td>Direct Defense & Cost Containment Expense Incurred</td> <td>16(B), 28,</td> <td>4</td> <td>Sum(17.1, 17.2, 20)</td> <td>9</td>	Other Liability	Direct Defense & Cost Containment Expense Incurred	16(B), 28,	4	Sum(17.1, 17.2, 20)	9
Image: constraint of the section of		Direct Losses Paid	20(A), 20(B), 29)	5	17.2, 30)	5
$ \begin{array}{ c c c c c c } \mbox{Excess Workers} \\ \hline Excess Workers \\ Comp \end{array} \begin{array}{ c c c c c } \hline \mbox{Excess Workers} \\ \hline \mbox{Comp} \end{array} \begin{array}{ c c c c } \hline \mbox{Excess Workers} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Vritten Premium} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline \mbox{Direct Defense & Cost Containment Expense Incurred} \\ \hline Direct Defense & Cost Containment Expens$		Direct Losses Incurred	- /	6		6
Excess Workers CompDirect Defense & Cost Containment Expense Incurred Direct Losses Paid16(C)417.39Product LiabilityDirect Defense & Cost Containment Expense Incurred Direct Premiums Earned Direct Premiums Earned Direct Losses Paid666Product LiabilityDirect Defense & Cost Containment Expense Incurred Direct Defense & Cost Containment Expense Incurred 		Direct Written Premium		2		1
Excess Workers CompDirect Defense & Cost Containment Expense Incurred16(C)417.39CompDirect Losses Paid55555Product LiabilityDirect Defense & Cost Containment Expense Incurred174121Product LiabilityDirect Defense & Cost Containment Expense Incurred174121Product LiabilityDirect Defense & Cost Containment Expense Incurred174121Product LiabilityDirect Defense & Cost Containment Expense Incurred174121Private PassengerOnirect Defense & Cost Containment Expense Incurred18(A)(1) - 18(A)(1) - 19(A)(1), 19(A)(2)33331Private PassengerOnirect Defense & Cost Containment Expense Incurred19(A)(1), 19(A)(2)333993313331333		Direct Premiums Earned		3		2
Compimage: constraint of the section of t	Excess Workers	Direct Defense & Cost Containment Expense Incurred	16(C)	4	17.3	9
Image: constraint of the synthesis of the synth of the	Comp	Direct Losses Paid		5		5
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$		Direct Losses Incurred		6		6
Product LiabilityImage: Control of the co		Direct Written Premium		2		1
Product LiabilityDirect Defense & Cost Containment Expense Incurred1174Sum(18.1, 18.2)9Muter PassengerDirect Defense & Cost Containment Expense Incurred0666Private PassengerMuter Defense & Cost Containment Expense Incurred18(A)(6), 19(A)(1), 19(B)(1)		Direct Premiums Earned		3		2
Image: Direct Losses PaidImage: Direct Losses PaidImage: Direct Losses PaidImage: Direct Losses PaidPrivate Passenger AutoImage: Direct Defense & Cost Containment Expense IncurredSum(18(A)(1) - 18(A)(6), 19(A)(1), 19(A)(1), 19(A)(2)Image: Direct Losses PaidImage: Direct Losses PaidImage	Product Liability	Direct Defense & Cost Containment Expense Incurred	17	4	Sum(18.1,	9
Image: Direct Losses IncurredImage: Direct Losses PaidImage: Direct Losses PaidImage: Direct Losses IncurredImage: Direct Losses PaidImage: Direct Losses IncurredImage: Direct Losses Incurre		Direct Losses Paid		5	16.2)	5
$ \begin{array}{ c c c c c c } \hline \begin{tabular}{ c c c c c c } \hline \begin{tabular}{ c c c c c c c c c c c c c c c c c c c$		Direct Losses Incurred		6		6
Private Passenger Auto \hline $Sum(18(A)(1) - 3$ $18(A)(6), 19(A)(1), 19(A)(2))$ $Sum(19.1, 19.2, 21.1)$ 2 9 $Auto$ $Direct Defense & Cost Containment Expense IncurredDirect Losses Paid19(A)(2)55MutoDirect Cosses Paid19(A)(2)566MutoDirect Vritten PremiumDirect Premiums Earned2332MutoDirect Defense & Cost Containment Expense Incurred18(B)(1) - 3332MutoDirect Defense & Cost Containment Expense Incurred18(B)(4), 19(B)(1), 19(B)(2)555MutoDirect Losses Paid19(B)(1), 19(B)(2)5556MutoDirect Premiums Earned6666AutoDirect Defense & Cost Containment Expense Incurred19(B)(1), 19(B)(2)555MircraftDirect Defense & Cost Containment Expense Incurred329AircraftDirect Defense & Cost Containment Expense Incurred204229AircraftDirect Defense & Cost Containment Expense Incurred204229AircraftDirect Defense & Cost Containment Expense Incurred555MircraftDirect Defense & Cost Containment Expense Incurred555MircraftDirect Losses Paid555MircraftDirect Losses Incurred$		Direct Written Premium		2		1
Private Passenger AutoDirect Defense & Cost Containment Expense Incurred Direct Losses Paid18(A)(6), 19(A)(1), 19(A)(2))4Sum(19.1, 19.2, 21.1)9AutoDirect Losses Paid19(A)(1), 19(A)(2))555666Commercial AutoDirect Defense & Cost Containment Expense Incurred Direct Defense & Cost Containment Expense Incurred Direct Losses Paid22121MutoDirect Defense & Cost Containment Expense Incurred Direct Losses PaidSum(18(B)(1) - 18(B)(4), 19(B)(1), 19(B)(2))3Sum(19.3, 19(A, 21.2)92AutoDirect Defense & Cost Containment Expense Incurred Direct Losses Paid19(B)(1), 19(B)(2))5123AutorDirect Defense & Cost Containment Expense Incurred Direct Losses PaidDirect Premiums Earned 19(B)(2))5511AircraftDirect Defense & Cost Containment Expense Incurred Direct Losses Paid2212AircraftDirect Defense & Cost Containment Expense Incurred Direct Losses Paid204229Direct Defense & Cost Containment Expense Incurred Direct Losses Paid5555Direct Losses Paid55555Direct Losses Incurred6666		Direct Premiums Earned	Sum(18(A)(1) -	3		2
AutoDirect Losses Paid $19(A)(1)$, $19(A)(2)$ $19(2, 21.1)$ 5 0 0 0 6 6 0 0 6 6 0 0 6 6 0 0 0 6 0 <td>Private Passenger</td> <td>Direct Defense & Cost Containment Expense Incurred</td> <td>18(A)(6), 10(A)(1)</td> <td>4</td> <td>Sum(19.1,</td> <td>9</td>	Private Passenger	Direct Defense & Cost Containment Expense Incurred	18(A)(6), 10(A)(1)	4	Sum(19.1,	9
Direct Losses IncurredDirect (Losses Incurred)66Commercial AutoDirect Defense & Cost Containment Expense IncurredSum(18(B)(1) - 18(B)(4), 19(B)(1), 	Auto	Direct Losses Paid	19(A)(1), 19(A)(2))	5	19.2, 21.1)	5
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$		Direct Losses Incurred		6		6
Commercial AutoDirect Defense & Cost Containment Expense Incurred Direct Defense & Cost Containment Expense Incurred Direct Losses PaidSum(18(B)(1) - 		Direct Written Premium		2		1
Commercial AutoDirect Defense & Cost Containment Expense Incurred18(B)(4), 19(B)(1), 19(B)(2))Sum(19.3, 19.4, 21.2)Sum(19.3, 19.4, 21.2)AutoDirect Losses Paid19(B)(1), 19(B)(2))55MircraftDirect Written Premium Direct Premiums Earned66Direct Defense & Cost Containment Expense Incurred32Direct Defense & Cost Containment Expense Incurred20422Direct Defense & Cost Containment Expense Incurred55Direct Defense & Cost Containment Expense Incurred20422Direct Losses Paid555Direct Losses Incurred666		Direct Premiums Earned	Sum(18(B)(1) -	3		2
Auto19(B)(1), 19(B)(2))19.4, 21.2)Direct Losses Paid19(B)(2))5Direct Losses Incurred6Direct Written Premium2Direct Premiums Earned3Direct Defense & Cost Containment Expense Incurred20Direct Losses Paid5Direct Losses Incurred5Direct Losses Incurred5Direct Defense & Cost Containment Expense Incurred5Direct Losses Paid5Direct Losses Incurred6	Commercial	Direct Defense & Cost Containment Expense Incurred	18(B)(4),	4	Sum(19.3,	9
Direct Losses Incurred6Direct Written Premium2Direct Premiums Earned3Direct Defense & Cost Containment Expense Incurred20Direct Losses Paid5Direct Losses Incurred6	Auto	Direct Losses Paid	19(B)(1), 19(B)(2))	5	19.4, 21.2)	5
AircraftDirect Written Premium21Direct Premiums Earned32Direct Defense & Cost Containment Expense Incurred20422Direct Losses Paid55Direct Losses Incurred66		Direct Losses Incurred	17(12)(2))	6		6
AircraftDirect Premiums Earned32Direct Defense & Cost Containment Expense Incurred204229Direct Losses Paid555Direct Losses Incurred666		Direct Written Premium		2		1
Aircraft Direct Defense & Cost Containment Expense Incurred 20 4 22 9 Direct Losses Paid 5 5 5 Direct Losses Incurred 6 6		Direct Premiums Earned		3		2
Direct Losses Paid5Direct Losses Incurred6	Aircraft	Direct Defense & Cost Containment Expense Incurred	20	4	22	9
Direct Losses Incurred 6 6		Direct Losses Paid		5		5
		Direct Losses Incurred		6		6

	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Fidelity	Direct Defense & Cost Containment Expense Incurred	21	4	23	9
	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Surety	Direct Defense & Cost Containment Expense Incurred	22	4	24	9
	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Burglary & Theft	Direct Defense & Cost Containment Expense Incurred	23	4	26	9
	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
D ''	Direct Premiums Earned		3		2
Boiler & Machinery	Direct Defense & Cost Containment Expense Incurred	24	4	27	9
Widefiniery	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
All P&C	Direct Defense & Cost Containment Expense Incurred	31	4	35	9
	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6

		Supplen	nent	State I	Page
Line of Business	Field Name	Line #	Column #	Line #	Column #
	Accident & Hea	lth			
	Direct Written Premium		2		1
~	Direct Premiums Earned		3		2
Comprehensive:	Direct Defense & Cost Containment Expense Incurred	1(A)	4	13.1	9
marviauai	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Comprehensive:	Direct Defense & Cost Containment Expense Incurred	Sum(2(A)(1) - 2(A)(5))	4	13.2	9
Oloup	Direct Losses Paid	2(A)(3))	5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Medicare	Direct Defense & Cost Containment Expense Incurred	Sum(1(B), 2(B))	4	15.4	9
Supplement	Direct Losses Paid	2(D))	5]	5
	Direct Losses Incurred		6		6

	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Dental	Direct Defense & Cost Containment Expense Incurred	Sum(1(G), 2(G))	4	15.2	9
	Direct Losses Paid	2(0))	5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Federal	Direct Defense & Cost Containment Expense Incurred	2(A)(5)	4	15.8	9
Employees	Direct Losses Paid		5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
D 1111	Direct Premiums Earned		3		2
Disability	Direct Defense & Cost Containment Expense Incurred	Sum(1(F), 2(F))	4	15.3	9
meome	Direct Losses Paid	2(1))	5		5
	Direct Losses Incurred		6		6
	Direct Written Premium		2		1
	Direct Premiums Earned		3		2
Long Term Care	Direct Defense & Cost Containment Expense Incurred	Sum(1(C), 2(C))	4	15.7	9
	Direct Losses Paid	2(0))	5		5
	Direct Losses Incurred		6		6

Data Edits for those who file the Health (Orange) Blank

The break down for accident & health business has been expanded. all companies writing accident & health business will need to complete the additional information per the following outline.

- a. Number of insureds as of December 31 of Report Year: For individual policies, the number of insureds must include dependents. For group policies, the number of insureds must equal the number of certificate holders, plus all dependents.
- b. Comprehensive Medical Expense: This category includes major medical, comprehensive medical and other hospital-surgicalmedical benefit plans designed to be the insured persons primary health benefit coverage. Do not include plans covering less than 50% of incurred expenses.
- c. Limited benefit: Includes vision, nursing care (other than long-term care), hospital indemnity and any other single service plan or program, not otherwise reported herein.
- d. Small Employer (2-50 employees) (line 2(a)(1)): This term means major medical or comprehensive group medical expense insurance coverage that is subject to the group market provisions of the Federal Health Insurance Portability and Accountability Act (HIPAA).
- e. Association (line 2(a)(3)): This term means major medical or comprehensive group medical expense insurance coverage sold to members of associations that is not subject to the group market provisions of the Federal Health Insurance Portability and Accountability Act (HIPAA).
- f. Small Employer (3-25 employees) (line 5(a)): This term means major medical or comprehensive group medical expense coverage that is subject to the Missouri small employer health insurance availability act.
- g. Stop Loss: Include any premium for employer self-funded group health plan excess loss coverage, including any such coverage issued or provided through minimum premium plans or other self-funded health benefit plans.
- h. Medicare Part D: Pursuant to the Medicare modernization act, companies writing prescription drug coverage, through Medicare Part D, must report their data on line numbers 1(m) and/or 2(l).
- i. Medicare Advantage (lines 1(n) and 2(m)): A plan of coverage for health benefits under Medicare Part C as defined in Section 1859 found in Title IV, Subtitle A, Chapter 1 of P.L. 105-33.
- j. Additional association information (lines 5(a)- 5(h)): Report only business that offers coverage to associations that include both small (3-25 employees) and large employers.
- k. Short-Term Limited-Duration Insurance (Line 1(k))- Health coverage provided pursuant to a contract with an issuer that has an expiration date specified in the contract that is less than 12 months after the original effective date of the

contract. (state and federal government guidelines may have renewal duration limitations)

For each of the following lines, test to ensure that amounts reported on the Missouri Supplement correspond to the following data elements on the State Page of the Annual Statement:

		Supplem	ent	Sta	nte Page
Type of Insurance	Field Name	Line #	Column #	Line #	Column #
	Direct Premiums Written		2	12	
	Direct Premiums Earned	1(A)	3	15	2
Comprehensive: Individual	Direct Losses Paid	I(A)	5	17	2
	Direct Losses Incurred		6	18	
	Direct Premiums Written		2	12	
	Direct Premiums Earned		3	15	4
Medicare Supplement	Direct Losses Paid	Sum(1(B), 2(B))	5	17	4
	Direct Losses Incurred		6	18	
	Direct Premiums Written		2	12	
	Direct Premiums Earned		3	15	10
Long Term Care	Direct Losses Paid	$\operatorname{Sum}(1(\mathbb{C}), 2(\mathbb{C}))$	5	17	12
	Direct Losses Incurred		6	18	
	Direct Premiums Written		2	12	11
	Direct Premiums Earned		3	15	
Disability Income	Direct Losses Paid	Sum(1(F), 2(F))	5	17	
	Direct Losses Incurred		6	18	
	Direct Premiums Written		2	12	
	Direct Premiums Earned		3	15	
Dental	Direct Losses Paid	Sum(1(G), 2(G))	5	17	6
	Direct Losses Incurred		6	18	
	Direct Premiums Written		2	12	
	Direct Premiums Earned	Sum(2(A)(1) -	3	15	
Comprehensive: Group	Direct Losses Paid	2(A)(5))	5	17	3
	Direct Losses Incurred		6	18	
	Direct Premiums Written		2	12	
	Direct Premiums Earned		3	15	_
Federal Employees	Direct Losses Paid	2(A)(5)	5	17	7
	Direct Losses Incurred	1	6	18	

NEW DEFINITIONS (2024 FILING)

Travel Coverage - Insurance coverage for personal risks incident to planned travel. Include:

- Interruption or cancellation of trip or event;
- Loss of baggage or personal effects;
- Damages to accommodations or rental vehicles;
- Sickness, accident, disability or death occurring during travel;
- Emergency evacuation;
- Repatriation of remains; or
- Any other contractual obligations to indemnify or pay a specified amount to the traveler upon determinable contingencies related to travel as approved by the Commissioner.

Exclude:

• major medical plans that provide comprehensive medical protection for travelers with trips lasting longer than six (6) months, including for example, those working or residing overseas as an expatriate, or any other product that requires a specific insurance producer license.

Short-Term Limited-Duration Insurance (Line 1(k))- Health coverage provided pursuant to a contract with an issuer that has an expiration date specified in the contract that is less than 12 months after the original effective date of the contract. (state and federal government guidelines may have renewal duration limitations)

Liquor Liability – Insurance coverage for liability of an insured to persons who have incurred bodily injury or property damage from an intoxicated person.

STATISTICS CLAIM REPORTING PORTAL USER GUIDE

Account Management

Users require an approved account to create, update or close claims/data. New users must create an account and received approval prior to creating, updating, or closing claims/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 valid NAIC number(s)
- Provide Contact Name
- Provide Contact Phone Number
- Provide Contact Address Information

Registration Process

New users must register with DCI to gain access to the application. Begin the account creation process by navigating to the Statistics Claims Reporting portal located on the internet at <u>https://apps.dci.mo.gov/ProfLiab/MedMal/Login.aspx</u>.

STATISTICS CLAIMS REPORTING REGISTRATION
SIGN IN
Please enter your username and password. Username: Password: Sign in User Guide Can't access your account? Not Registered? Sign up Contact Us

Once you navigate to the site, in the middle of the screen on the 'Sign In' page, click the hyperlink titled *Sign up. The hyperlink will redirect you to the Registration Page.*

REGISTER	
Account Information	
Please complete the fields below. All fields are required. If you already have an account please clic Username: Email: Email: Contact I Confirmation Password: Contact First Name: Contact First Name: Contact Last Name: Contact Title: Contact Title: Contact Phone Number: Contact Street Address: Contact Street Address: Contact State: Contact State:	< <u>Here</u>
Register	

Complete the information requested on the form:

Username: Create and type your username in the textbox provided. Your username can be your email address, company name, personal name, etc.

Email: Provide a valid email address in the textbox provided. After creating your account, you will receive emails pertaining to your account and claims. Be sure to keep this information updated.

Password: Create a password, which consists of at least fifteen characters. Include at least one upper case letter; one lower case letter; and one number or special character. Type the password you created into the textbox provided.

Confirmation Password: Retype your password into the 'Confirmation Password' text box to verify the password match. If the passwords do not match, please correct any errors or typos.

Contact First Name: Enter the account contact first name.

Contact Last Name: Enter the account contact last name.

Contact Title: Enter the account contact title.

Contact Phone Number: Enter the primary phone number for the account in which you are registering.

Contact Street Address: In the text box provided, enter the street address for which the account will be register.

Contact City: Enter the name of the city for the account in which you are registering.

Contact State: From the drop down menu, select the state associated with the address provided above.

Contact Zip Code: Enter the zip code associated with the address provided above.

After you have entered all the requested information, click the *Register* button to continue with account creation. The depiction of a red 'x' next to a field indicates an error associated with field requirements. *Follow prompts provided to correct online registration inconsistencies or errors*.

~~~~~~	Register	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
😵 When this symbol	appears, an error has occured in the associated field, hover over symbol for to check at the errors at the top of the page.	boltip error message or

After successful completing of part 1 on the registration form you will be directed to company and forms pages. Here you will select all company(s) associated with your account. You will also select which forms are associated with each company you register for.



Find Company: Enter the NAIC code for the company you wish to register. (Partial searches are allowed.)

Next click Find Company. A window will pop up displaying a scrollable list of all possible matches to the criteria you entered. Select the one you want by clicking on it.

	Select Company	^
	11123 - SAFETY FIRST INSURANCE COMPANY	
	11231 - GENERALI U S BRANCH	
	12300 - AMERICAN CONTRACTORS INSURANCE COMPANY RISK RETENTION GROUP	
MP	12303 - NATIONSBUILDERS INSURANCE COMPANY	
	12304 - ACCIDENT FUND GENERAL INSURANCE COMPANY	
	12305 - ACCIDENT FUND NATIONAL INSURANCE COMPANY	
	12311 - BLOOMINGTON COMPENSATION INSURANCE COMPANY	~
—		
	MP = Malpractice Company	
	Cancel	

The next screen will allow you to verify you have the correct company and select the form or forms you need associated with this company.



Ensure all the applicable services have been checked here.

If the company select is incorrect you can delete this entry by clicking on the red "X" after the company name.

Before selecting the *Register* button, confirm you have all company(s) listed that will be associated with your user account.

After selecting the *Register* button, the webpage redirects to the *Registration Complete* page. You will also receive an email notification verifying your registration.

REGISTRATION COMPLETE	
Thank you for Registering. Please allow 48-72 hours to be approved.	
Back to <u>Login</u>	

It is important to note that processing registrations can take up to 48-72 hours before account approval. You will receive a confirmation email, once the account is accepted.

#### Don't See Your Email

If you do not see your confirmation email, check your Junk email folder. If you find it in the Junk folder, Right Click on the email title and then move down to Junk and then select NEVER BLOCK SENDER.



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 on- file email address by selecting the "Can't access your account?" link.

STATISTICS CLAIMS REPORTING REGISTRATION
SIGN IN
Account Information
Please enter your username and password. Username: Password: Sign in User Guide Can't access your account? Not Registered? Sign up Contact Us

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 company code and form type.

## **Contact Us**

Contact the Department of Commerce and Insurance, Statistics Section, for help with claims/data by email at: <u>Statistics@insurance.mo.gov</u>.

## User Guide

This User Guide can be obtained from the *User Guide* menu as well as from the DCI web site at <a href="http://insurance.mo.gov/industry/filings/stats/User Sign-Up Guide v2.pdf">http://insurance.mo.gov/industry/filings/stats/User Sign-Up Guide v2.pdf</a>

### Logout

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