



Market Conduct Annual Statement Data File Instruction Guide

2020 Data Year Filings

National Association of Insurance Commissioners
2020

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Summary of Changes for 2020:

- Disability Income
 - New MCAS lines of business for the 2020 data year.

As the NAIC Market Regulation and Consumer Affairs (D) Committee approves data changes they will be available on the MCAS website. (www.naic.org/industry_market_conduct_statement)

Overview

This manual is a supplement to the MCAS Industry User Guide that provides all the details for working with the MCAS on-line system. This Data File Instruction Guide is limited to information about the creation and upload of an MCAS .csv data (upload) file. Use of an upload file is an option for those companies not wanting to utilize the data entry screens as the primary vehicle for entering line of business data elements. All other data (i.e., attestation information, company-wide comments, waiver and extension requests) are accepted through the online application exclusively. For specific information about what data to submit, please refer to the appropriate line of business Data Call and Definitions document available on the MCAS website (http://www.naic.org/mcas_2020.htm.)

Data File Specifications

The record layout for any given line of business follows the format of the corresponding data entry screen. Each line on the data entry screen translates into a separate record in the data file. Because each record in the file has a unique identifier, it is acceptable to include records for multiple states and lines of business in a single data file. However, each upload file is limited to data for a single company code. Furthermore, it is acceptable, but not necessary, to exclude records for which there is no data to report.

How a Data File is Processed

Every uploaded file immediately undergoes a comprehensive virus scan which might take a minute or two to complete. If any problems are encountered the file is rejected without further processing and an error message is displayed. If no virus is detected, then basic validations are performed on the data. These validations include a check that all records contain the same NAIC company code and data year, the form designation is spelled and formatted correctly, and there are no duplicate records. Uploaded files are either accepted or rejected in their entirety. In other words, a single record in error will cause the entire file to be rejected by the system without processing. The company must correct or remove the unacceptable record(s) before resubmitting the file. Once the file is accepted the line of business screens are populated with the data based on the State, Form and Line Number fields in each record. From this point, the submission process is the same as if the data had been entered into the screens manually. The Filing Matrix status shows the In Progress status for all state/line of business combinations affected by the uploaded data. Detailed instructions regarding validating and submitting a filing are contained in the MCAS Industry User Guide which is available on the MCAS webpage.

CSV Basics

Data for upload must be in a .csv file format. This type of format uses commas to separate the fields from one another within each record. The easiest way to create a .csv file is through a spreadsheet application such as Microsoft Excel®. Once the data is entered with a field in each column and a row for each record, the file may be saved in the .csv file format which inserts a comma between each field automatically. It is advisable to examine the resulting .csv file in a text format by opening it using Wordpad or Notepad to verify the records look like the Sample records provided at the end of this manual.

When creating a .csv file from scratch there are formatting rules that must be followed. Below are formatting rules with examples to illustrate.

Rule 1 Each field is delimited with a comma except the last field in a row.

Ex: Field1,Field2,Field3,Field4,Field5 ← no comma at end

Rule 2 Fields within a record are positional which means they are expected in a given order. Consequently, if one of the fields contains no data (null), it must be noted as empty in its correct position within the record. This is done by ending the field with a comma, as usual, but with no data between the previous field's comma and the ending comma for the no-data field. In the following example, note that Field 4 and Field 6 contain no data.

Ex: Field1,Field2,Field3,,Field5, ← ending comma = Field6

Rule 3 Any data that is between two commas is considered a field even if it contains spaces (with the exception of commas that are found between a matching beginning double-quote and ending double-quote – see Rule 4).

Ex: Field1,Field2,This is a comment,0,YES

Rule 4 A field with embedded commas must start and end with double-quote characters in order to keep the field together.

Ex: Ginger,"We have a happy, healthy dog",tan,female,8

Rule 5 A record must not contain an <Enter> key character anywhere within it, even within a long text field surrounded by double-quote characters.

Rule 6 It is acceptable to enclose fields within double-quote characters even when not necessary otherwise.

Ex: Field1,Field2,"Field3",Field4,Field5,"Field6"

Sample records are included at the end of this manual.

CSV Assistant

The CSV Assistant tool provides users with the option to enter their MCAS data in a Microsoft Excel file, which is then converted to a correctly formatted CSV file for uploading to the MCAS site. Each line of business collected will have an accompanying Excel file. Any updates/changes to the tool will be posted on the NAIC MCAS Homepage under “Resources”.

Record Layouts

Life

The Life line of business consists of two types of records:
 Interrogatory – 8 records with 7 columns per record
 Data – 29 records with 7 columns per record

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

Life Interrogatories

Life Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbrev.
D. Form	Text	LIFEINT
E. Line number	Numeric	1
Indiv Life Cash Value: Does company have data to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Life Record 2

A. through D. same as Life Record 1		
E. Line number	Numeric	2
Indiv Life Non-Cash Value: Does company have data to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Life Record 3

A. through D. same as Life Record 1		
E. Line number	Numeric	3
Indiv Life Cash Value: Is the data reported substantially different than previously reported?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Life Record 4

A. through D. same as Life Record 1		
E. Line number	Numeric	4
Indiv Life Cash Value: If Record 3 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Life Record 5

A. through D. same as Life Record 1		
E. Line number	Numeric	5
Indiv Life Non-Cash Value: Is the data reported substantially different than previously reported?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Life Record 6

A. through D. same as Life Record 1		
E. Line number	Numeric	6
Indiv Life Non-Cash Value: If Record 5 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Life Record 7

A. through D. same as Life Record 1		
E. Line number	Numeric	7
Indiv Life Cash Value: Additional state specific comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Life Record 8

A. through D. same as Life Record 1		
E. Line number	Numeric	8
Indiv Life Non-Cash Value: Additional state specific comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Life Data

Life Record 9

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LIFE
E. Line number	Numeric	9
Replacement policies issued		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 10

A. through D. same as Life Record 9		
E. Line number	Numeric	10
Internal replacements issued		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 11

A. through D. same as Life Data Record 9		
E. Line number	Numeric	11
External replacements issued		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 12

A. through D. same as Life Record 9		
E. Line number	Numeric	12
Policies replaced where insured age < 65		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 13

A. through D. same as Life Record 9		
E. Line number	Numeric	13
Policies replaced where insured age => 65		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 14

A. through D. same as Life Record 9		
E. Line number	Numeric	14
Policies surrendered < 2 yrs from policy issue		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 15

A. through D. same as Life Record 9		
E. Line number	Numeric	15
Policies surrendered => 2 yrs and < 6 yrs from policy issue		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 16

A. through D. same as Life Record 9		
E. Line number	Numeric	16
Policies surrendered => 6 and < 11 yrs from policy issue		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 17

A. through D. same as Life Record 9		
E. Line number	Numeric	17
Policies surrendered during the period		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 18

A. through D. same as Life Record 9		
E. Line number	Numeric	18
Policies issued where insured age < 65		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 19

A. through D. same as Life Record 9		
E. Line number	Numeric	19
Policies issued where insured age => 65		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank

Life Record 20

A. through D. same as Life Record 9		
E. Line number	Numeric	20
Policies issued during the period		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 21

A. through D. same as Life Record 9		
E. Line number	Numeric	21
Policies applied for		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 22

A. through D. same as Life Record 9		
E. Line number	Numeric	22
Free looks		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 23

A. through D. same as Life Record 9		
E. Line number	Numeric	23
Policies in force at end of period		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 24

A. through D. same as Life Record 9		
E. Line number	Numeric	24
Direct written premium amount		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 25

A. through D. same as Life Record 9		
E. Line number	Numeric	25
Face amount issued		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 26

A. through D. same as Life Record 9		
E. Line number	Numeric	26
Face amount in force		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 27

A. through D. same as Life Record 9		
E. Line number	Numeric	27
Consumer complaints		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 28

A. through D. same as Life Record 9		
E. Line number	Numeric	28
Death claims closed with payment, during the period, within 30 days of received date		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 29

A. through D. same as Life Record 9		
E. Line number	Numeric	29
Death claims closed with payment, during the period, within 31-60 days of received date		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 30

A. through D. same as Life Record 9		
E. Line number	Numeric	30
Death claims closed with payment, during the period, beyond 60 days of received date		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 31

A. through D. same as Life Record 9		
E. Line number	Numeric	31
Death claims closed w/payment within 30 days of proof of loss		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 32

A. through D. same as Life Record 9		
E. Line number	Numeric	32
Death claims closed w/payment within 31-60 days of proof of loss		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 33

A. through D. same as Life Record 9		
E. Line number	Numeric	33
Death claims closed w/payment beyond 60 days of proof of loss		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 34

A. through D. same as Life Record 9		
E. Line number	Numeric	34
Death claims denied, resisted or compromised		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 35

A. through D. same as Life Record 9		
E. Line number	Numeric	35
Death claims closed with payment during period, within contestability period		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 36

A. through D. same as Life Record 9		
E. Line number	Numeric	36
Death claims denied during period, within contestability period		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Life Record 37

A. through D. same as Life Record 9		
E. Line number	Numeric	37
Death claims received		
F. Indiv Life Cash Value	Numeric	No commas, signs or decimals
G. Indiv Life Non-Cash Value	Numeric	No commas, signs or decimals

Annuities

The Annuities line of business consists of two types of records:

Interrogatory – 8 records with 7 columns per record

Data – 20 records with 7 columns per record

Note: *All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.*

Annuities Interrogatories

Annuities Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	ANNUITIESINT
E. Line number	Numeric	1
Indiv Fixed Annuities: Does company have data to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Annuities Record 2

A. through D. same as Annuities Record 1		
E. Line number	Numeric	2
Indiv Variable Annuities: Does company have data to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Annuities Record 3

A. through D. same as Annuities Record 1		
E. Line number	Numeric	3
Indiv Fixed Annuities: Is the data reported substantially different than previously reported?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Annuities Record 4

A. through D. same as Annuities Record 1		
E. Line number	Numeric	4
Indiv Fixed Annuities: If Record 3 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Annuitants Record 5

A. through D. same as Annuitants Record 1		
E. Line number	Numeric	5
Indiv Variable Annuitants: Is the data reported substantially different than previously reported?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Annuitants Record 6

A. through D. same as Annuitants Record 1		
E. Line number	Numeric	6
Indiv Variable Annuitants: If Record 5 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Annuitants Record 7

A. through D. same as Annuitants Record 1		
E. Line number	Numeric	7
Indiv Fixed Annuitants: Additional state specific comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Annuitants Record 8

A. through D. same as Annuitants Record 1		
E. Line number	Numeric	8
Indiv Variable Annuitants: Additional state specific comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Annuitants Data

Annuitants Record 9

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	ANNUITIES
E. Line number	Numeric	9
Replacement contracts issued		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 10

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	10
Internal replacement contracts issued		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 11

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	11
External replacement contracts issued		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 12

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	12
Contracts replaced where annuitant age < 65		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 13

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	13
Contracts replaced where annuitant age => 65 through 80		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 14

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	14
Contracts replaced where annuitant age > 80		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 15

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	15
New immediate contracts issued		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 16

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	16
Deferred contracts issued where annuitant age < 65		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 17

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	17
Deferred contracts issued where annuitant age => 65 through 80		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 18

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	18
Deferred contracts issued where annuitant age > 80		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 19

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	19
Deferred contracts issued		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 20

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	20
Contracts surrendered < 2 yrs from policy issue		
F. Indiv Fixed Annuity	Numeric	No commas, \$ signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, \$ signs or decimals

Annuitants Record 21

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	21
Contracts surrendered => 2 yrs and < 6 yrs from policy issue		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 22

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	22
Contracts surrendered => 6 yrs and < 11 yrs from policy issue		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 23

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	23
Contracts surrendered		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuitants Record 24

A. through D. same as Annuitants Record 9		
E. Line number	Numeric	24
Contracts applied for		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuities Record 25

A. through D. same as Annuities Record 9		
E. Line number	Numeric	25
Free looks		
F. Indiv Fixed Annuity	Numeric	No commas, \$ signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, \$ signs or decimals

Annuities Record 26

A. through D. same as Annuities Record 9		
E. Line number	Numeric	26
Contracts in force		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Annuities Record 27

A. through D. same as Annuities Record 9		
E. Line number	Numeric	27
Dollar amount of annuity consideration		
F. Indiv Fixed Annuity	Numeric	No commas, \$ signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, \$ signs or decimals

Annuities Record 28

A. through D. same as Annuities Record 9		
E. Line number	Numeric	28
Consumer complaints		
F. Indiv Fixed Annuity	Numeric	No commas, signs or decimals
G. Indiv Variable Annuity	Numeric	No commas, signs or decimals

Private Passenger Auto

The Private Passenger Auto line of business consists of three types of records:

Interrogatory – 20 records with 7 columns per record

Claims – 22 records with 14 columns per record

Underwriting – 11 records with 6 columns per record

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

PPA Interrogatories

PPA Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	PPAINT
E. Line number	Numeric	1
Data to report for Collision?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 2

A. through D. same as PPA Record 1		
E. Line number	Numeric	2
Data to report for Comprehensive?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 3

A. through D. same as PPA Record 1		
E. Line number	Numeric	3
Data to report for Bodily Injury?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 4

A. through D. same as PPA Record 1		
E. Line number	Numeric	4
Data to report for Property Damage?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 5

A. through D. same as PPA Record 1		
E. Line number	Numeric	5
Data to report for UMBI & UIMBI?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 6

A. through D. same as PPA Record 1		
E. Line number	Numeric	6
Data to report for UMPD & UIMPD?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 7

A. through D. same as PPA Record 1		
E. Line number	Numeric	7
Data to report for Med Payments?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 8

A. through D. same as PPA Record 1		
E. Line number	Numeric	8
Data to report for Combined Single Limits?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 9

A. through D. same as PPA Record 1		
E. Line number	Numeric	9
Data to report for Personal Injury Protection?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 10

A. through D. same as PPA Record 1		
E. Line number	Numeric	10
Actively writing policies in state at year-end?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 11

A. through D. same as PPA Record 1		
E. Line number	Numeric	11
Does the company write in the non-standard market?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 12

A. through D. same as PPA Record 1		
E. Line number	Numeric	12
If Record 11 = Y, what percentage is non-standard?		
F. Response		Leave blank
G. Explanation	Numeric	No commas, signs or decimals

PPA Record 13

A. through D. same as PPA Record 1		
E. Line number	Numeric	13
If Record 11 = Y, how does the company define non-standard?		
F. (no data required)		Leave blank
G. Explanation	Text	Text

PPA Record 14

A. through D. same as PPA Record 1		
E. Line number	Numeric	14
Significant event or strategy change affecting reported data?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 15

A. through D. same as PPA Record 1		
E. Line number	Numeric	15
If Record 14 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

PPA Record 16

A. through D. same as PPA Record 1		
E. Line number	Numeric	16
All or part of business sold, closed, or moved during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

PPA Record 17

A. through D. same as PPA Record 1		
E. Line number	Numeric	17
If Record 16 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

PPA Record 18

A. through D. same as PPA Record 1		
E. Line number	Numeric	18
How are supplemental or additional payments on previously reported claims treated?		
F. (no data required)		Leave blank
G. Explanation	Text	Text

PPA Record 19

A. through D. same as PPA Record 1		
E. Line number	Numeric	19
Additional state specific Claims comments (optional)		
F. (no data required)		Leave blank
G. Explanation	Text	Text

PPA Record 20

A. through D. same as PPA Record 1		
E. Line number	Numeric	20
Additional state specific Underwriting comments (optional)		
F. (no data required)		Leave blank
G. Explanation	Text	Text

PPA Claims

PPA Record 21

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	PPACLMS
E. Line number	Numeric	21
Claims open at begin of period		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 22

A. through D. same as PPA Record 21		
E. Line number	Numeric	22
Claims opened during period		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 23

A. through D. same as PPA Record 21		
E. Line number	Numeric	23
Claims closed with payment		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 24

A. through D. same as PPA Record 21		
E. Line number	Numeric	24
Claims closed without payment		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 25

A. through D. same as PPA Record 21		
E. Line number	Numeric	25
Claims remaining open at end of period		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 26

A. through D. same as PPA Record 21		
E. Line number	Numeric	26
Median days to final payment		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 27

A. through D. same as PPA Record 21		
E. Line number	Numeric	27
Claims closed w/payment within 0 – 30 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 28

A. through D. same as PPA Record 21		
E. Line number	Numeric	28
Claims closed w/payment within 31 – 60 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 29

A. through D. same as PPA Record 21		
E. Line number	Numeric	29
Claims closed w/payment within 61 – 90 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 30

A. through D. same as PPA Record 21		
E. Line number	Numeric	30
Claims closed w/payment within 91 – 180 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 31

A. through D. same as PPA Record 21		
E. Line number	Numeric	31
Claims closed w/payment within 181 – 365 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 32

A. through D. same as PPA Record 21		
E. Line number	Numeric	32
Claims closed w/payment beyond 365 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 33

A. through D. same as PPA Record 21		
E. Line number	Numeric	33
Claims closed w/out payment within 0 – 30 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 34

A. through D. same as PPA Record 21		
E. Line number	Numeric	34
Claims closed w/out payment within 31 – 60 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 35

A. through D. same as PPA Record 21		
E. Line number	Numeric	35
Claims closed w/out payment within 61 – 90 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 36

A. through D. same as PPA Record 21		
E. Line number	Numeric	36
Claims closed w/out payment within 91 – 180 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 37

A. through D. same as PPA Record 21		
E. Line number	Numeric	37
Claims closed w/out payment within 181 – 365 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 38

A. through D. same as PPA Record 21		
E. Line number	Numeric	38
Claims closed w/out payment beyond 365 days		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 39

A. through D. same as PPA Record 21		
E. Line number	Numeric	39
Suits open at beginning of period		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 40

A. through D. same as PPA Record 21		
E. Line number	Numeric	40
Suits opened during period		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 41

A. through D. same as PPA Record 21		
E. Line number	Numeric	41
Suits closed during period		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Record 42

A. through D. same as PPA Record 21		
E. Line number	Numeric	42
Suits open at end of period		
F. Collision	Numeric	No commas, signs or decimals
G. Comprehensive	Numeric	No commas, signs or decimals
H. Bodily Injury	Numeric	No commas, signs or decimals
I. Property Damage	Numeric	No commas, signs or decimals
J. UMBI & UIMBI	Numeric	No commas, signs or decimals
K. UMPD & UIMPD	Numeric	No commas, signs or decimals
L. Medical Payments	Numeric	No commas, signs or decimals
M. Combined Single Limits	Numeric	No commas, signs or decimals
N. Personal Injury Protection	Numeric	No commas, signs or decimals

PPA Underwriting

PPA Record 43

A. Data year	Numeric	2020
B. NAIC code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	PPAUNDACT
E. Line number	Numeric	43
F. Autos with policies in force at end of period	Numeric	No commas, signs or decimals

PPA Record 44

A. through D. same as PPA Record 43		
E. Line number	Numeric	44
F. Policies in force at end of period	Numeric	No commas, signs or decimals

PPA Record 45

A. through D. same as PPA Record 43		
E. Line number	Numeric	45
F. New policies written during the period	Numeric	No commas, signs or decimals

PPA Record 46

A. through D. same as PPA Record 43		
E. Line number	Numeric	46
F. Direct written premium during the period	Numeric	No commas, signs or decimals

PPA Record 47

A. through D. same as PPA Record 43		
E. Line number	Numeric	47
F. Non-renewals by company during period	Numeric	No commas, signs or decimals

PPA Record 48

A. through D. same as PPA Record 43		
E. Line number	Numeric	48
F. Cancellations for non-pay or non-sufficient funds	Numeric	No commas, signs or decimals

PPA Record 49

A. through D. same as PPA Record 43		
E. Line number	Numeric	49
F. Cancellations for at insured's request	Numeric	No commas, signs or decimals

PPA Record 50

A. through D. same as PPA Record 43		
E. Line number	Numeric	50
F. Company-initiated cancellations < 60 days after effective date	Numeric	No commas, signs or decimals

PPA Record 51

A. through D. same as PPA Record 43		
E. Line number	Numeric	51
F. Company-initiated cancellations 60 - 90 days after effective date	Numeric	No commas, signs or decimals

PPA Record 52

A. through D. same as PPA Record 43		
E. Line number	Numeric	52
F. Company-initiated cancellations > 90 days after effective date	Numeric	No commas, signs or decimals

PPA Record 53

A. through D. same as PPA Record 43		
E. Line number	Numeric	53
F. Complaints received directly from consumer	Numeric	No commas, signs or decimals

Homeowners

The Homeowners line of business consists of three types of records:

Interrogatory – 16 records with 7 columns per record

Claims – 22 records with 10 columns per record

Underwriting – 11 records with 6 columns per record

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

Homeowners Interrogatories

HO Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	HOINT
E. Line number	Numeric	1
Data to report for Dwelling?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 2

A. through D. same as HO Record 1		
E. Line number	Numeric	2
Data to report for Personal Property?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 3

A. through D. same as HO Record 1		
E. Line number	Numeric	3
Data to report for Liability?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 4

A. through D. same as HO Record 1		
E. Line number	Numeric	4
Data to report for Med Payments?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 5

A. through D. same as HO Record 1		
E. Line number	Numeric	5
Data to report for Loss of Use?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 6

A. through D. same as HO Record 1		
E. Line number	Numeric	6
Actively writing policies in state at year-end?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 7

A. through D. same as HO Record 1		
E. Line number	Numeric	7
Does the company write in the non-standard market?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 8

A. through D. same as HO Record 1		
E. Line number	Numeric	8
If Record 7 = Y, what percentage is non-standard?		
F. (no data required)		Leave blank
G. Explanation	Numeric	No commas, signs or decimals

HO Record 9

A. through D. same as HO Record 1		
E. Line number	Numeric	9
If Record 7 = Y, how does the company define non-standard?		
F. (no data required)		Leave blank
G. Explanation	Text	Text

HO Record 10

A. through D. same as HO Record 1		
E. Line number	Numeric	10
Significant event or strategy change affecting reported data?		
F. (no data required)		Leave blank
G. Explanation	Text	Text

HO Record 11

A. through D. same as HO Record 1		
E. Line number	Numeric	11
If Record 9 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

HO Record 12

A. through D. same as HO Record 1		
E. Line number	Numeric	12
All or part of business sold, closed, or moved during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

HO Record 13

A. through D. same as HO Record 1		
E. Line number	Numeric	13
If Record 11 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

HO Record 14

A. through D. same as HO Record 1		
E. Line number	Numeric	14
How are supplemental or additional payments on previously reported claims treated?		
F. (no data required)		Leave blank
G. Explanation	Text	Text

HO Record 15

A. through D. same as HO Record 1		
E. Line number	Numeric	15
Additional state specific Claims comments (optional)		
F. (no data required)		Leave blank
G. Explanation	Text	Text

HO Record 16

A. through D. same as HO Record 1		
E. Line number	Numeric	16
Additional state specific Underwriting comments (optional)		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Homeowners Claims

HO Record 17

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	HOCLMS
E. Line number	Numeric	17
Claims open at begin of period		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 18

A. through D. same as HO Record 17		
E. Line number	Numeric	18
Claims opened during period		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 19

A. through D. same as HO Record 17		
E. Line number	Numeric	19
Claims closed with payment		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 20

A. through D. same as HO Record 17		
E. Line number	Numeric	20
Claims closed without payment		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 21

A. through D. same as HO Record 17		
E. Line number	Numeric	21
Claims remaining open at end of period		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 22

A. through D. same as HO Record 17		
E. Line number	Numeric	22
Median days to final payment		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 23

A. through D. same as HO Record 17		
E. Line number	Numeric	23
Claims closed w/payment within 0 – 30 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 24

A. through D. same as HO Record 17		
E. Line number	Numeric	24
Claims closed w/payment within 31 – 60 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 25

A. through D. same as HO Record 17		
E. Line number	Numeric	25
Claims closed w/payment within 61 – 90 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 26

A. through D. same as HO Record 17		
E. Line number	Numeric	26
Claims closed w/payment within 91 – 180 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 27

A. through D. same as HO Record 17		
E. Line number	Numeric	27
Claims closed w/payment within 181 – 365 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 28

A. through D. same as HO Record 17		
E. Line number	Numeric	28
Claims closed w/payment beyond 365 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 29

A. through D. same as HO Record 17		
E. Line number	Numeric	29
Claims closed w/out payment within 0 – 30 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 30

A. through D. same as HO Record 17		
E. Line number	Numeric	30
Claims closed w/out payment within 31 – 60 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 31

A. through D. same as HO Record 17		
E. Line number	Numeric	31
Claims closed w/out payment within 61 – 90 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 32

A. through D. same as HO Record 17		
E. Line number	Numeric	32
Claims closed w/out payment within 91 – 180 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 33

A. through D. same as HO Record 17		
E. Line number	Numeric	33
Claims closed w/out payment within 181 – 365 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 34

A. through D. same as HO Record 17		
E. Line number	Numeric	34
Claims closed w/out payment beyond 365 days		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 35

A. through D. same as HO Record 17		
E. Line number	Numeric	35
Suits open at beginning of period		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 36

A. through D. same as HO Record 17		
E. Line number	Numeric	36
Suits opened during period		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 37

A. through D. same as HO Record 17		
E. Line number	Numeric	37
Suits closed during period		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

HO Record 38

A. through D. same as HO Record 17		
E. Line number	Numeric	38
Suits open at end of period		
F. Dwelling	Numeric	No commas, signs or decimals
G. Personal Property	Numeric	No commas, signs or decimals
H. Liability	Numeric	No commas, signs or decimals
I. Medical Payments	Numeric	No commas, signs or decimals
J. Loss of Use	Numeric	No commas, signs or decimals

Homeowners Underwriting

HO Record 39

A. Data year	Numeric	2020
B. NAIC code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	HOUNDACT
E. Line number	Numeric	39
F. Dwellings with policies in force at end of period	Numeric	No commas, signs or decimals

HO Record 40

A. through D. same as HO Record 39		
E. Line number	Numeric	40
F. Policies in force at end of period	Numeric	No commas, signs or decimals

HO Record 41

A. through D. same as HO Record 39		
E. Line number	Numeric	41
F. New policies written during the period	Numeric	No commas, signs or decimals

HO Record 42

A. through D. same as HO Record 39		
E. Line number	Numeric	42
F. Direct written premium during the period	Numeric	No commas, \$ signs or decimals

HO Record 43

A. through D. same as HO Record 39		
E. Line number	Numeric	43
F. Non-renewals by company during period	Numeric	No commas, signs or decimals

HO Record 44

A. through D. same as HO Record 39		
E. Line number	Numeric	44
F. Cancellations for non-pay non-sufficient funds	Numeric	No commas, signs or decimals

HO Record 45

A. through D. same as HO Record 39		
E. Line number	Numeric	45
F. Cancellations at insured's request	Numeric	No commas, signs or decimals

HO Record 46

A. through D. same as HO Record 39		
E. Line number	Numeric	46
F. Company-initiated cancellations < 60 days after effective date	Numeric	No commas, signs or decimals

HO Record 47

A. through D. same as HO Record 39		
E. Line number	Numeric	47
F. Company-initiated cancellations 60 - 90 days after effective date	Numeric	No commas, signs or decimals

HO Record 48

A. through D. same as HO Record 39		
E. Line number	Numeric	48
F. Company-initiated cancellations > 90 days after effective date	Numeric	No commas, signs or decimals

HO Record 49

A. through D. same as HO Record 39		
E. Line number	Numeric	49
F. Complaints received directly from consumers	Numeric	No commas, signs or decimals

Long-Term Care

The Long-Term Care line of business consists of five types of records:

- Interrogatory – 18 records with 7 columns per record
- General Information – 12 records with 8 columns per record
- Claimants – 16 records with 8 columns per record
- Benefits – 12 records with 8 columns per record
- Lawsuits – 5 records with 8 columns per record

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

Long-Term Care Interrogatories

LTC Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbrev.
D. Form	Text	LTCINT
E. Line number	Numeric	1
Stand-Alone LTC: Does company have data to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 2

A. through D. same as LTC Record 1		
E. Line number	Numeric	2
Life LTC Hybrid: Does company have data to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 3

A. through D. same as LTC Record 1		
E. Line number	Numeric	3
Annuity LTC Hybrid: Does company have data to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 4

A. through D. same as LTC Record 1		
E. Line number	Numeric	4
Stand-Alone LTC: Significant event or strategy change affecting reported data?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 5

A. through D. same as LTC Record 1		
E. Line number	Numeric	5
If Record 4 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 6

A. through D. same as LTC Record 1		
E. Line number	Numeric	6
Life LTC Hybrid: Significant event or strategy change affecting reported data?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 7

A. through D. same as LTC Record 1		
E. Line number	Numeric	7
If Record 6 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 8

A. through D. same as LTC Record 1		
E. Line number	Numeric	8
Annuity LTC Hybrid: Significant event or strategy change affecting reported data?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 9

A. through D. same as LTC Record 1		
E. Line number	Numeric	9
If Record 8 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 10

A. through D. same as LTC Record 1		
E. Line number	Numeric	10
Stand-Alone LTC: All or part of business sold, closed, or moved during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 11

A. through D. same as LTC Record 1		
E. Line number	Numeric	11
If Record 10 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 12

A. through D. same as LTC Record 1		
E. Line number	Numeric	12
Life LTC Hybrid: All or part of business sold, closed, or moved during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 13

A. through D. same as LTC Record 1		
E. Line number	Numeric	13
If Record 12 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 14

A. through D. same as LTC Record 1		
E. Line number	Numeric	14
Annuity LTC Hybrid: All or part of business sold, closed, or moved during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

LTC Record 15

A. through D. same as LTC Record 1		
E. Line number	Numeric	15
If Record 14 = Y, explain		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 16

A. through D. same as LTC Record 1		
E. Line number	Numeric	16
Stand-Alone LTC: Additional state specific comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 17

A. through D. same as LTC Record 1		
E. Line number	Numeric	17
Life LTC Hybrid: Additional state specific comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

LTC Record 18

A. through D. same as LTC Record 1		
E. Line number	Numeric	18
Annuity LTC Hybrid: Additional state specific comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Long-Term Care General Information

LTC Record 19

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LTCGENINFO
E. Line number	Numeric	19
Number of policies/contracts in force as of the beginning of the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 20

A. through D. same as LTC Record 19		
E. Line number	Numeric	20
Number of new business policies/contracts issued during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 21

A. through D. same as LTC Record 19		
E. Line number	Numeric	21
Number of free look cancellations during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 22

A. through D. same as LTC Record 19		
E. Line number	Numeric	22
Number of lapses during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 23

A. through D. same as LTC Record 19		
E. Line number	Numeric	23
Number of rescissions during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 24

A. through D. same as LTC Record 19		
E. Line number	Numeric	24
Number of policies/contracts in force as of the end of the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 25

A. through D. same as LTC Record 19		
E. Line number	Numeric	25
Number of internal replacements during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 26

A. through D. same as LTC Record 19		
E. Line number	Numeric	26
Number of external replacements during the year		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 27

A. through D. same as LTC Record 19		
E. Line number	Numeric	27
Number of policies/contracts replaced where the age of the insured was < 65		
F. (no data required)		Leave blank
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 28

A. through D. same as LTC Record 19		
E. Line number	Numeric	28
Number of policies/contracts replaced where the age of the insured was between 65 & 80		
F. (no data required)		Leave blank
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 29

A. through D. same as LTC Record 19		
E. Line number	Numeric	29
Number of policies/contracts replaced where the age of the insured was > 80		
F. (no data required)		Leave blank
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 30

A. through D. same as LTC Record 19		
E. Line number	Numeric	30
Number of complaints received directly from consumers		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

Long-Term Care Claimant

LTC Record 31

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LTCCLMNT
E. Line number	Numeric	31
Number of claimants approved for benefits as of the beginning of the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 32

A. through D. same as LTC Record 31		
E. Line number	Numeric	32
Number of claimants with pending claimant request determinations – beginning period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 33

A. through D. same as LTC Record 31		
E. Line number	Numeric	33
Number of new claimants during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 34

A. through D. same as LTC Record 31		
E. Line number	Numeric	34
Number of claimants with pending claimant request determinations – end of period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 35

A. through D. same as LTC Record 31		
E. Line number	Numeric	35
Number of claimants approved for benefits as of the end of the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 36

A. through D. same as LTC Record 31		
E. Line number	Numeric	36
Number of claimants denied or not paid because claimant did not pursue		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 37

A. through D. same as LTC Record 31		
E. Line number	Numeric	37
Number of claimants denied or not paid due to pre-existing condition exclusion		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 38

A. through D. same as LTC Record 31		
E. Line number	Numeric	38
Number of claimants denied or not paid due to elimination or waiting period not met		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 39

A. through D. same as LTC Record 31		
E. Line number	Numeric	39
Number of claimants denied or not paid because service provided not covered		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 40

A. through D. same as LTC Record 31		
E. Line number	Numeric	40
Number of claimants denied or not paid because provider or facility not qualified		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 41

A. through D. same as LTC Record 31		
E. Line number	Numeric	41
Number of claimants denied or not paid because benefits eligibility criteria not met		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 42

A. through D. same as LTC Record 31		
E. Line number	Numeric	42
All other claimant requests denied or closed without payment		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 43

A. through D. same as LTC Record 31		
E. Line number	Numeric	43
Number of claim request determinations made within 0 - 30 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 44

A. through D. same as LTC Record 31		
E. Line number	Numeric	44
Number of claim request determinations made within 31 - 60 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 45

A. through D. same as LTC Record 31		
E. Line number	Numeric	45
Number of claim request determinations made within 61 - 90 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 46

A. through D. same as LTC Record 31		
E. Line number	Numeric	46
Number of claim request determinations made beyond 90 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

Long-Term Benefits

LTC Record 47

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LTCBENEPAY
E. Line number	Numeric	47
Number of benefit payment requests pending as of the beginning of the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 48

A. through D. same as LTC Record 47		
E. Line number	Numeric	48
Number of benefit payment requests received during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 49

A. through D. same as LTC Record 47		
E. Line number	Numeric	49
Number of benefit payment requests denied or not paid during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 50

A. through D. same as LTC Record 47		
E. Line number	Numeric	50
Number of benefit payment requests pending as of the end of period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 51

A. through D. same as LTC Record 47		
E. Line number	Numeric	51
Number of benefit payment requests paid within 0 - 30 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 52

A. through D. same as LTC Record 47		
E. Line number	Numeric	52
Number of benefit payment requests paid within 31 - 60 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 53

A. through D. same as LTC Record 47		
E. Line number	Numeric	53
Number of benefit payment requests paid within 61 - 90 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 54

A. through D. same as LTC Record 47		
E. Line number	Numeric	54
Number of benefit payment requests paid beyond 90 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 55

A. through D. same as LTC Record 47		
E. Line number	Numeric	55
Number of benefit payment requests denied or not paid within 0 - 30 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 56

A. through D. same as LTC Record 47		
E. Line number	Numeric	56
Number of benefit payment requests denied or not paid within 31 - 60 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 57

A. through D. same as LTC Record 47		
E. Line number	Numeric	57
Number of benefit payment requests denied or not paid within 61 - 90 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 58

A. through D. same as LTC Record 47		
E. Line number	Numeric	58
Number of benefit payment requests denied or not paid beyond 90 days		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

Long-Term Care Lawsuits

LTC Record 59

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LTCLAW
E. Line number	Numeric	59
Number of lawsuits open as of the beginning of the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 60

A. through D. same as LTC Record 59		
E. Line number	Numeric	60
Number of lawsuits opened during the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 61

A. through D. same as LTC Record 59		
E. Line number	Numeric	61
Number of lawsuits closed during the period—Total		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 62

A. through D. same as LTC Record 59		
E. Line number	Numeric	62
Number of lawsuits closed during the period with consideration for the consumer		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

LTC Record 63

A. through D. same as LTC Record 59		
E. Line number	Numeric	63
Number of lawsuits open as of the end of the period		
F. Stand-Alone LTC	Numeric	No commas, signs or decimals
G. Life LTC Hybrid	Numeric	No commas, signs or decimals
H. Annuity LTC Hybrid	Numeric	No commas, signs or decimals

Health

The Health line of business consists of 12 types of records, including both In-Exchange and Out-of-Exchange information reported:

In-Exchange and Out-of-Exchange

Interrogatory – 18 records with 7 columns per record

In-Exchange

Individual Health – 73 records with 10 columns

Small Group Health – 73 records with 10 columns

Catastrophic – 73 records with 6 columns

Multi-State Individual Health – 73 records with 10 columns

Multi-State Group Health – 73 records with 10 columns

Out-of-Exchange

Individual Health – 73 records with 10 columns

Small Group Health – 73 records with 10 columns

Grandfathered – 73 records with 9 columns

Catastrophic – 73 records with 6 columns

Large Group – 73 records with 6 columns

Student Coverage – 73 records with 6 columns

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

In-Exchange and Out-of-Exchange Health Interrogatories

Health Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbrev.
D. Form	Text	HLTHINT
E. Line number	Numeric	1
In-Exchange - Does the company have Individual Health insurance coverage other than transitional, grandfathered, multi-state, catastrophic, or student data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 2

A. through D. same as Health Record 1		
E. Line number	Numeric	2
In-Exchange - Does the company have Small Group Health insurance coverage other than transitional, grandfathered, or multi-state policies data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 3

A. through D. same as Health Record 1		
E. Line number	Numeric	3
In-Exchange - Does the company have Catastrophic data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 4

A. through D. same as Health Record 1		
E. Line number	Numeric	4
In-Exchange - Does the company have Multi-State (Individual) data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 5

A. through D. same as Health Record 1		
E. Line number	Numeric	5
In-Exchange - Does the company have Multi-State (Small Group) data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 6

A. through D. same as Health Record 1		
E. Line number	Numeric	6
In-Exchange - Number of small groups in-force at the end of the reporting period.		
F. (no data required)		Leave blank
G. Explanation	Numeric	No commas, signs or decimals

Health Record 7

A. through D. same as Health Record 1		
E. Line number	Numeric	7
In-Exchange - Does the company have an additional voluntary level of review for grievances? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 8

A. through D. same as Health Record 1		
E. Line number	Numeric	8
In-Exchange Comments.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Health Record 9

A. through D. same as Health Record 1		
E. Line number	Numeric	9
Out-of-Exchange - Does the company have Individual Health insurance coverage other than transitional, grandfathered, multi-state, catastrophic, or student data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 10

A. through D. same as Health Record 1		
E. Line number	Numeric	10
Out-of-Exchange - Does the company have Small Group Health insurance coverage other than transitional, grandfathered, or multi-state policies data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 11

A. through D. same as Health Record 1		
E. Line number	Numeric	11
Out-of-Exchange - Does the company have Grandfathered or Transitional plan data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 12

A. through D. same as Health Record 1		
E. Line number	Numeric	12
Out-of-Exchange - Does the company have Catastrophic data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 13

A. through D. same as Health Record 1		
E. Line number	Numeric	13
Out-of-Exchange - Does the company have Large Group Comprehensive Major Medical and Managed Care (minimum essential coverage policies) data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 14

A. through D. same as Health Record 1		
E. Line number	Numeric	14
Out-of-Exchange - Does the company have Student Coverage data to report? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 15

A. through D. same as Health Record 1		
E. Line number	Numeric	15
Out-of-Exchange - Number of small groups in-force at the end of the reporting period.		
F. (no data required)		Leave blank
G. Explanation	Numeric	No commas, signs or decimals

Health Record 16

A. through D. same as Health Record 1		
E. Line number	Numeric	16
Out-of-Exchange - Number of large groups in-force at the end of the reporting period.		
F. (no data required)		Leave blank
G. Explanation	Numeric	No commas, signs or decimals

Health Record 17

A. through D. same as Health Record 1		
E. Line number	Numeric	17
Out-of-Exchange - Does the company have an additional voluntary level of review for grievances? (Y/N)		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Health Record 18

A. through D. same as Health Record 1		
E. Line number	Numeric	18
Out-of-Exchange Comments.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

In-Exchange Individual Health Administration Questions

Health Record 19 – IEXINDIV Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	IEXINDIV
E. Line number	Numeric	19
Earned premiums for Reporting Year.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 20 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	20
Number of new policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 21 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	21
Number of policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 22 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	22
Member months for policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 23 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	23
Member months for policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 24 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	24
Number of policy terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 25 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	25
Number of policy terminations and cancellations due to non-payment of premium.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 26 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	26
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 27 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	27
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 28 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	28
Number of rescissions.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 29 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	29
Number of insured lives impacted by rescissions.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 30 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	30
Number of prior authorizations requested. (Excluding Pharmacy)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 31 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	31
Number of prior authorizations approved (Excluding Pharmacy).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 32 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	32
Number of prior authorizations denied (Excluding Pharmacy).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 33 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	33
Number of prior authorizations requested for mental health benefits, behavioral benefits, and substance use disorders.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 34 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	34
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 35 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	35
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 36 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	36
Number of prior authorizations requested (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 37 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	37
Number of prior authorizations approved (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 38 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	38
Number of prior authorizations denied (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 39 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	39
Number of claims received.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 40 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	40
Number of claims submitted by network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 41– IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	41
Number of claims submitted for by out-of-network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 42 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	42
Number of claim denials for in-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 43 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	43
In-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 44 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	44
In-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 45 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	45
In-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 46 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	46
In-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 47 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	47
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 48 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	48
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 49 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	49
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 50 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	50
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 51 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	51
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 52 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	52
Number of claim denials for out-of-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 53 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	53
Out-of-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 54 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	54
Out-of-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 55 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	55
Out-of-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 56 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	56
Out-of-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 57 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	57
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 58 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	58
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 59 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	59
Out-of-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 60 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	60
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 61 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	61
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 62 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	62
Number of paid claims for in-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 63 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	63
In-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 64 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	64
In-network claims paid 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 65 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	65
In-network claims paid 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 66 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	66
In-network claims paid beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 67 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	67
Number of paid claims for out-of-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 68 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	68
Out-of-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 69 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	69
Out-of-network claims paid within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 70 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	70
Out-of-network claims paid within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 71 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	71
Out-of-network claims paid beyond 90 days		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 72 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	72
Claims Paid		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 73 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	73
Insured/beneficiary co-payment responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 74 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	74
Insured coinsurance responsibility		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 75 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	75
Insured deductible responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 76 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	76
Number of claims received.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 77 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	77
Number of claim denials for in-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 78 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	78
Number of claim denials for out-of-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 79 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	79
Number of paid claims for in-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 80 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	80
Number of paid claims for out-of-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 81 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	81
Claims Paid.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 82 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	82
Insured/beneficiary co-payment responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 83 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	83
Insured coinsurance responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 84 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	84
Insured deductible responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 85 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	85
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 86 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	86
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 87 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	87
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 88 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	88
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 89 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	89
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 90 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	90
Number of final adverse determinations upheld upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 91 – IEXINDIV Table

A. through D. same as Health Record 19 – IEXINDIV Table		
E. Line number	Numeric	91
Number of final adverse determinations overturned upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

In-Exchange Small Group Health Administration Questions

Health Record 19 – IEXSMGRP Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	IEXSMGRP
E. Line number	Numeric	19
Earned premiums for Reporting Year.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 20 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	20
Number of new policies issued during the period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 21 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	21
Number of policies renewed during the period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 22 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	22
Member months for policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 23 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	23
Member months for policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 24 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	24
Number of policy terminations and cancellations initiated by the policyholder.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 25 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	25
Number of policy terminations and cancellations due to non-payment of premium.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 26 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	26
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 27 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	27
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 28 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	28
Number of rescissions.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 29 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	29
Number of insured lives impacted by rescissions.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 30 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	30
Number of prior authorizations requested.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 31 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	31
Number of prior authorizations approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 32 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	32
Number of prior authorizations denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 33 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	33
Number of prior authorizations requested for mental health benefits, behavioral benefits, and substance use disorders.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 34 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	34
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 35 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	35
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 36 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	36
Number of prior authorizations requested (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 37 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	37
Number of prior authorizations approved (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 38 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	38
Number of prior authorizations denied (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 39 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	39
Number of claims received.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 40 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	40
Number of claims submitted by network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 41– IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	41
Number of claims submitted for by out-of-network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 42 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	42
Number of claim denials for in-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 43 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	43
In-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 44 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	44
In-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 45 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	45
In-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 46 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	46
In-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 47 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	47
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 48 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	48
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 49 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	49
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 50 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	50
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 51 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	51
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 52 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	52
Number of claim denials for out-of-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 53 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	53
Out-of-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 54 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	54
Out-of-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 55 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	55
Out-of-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 56 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	56
Out-of-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 57 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	57
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 58 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	58
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 59 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	59
Out-of-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 60 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	60
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 61 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	61
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 62 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	62
Number of paid claims for in-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 63 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	63
In-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 64 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	64
In-network claims paid 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 65 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	65
In-network claims paid 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 66 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	66
In-network claims paid beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 67 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	67
Number of paid claims for out-of-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 68 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	68
Out-of-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 69 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	69
Out-of-network claims paid within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 70 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	70
Out-of-network claims paid within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 71 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	71
Out-of-network claims paid beyond 90 days		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 72 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	72
Claims Paid		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 73 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	73
Insured/beneficiary co-payment responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 74 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	74
Insured coinsurance responsibility		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 75 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	75
Insured deductible responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 76 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	76
Number of claims received.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 77 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	77
Number of claim denials for in-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 78 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	78
Number of claim denials for out-of-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 79 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	79
Number of paid claims for in-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 80 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	80
Number of paid claims for out-of-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 81 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	81
Claims Paid.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 82 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	82
Insured/beneficiary co-payment responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 83 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	83
Insured coinsurance responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 84 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	84
Insured deductible responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 85 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	85
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 86 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	86
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 87 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	87
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 88 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	88
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 89 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	89
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 90 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	90
Number of final adverse determinations upheld upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 91 – IEXSMGRP Table

A. through D. same as Health Record 19 – IEXSMGRP Table		
E. Line number	Numeric	91
Number of final adverse determinations overturned upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

In-Exchange Catastrophic Health Administration Questions

Health Record 19 – IEXCAT Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	IEXCAT
E. Line number	Numeric	19
Earned premiums for Reporting Year.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 20 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	20
Number of new policies issued during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 21 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	21
Number of policies renewed during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 22 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	22
Member months for policies issued during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 23 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	23
Member months for policies renewed during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 24 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	24
Number of policy terminations and cancellations initiated by the policyholder.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 25 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	25
Number of policy terminations and cancellations due to non-payment of premium.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 26 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	26
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 27 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	27
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 28 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	28
Number of rescissions.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 29 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	29
Number of insured lives impacted by rescissions.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 30 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	30
Number of prior authorizations requested.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 31 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	31
Number of prior authorizations approved.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 32 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	32
Number of prior authorizations denied.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 33 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	33
Number of prior authorizations requested for mental health benefits, behavioral benefits, and substance use disorders.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 34 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	34
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders denied.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 35 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	35
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders approved.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 36 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	36
Number of prior authorizations requested (Pharmacy Only).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 37 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	37
Number of prior authorizations approved (Pharmacy Only).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 38 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	38
Number of prior authorizations denied (Pharmacy Only).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 39 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	39
Number of claims received.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 40 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	40
Number of claims submitted by network providers.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 41– IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	41
Number of claims submitted for by out-of-network providers.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 42 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	42
Number of claim denials for in-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 43 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	43
In-network claims denied within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 44 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	44
In-network Claims denied within 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 45 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	45
In-network Claims denied within 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 46 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	46
In-network Claims denied beyond 90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 47 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	47
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 48 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	48
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 49 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	49
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 50 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	50
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 51 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	51
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 52 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	52
Number of claim denials for out-of-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 53 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	53
Out-of-network claims denied within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 54 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	54
Out-of-network Claims denied within 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 55 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	55
Out-of-network Claims denied within 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 56 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	56
Out-of-network Claims denied beyond 90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 57 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	57
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 58 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	58
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 59 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	59
Out-of-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 60 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	60
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 61 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	61
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 62 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	62
Number of paid claims for in-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 63 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	63
In-network claims paid within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 64 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	64
In-network claims paid 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 65 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	65
In-network claims paid 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 66 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	66
In-network claims paid beyond 90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 67 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	67
Number of paid claims for out-of-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 68 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	68
Out-of-network claims paid within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 69 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	69
Out-of-network claims paid within 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 70 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	70
Out-of-network claims paid within 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 71 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	71
Out-of-network claims paid beyond 90 days		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 72 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	72
Claims Paid		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 73 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	73
Insured/beneficiary co-payment responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 74 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	74
Insured coinsurance responsibility		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 75 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	75
Insured deductible responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 76 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	76
Number of claims received.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 77 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	77
Number of claim denials for in-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 78 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	78
Number of claim denials for out-of-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 79 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	79
Number of paid claims for in-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 80 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	80
Number of paid claims for out-of-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 81 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	81
Claims Paid.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 82 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	82
Insured/beneficiary co-payment responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 83 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	83
Insured coinsurance responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 84 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	84
Insured deductible responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 85 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	85
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 86 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	86
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 87 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	87
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 88 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	88
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 89 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	89
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 90 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	90
Number of final adverse determinations upheld upon request for external review.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 91 – IEXCAT Table

A. through D. same as Health Record 19 – IEXCAT Table		
E. Line number	Numeric	91
Number of final adverse determinations overturned upon request for external review.		
F. Catastrophic	Numeric	No commas, signs or decimals

In-Exchange Multi-State Individual Health Administration Questions

Health Record 19 – IEXMSIND Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	IEXMSIND
E. Line number	Numeric	19
Earned premiums for Reporting Year.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 20 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	20
Number of new policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 21 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	21
Number of policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 22 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	22
Member months for policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 23 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	23
Member months for policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 24 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	24
Number of policy terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 25 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	25
Number of policy terminations and cancellations due to non-payment of premium.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 26 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	26
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 27 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	27
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 28 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	28
Number of rescissions.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 29 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	29
Number of insured lives impacted by rescissions.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 30 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	30
Number of prior authorizations requested.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 31 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	31
Number of prior authorizations approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 32 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	32
Number of prior authorizations denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 33 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	33
Number of prior authorizations requested for mental health benefits, behavioral benefits, and substance use disorders.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 34 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	34
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 35 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	35
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 36 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	36
Number of prior authorizations requested (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 37 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	37
Number of prior authorizations approved (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 38 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	38
Number of prior authorizations denied (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 39 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	39
Number of claims received.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 40 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	40
Number of claims submitted by network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 41– IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	41
Number of claims submitted for by out-of-network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 42 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	42
Number of claim denials for in-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 43 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	43
In-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 44 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	44
In-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 45 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	45
In-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 46 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	46
In-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 47 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	47
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 48 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	48
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 49 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	49
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 50 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	50
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 51 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	51
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 52 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	52
Number of claim denials for out-of-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 53 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	53
Out-of-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 54 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	54
Out-of-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 55 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	55
Out-of-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 56 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	56
Out-of-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 57 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	57
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 58 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	58
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 59 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	59
Out-of-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 60 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	60
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 61 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	61
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 62 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	62
Number of paid claims for in-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 63 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	63
In-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 64 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	64
In-network claims paid 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 65 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	65
In-network claims paid 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 66 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	66
In-network claims paid beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 67 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	67
Number of paid claims for out-of-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 68 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	68
Out-of-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 69 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	69
Out-of-network claims paid within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 70 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	70
Out-of-network claims paid within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 71 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	71
Out-of-network claims paid beyond 90 days		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 72 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	72
Claims Paid		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 73 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	73
Insured/beneficiary co-payment responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 74 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	74
Insured coinsurance responsibility		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 75 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	75
Insured deductible responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 76 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	76
Number of claims received.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 77 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	77
Number of claim denials for in-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 78 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	78
Number of claim denials for out-of-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 79 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	79
Number of paid claims for in-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 80 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	80
Number of paid claims for out-of-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 81 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	81
Claims Paid.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 82 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	82
Insured/beneficiary co-payment responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 83 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	83
Insured coinsurance responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 84 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	84
Insured deductible responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 85 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	85
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 86 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	86
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 87 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table – IEXMSIND Table		
E. Line number	Numeric	87
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 88 – IEXMSIND Table

A. through D. same as Health Record 19		
E. Line number	Numeric	88
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 89 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	89
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 90 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	90
Number of final adverse determinations upheld upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 91 – IEXMSIND Table

A. through D. same as Health Record 19 – IEXMSIND Table		
E. Line number	Numeric	91
Number of final adverse determinations overturned upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

In-Exchange Multi-State Small Group Health Administration Questions

Health Record 19 – IEXMSSGRP Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	IEXMSSGRP
E. Line number	Numeric	19
Earned premiums for Reporting Year.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 20 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	20
Number of new policies issued during the period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 21 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	21
Number of policies renewed during the period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 22 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	22
Member months for policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 23 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	23
Member months for policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 24 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	24
Number of policy terminations and cancellations initiated by the policyholder.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 25 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	25
Number of policy terminations and cancellations due to non-payment of premium.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 26 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	26
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 27 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	27
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 28 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	28
Number of rescissions.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 29 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	29
Number of insured lives impacted by rescissions.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 30 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	30
Number of prior authorizations requested.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 31 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	31
Number of prior authorizations approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 32 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	32
Number of prior authorizations denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 33 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	33
Number of prior authorizations requested for mental health benefits, behavioral benefits, and substance use disorders.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 34 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	34
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 35 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	35
Number of prior authorizations for mental health benefits, behavioral benefits, and substance use disorders approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 36 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	36
Number of prior authorizations requested (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 37 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	37
Number of prior authorizations approved (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 38 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	38
Number of prior authorizations denied (Pharmacy Only).		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 39 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	39
Number of claims received.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 40 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	40
Number of claims submitted by network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 41– IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	41
Number of claims submitted for by out-of-network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 42 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	42
Number of claim denials for in-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 43 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	43
In-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 44 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	44
In-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 45 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	45
In-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 46 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	46
In-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 47 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	47
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 48 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	48
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 49 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	49
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 50 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	50
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 51 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	51
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 52 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	52
Number of claim denials for out-of-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 53 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	53
Out-of-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 54 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	54
Out-of-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 55 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	55
Out-of-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 56 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	56
Out-of-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 57 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	57
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 58 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	58
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 59 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	59
Out-of-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 60 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	60
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 61 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	61
Out-of-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 62 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	62
Number of paid claims for in-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 63 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	63
In-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 64 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	64
In-network claims paid 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 65 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	65
In-network claims paid 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 66 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	66
In-network claims paid beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 67 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	67
Number of paid claims for out-of-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 68 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	68
Out-of-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 69 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	69
Out-of-network claims paid within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 70 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	70
Out-of-network claims paid within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 71 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	71
Out-of-network claims paid beyond 90 days		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 72 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	72
Claims Paid		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 73 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	73
Insured/beneficiary co-payment responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 74 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	74
Insured coinsurance responsibility		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 75 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	75
Insured deductible responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 76 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	76
Number of claims received.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 77 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	77
Number of claim denials for in-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 78 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	78
Number of claim denials for out-of-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 79 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	79
Number of paid claims for in-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 80 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	80
Number of paid claims for out-of-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 81 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	81
Claims Paid.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 82 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	82
Insured/beneficiary co-payment responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 83 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	83
Insured coinsurance responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 84 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	84
Insured deductible responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 85 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	85
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 86 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	86
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 87 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	87
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 88 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	88
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 89 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	89
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 90 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	90
Number of final adverse determinations upheld upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 91 – IEXMSSGRP Table

A. through D. same as Health Record 19 – IEXMSSGRP Table		
E. Line number	Numeric	91
Number of final adverse determinations overturned upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Out-of-Exchange Individual Health Administration Questions

Health Record 92 – OEXINDIV Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	OEXINDIV
E. Line number	Numeric	92
Earned premiums for Reporting Year.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 93 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	93
Number of new policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 94 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	94
Number of policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 95 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	95
Member months for policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 96 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	96
Member months for policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 97 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	97
Number of policy terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 98 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	98
Number of policy terminations and cancellations due to non-payment of premium.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 99 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	99
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 100 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	100
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 101 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	101
Number of rescissions.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 102 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	102
Number of insured lives impacted by rescissions.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 103 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	103
Number of prior authorizations requested. (Excluding Pharmacy)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 104 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	104
Number of prior authorizations approved. (Excluding Pharmacy)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 105 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	105
Number of prior authorizations denied. (Excluding Pharmacy)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 106 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	106
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 107 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	107
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 108 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	108
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 109 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	109
Number of prior authorizations requested. (Pharmacy Only)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 110 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	110
Number of prior authorizations approved. (Pharmacy Only)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 111 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	111
Number of prior authorizations denied. (Pharmacy Only)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 112 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	112
Number of claims received.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 113 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	113
Number of claims submitted by network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 114 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	114
Number of claims submitted for by out-of-network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 115 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	115
Number of claim denials for in-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 116 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	116
In-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 117 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	117
In-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 118 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	118
In-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 119 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	119
In-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 120 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	120
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 121 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	121
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 122 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	122
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 123 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	123
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 124 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	124
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 125 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	125
Number of claim denials for out-of-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 126 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	126
Out-of-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 127 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	127
Out-of-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 128 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	128
Out-of-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 129 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	129
Out-of-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 130 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	130
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 131 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	131
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 132 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	132
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 133 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	133
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 134 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	134
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 135 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	135
Number of paid claims for in-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 136 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	136
In-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 137 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	137
In-network claims paid 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 138 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	138
In-network claims paid 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 139 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	139
In-network claims paid beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 140 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	140
Number of paid claims for out-of-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 141 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	141
Out-of-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 142 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	142
Out-of-network claims paid within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 143 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	143
Out-of-network claims paid within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 144 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	144
Out-of-network claims paid beyond 90 days		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 145 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	145
Claims Paid		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 146 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	146
Insured/beneficiary co-payment responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 147 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	147
Insured coinsurance responsibility		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 148 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	148
Insured deductible responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 149 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	149
Number of claims received.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 150 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	150
Number of claim denials for in-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 151 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	151
Number of claim denials for out-of-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 152 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	152
Number of paid claims for in-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 153 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	153
Number of paid claims for out-of-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 154 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	154
Claims Paid.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 155 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	155
Insured/beneficiary co-payment responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 156 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	156
Insured coinsurance responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 157 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	157
Insured deductible responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 158 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	158
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 159 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	159
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 160 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	160
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 161 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	161
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 162 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	162
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 163 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	163
Number of final adverse determinations upheld upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 164 – OEXINDIV Table

A. through D. same as Health Record 92 – OEXINDIV Table		
E. Line number	Numeric	164
Number of final adverse determinations overturned upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Out-of-Exchange Small Group Health Administration Questions

Health Record 92 – OEXSMGRP Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	OEXSMGRP
E. Line number	Numeric	92
Earned premiums for Reporting Year.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 93 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	93
Number of new policies issued during the period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 94 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	94
Number of policies renewed during the period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 95 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	95
Member months for policies issued during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 96 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	96
Member months for policies renewed during the period.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 97 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	97
Number of policy terminations and cancellations initiated by the policyholder.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 98 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	98
Number of policy terminations and cancellations due to non-payment of premium.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. (no data required)		Leave blank

Health Record 99 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	99
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 100 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	100
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 101 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	101
Number of rescissions.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 102 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	102
Number of insured lives impacted by rescissions.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 103 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	103
Number of prior authorizations requested.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 104 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	104
Number of prior authorizations approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 105 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	105
Number of prior authorizations denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 106 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	106
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 107 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	107
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders denied.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 108 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	108
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders approved.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 109 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	109
Number of prior authorizations requested. (Pharmacy Only)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 110 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	110
Number of prior authorizations approved. (Pharmacy Only)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 111 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	111
Number of prior authorizations denied. (Pharmacy Only)		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 112 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	112
Number of claims received.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 113 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	113
Number of claims submitted by network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 114 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	114
Number of claims submitted for by out-of-network providers.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 115 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	115
Number of claim denials for in-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 116 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	116
In-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 117 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	117
In-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 118 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	118
In-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 192 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	119
In-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 120 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	120
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 121 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	121
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 122 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	122
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 123 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	123
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 124 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	124
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 125 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	125
Number of claim denials for out-of-network claims.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 126 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	126
Out-of-network claims denied within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 127 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	127
Out-of-network Claims denied within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 128 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	128
Out-of-network Claims denied within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 129 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	129
Out-of-network Claims denied beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 130 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	130
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 131 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	131
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 132 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	132
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 133 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	133
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 134 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	134
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 135 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	135
Number of paid claims for in-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 136 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	136
In-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 137 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	137
In-network claims paid 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 138 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	138
In-network claims paid 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 139 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	139
In-network claims paid beyond 90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 140 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	140
Number of paid claims for out-of-network services.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 141 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	141
Out-of-network claims paid within 0-30 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 142 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	142
Out-of-network claims paid within 31-60 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 143 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	143
Out-of-network claims paid within 61-90 days.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 144 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	144
Out-of-network claims paid beyond 90 days		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 145 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	145
Claims Paid		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 146 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	146
Insured/beneficiary co-payment responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 147 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	147
Insured coinsurance responsibility		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 148 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	148
Insured deductible responsibility.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 149 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	149
Number of claims received.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 150 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	150
Number of claim denials for in-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 151 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	151
Number of claim denials for out-of-network claims.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 152 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	152
Number of paid claims for in-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 153 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	153
Number of paid claims for out-of-network services.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 154 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	154
Claims Paid.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 155 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	155
Insured/beneficiary co-payment responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 156 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	156
Insured coinsurance responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 157 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	157
Insured deductible responsibility.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 158 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	158
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 159 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	159
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 160 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	160
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 161 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	161
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Bronze	Numeric	No commas, signs or decimals
G. Silver	Numeric	No commas, signs or decimals
H. Gold	Numeric	No commas, signs or decimals
I. Platinum	Numeric	No commas, signs or decimals
J. Total	Numeric	No commas, signs or decimals

Health Record 162 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	162
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 163 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	163
Number of final adverse determinations upheld upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Health Record 164 – OEXSMGRP Table

A. through D. same as Health Record 92– OEXSMGRP Table		
E. Line number	Numeric	164
Number of final adverse determinations overturned upon request for external review.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Total	Numeric	No commas, signs or decimals

Out-of-Exchange Grandfathered Health Administration Questions

Health Record 92 – OEXGRFTHD Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	OEXGRFTHD
E. Line number	Numeric	92
Earned premiums for Reporting Year.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 93 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	93
Number of new policies issued during the period.		
F. Large Group		No commas, signs or decimals
G. Small Group		Leave blank
H. Individual		No commas, signs or decimals
I. Total		Leave blank

Health Record 94 OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	94
Number of policies renewed during the period.		
F. Large Group		No commas, signs or decimals
G. Small Group		Leave blank
H. Individual		No commas, signs or decimals
I. Total		Leave blank

Health Record 95 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	95
Member months for policies issued during the period.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 96 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	96
Member months for policies renewed during the period.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 97 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	97
Number of policy terminations and cancellations initiated by the policyholder.		
F. Large Group		No commas, signs or decimals
G. Small Group		Leave blank
H. Individual		No commas, signs or decimals
I. Total		Leave blank

Health Record 98 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	98
Number of policy terminations and cancellations due to non-payment of premium.		
F. Large Group		No commas, signs or decimals
G. Small Group		Leave blank
H. Individual		No commas, signs or decimals
I. Total		Leave blank

Health Record 99 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	99
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 100 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	100
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 101 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	101
Number of rescissions.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 102 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	102
Number of insured lives impacted by rescissions.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 103 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	103
Number of prior authorizations requested.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 104 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	104
Number of prior authorizations approved.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 105 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	105
Number of prior authorizations denied.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 106 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	106
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 107 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	107
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders denied.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 108 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	108
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders approved.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 109 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	109
Number of prior authorizations requested. (Pharmacy Only)		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 110 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	110
Number of prior authorizations approved. (Pharmacy Only)		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 111 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	111
Number of prior authorizations denied. (Pharmacy Only)		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 112 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	112
Number of claims received.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 113 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	113
Number of claims submitted by network providers.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 114 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	114
Number of claims submitted for by out-of-network providers.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 115 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	115
Number of claim denials for in-network claims.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 116 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	116
In-network claims denied within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 117 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	117
In-network Claims denied within 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 118 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	118
In-network Claims denied within 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 192 – OEXGRFTHD Table

A. through D. same as Health Record 92		
E. Line number	Numeric	119
In-network Claims denied beyond 90 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 120 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	120
In-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 121 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	121
In-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 122 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	122
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 123 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	123
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 124 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	124
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 125 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	125
Number of claim denials for out-of-network claims.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 126 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	126
Out-of-network claims denied within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 127 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	127
Out-of-network Claims denied within 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 128 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	128
Out-of-network Claims denied within 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 129 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	129
Out-of-network Claims denied beyond 90 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 130 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	130
Out-of-network Claims denied, rejected or returned – Claims Submission Coding Error(s).		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 131 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	131
Out-of-network Claims denied, rejected or returned – Prior Authorization Needed.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 132 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	132
In-network Claims denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 133 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	133
In-network Claims denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 134 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	134
In-network Claims denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 135 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	135
Number of paid claims for in-network services.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 136 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	136
In-network claims paid within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 137 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	137
In-network claims paid 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 138 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	138
In-network claims paid 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 139 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	139
In-network claims paid beyond 90 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 140 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	140
Number of paid claims for out-of-network services.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 141 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	141
Out-of-network claims paid within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 142 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	142
Out-of-network claims paid within 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 143 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	143
Out-of-network claims paid within 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 144 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	144
Out-of-network claims paid beyond 90 days		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 145 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	145
Claims Paid		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 146 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	146
Insured/beneficiary co-payment responsibility.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 147 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	147
Insured coinsurance responsibility		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 148 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	148
Insured deductible responsibility.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 149 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	149
Number of claims received.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 150 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	150
Number of claim denials for in-network claims.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 151 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	151
Number of claim denials for out-of-network claims.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 152 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	152
Number of paid claims for in-network services.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 153 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	153
Number of paid claims for out-of-network services.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 154 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	154
Claims Paid.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 155 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	155
Insured/beneficiary co-payment responsibility.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 156 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	156
Insured coinsurance responsibility.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 157 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	157
Insured deductible responsibility.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 158 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	158
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 159 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	159
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 160 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	160
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 161 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	161
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 162 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	162
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 163 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	163
Number of final adverse determinations upheld upon request for external review.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Health Record 164 – OEXGRFTHD Table

A. through D. same as Health Record 92 – OEXGRFTHD Table		
E. Line number	Numeric	164
Number of final adverse determinations overturned upon request for external review.		
F. Large Group	Numeric	No commas, signs or decimals
G. Small Group	Numeric	No commas, signs or decimals
H. Individual	Numeric	No commas, signs or decimals
I. Total	Numeric	No commas, signs or decimals

Out-of-Exchange Catastrophic Health Administration Questions

Health Record 92 – OEXCAT Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	OEXCAT
E. Line number	Numeric	92
Earned premiums for Reporting Year.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 93 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	93
Number of new policies issued during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 94 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	94
Number of policies renewed during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 95 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	95
Member months for policies issued during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 96 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	96
Member months for policies renewed during the period.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 97 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	97
Number of policy terminations and cancellations initiated by the policyholder.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 98 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	98
Number of policy terminations and cancellations due to non-payment of premium.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 99 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	99
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 100 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	100
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 101 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	101
Number of rescissions.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 102 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	102
Number of insured lives impacted by rescissions.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 103 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	103
Number of prior authorizations requested. (Excluding Pharmacy)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 104 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	104
Number of prior authorizations approved. (Excluding Pharmacy)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 105 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	105
Number of prior authorizations denied. (Excluding Pharmacy)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 106 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	106
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 107 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	107
Number of prior authorizations for mental health benefits, behavioral health benefits, and substance use disorders denied.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 108 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	108
Number of prior authorizations for mental health benefits, behavioral health benefits, and substance use disorders approved.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 109 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	109
Number of prior authorizations requested. (Pharmacy Only)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 110 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	110
Number of prior authorizations approved. (Pharmacy Only)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 111 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	111
Number of prior authorizations denied. (Pharmacy Only)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 112 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	112
Number of claims received.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 113 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	113
Number of claims submitted by network providers.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 114 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	114
Number of claims submitted for by out-of-network providers.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 115 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	115
Number of claim denials for in-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 116 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	116
In-network claims denied within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 117 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	117
In-network Claims denied within 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 118 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	118
In-network Claims denied within 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 119 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	119
In-network Claims denied beyond 90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 120 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	120
Number of in-network denied, rejected or returned – Claims Submission Coding Error(s).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 121 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	121
Number of in-network denied, rejected or returned – Prior Authorization Needed.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 122 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	122
Number of in-network denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 123 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	123
Number of in-network denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 124 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	124
Number of in-network denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 125 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	125
Number of claim denials for out-of-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 126 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	126
Out-of-network claims denied within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 127 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	127
Out-of-network Claims denied within 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 128 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	128
Out-of-network Claims denied within 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 129 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	129
Out-of-network Claims denied beyond 90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 130 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	130
Number of out-of-network denied, rejected or returned – Claims Submission Coding Error(s).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 131 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	131
Number of out-of-network denied, rejected or returned – Prior Authorization Needed.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 132 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	132
Number of out-of-network denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 133 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	133
Number of out-of-network denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 134 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	134
Number of out-of-network denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 135 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	135
Number of paid claims for in-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 136 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	136
In-network claims paid within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 137 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	137
In-network claims paid 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 138 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	138
In-network claims paid 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 139 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	139
In-network claims paid beyond 90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 140 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	140
Number of paid claims for out-of-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 141 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	141
Out-of-network claims paid within 0-30 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 142 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	142
Out-of-network claims paid within 31-60 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 143 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	143
Out-of-network claims paid within 61-90 days.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 144 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	144
Out-of-network claims paid beyond 90 days		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 145 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	145
Claims Paid		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 146 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	146
Insured/beneficiary co-payment responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 147 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	147
Insured coinsurance responsibility		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 148 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	148
Insured deductible responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 149 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	149
Number of claims received.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 150 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	150
Number of claim denials for in-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 151 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	151
Number of claim denials for out-of-network claims.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 152 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	152
Number of paid claims for in-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 153 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	153
Number of paid claims for out-of-network services.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 154 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	154
Claims Paid.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 155 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	155
Insured/beneficiary co-payment responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 156 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	156
Insured coinsurance responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 157 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	157
Insured deductible responsibility.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 158 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	158
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 159 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	159
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 160 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	160
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 161 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	161
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 162 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	162
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 163 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	163
Number of final adverse determinations upheld upon request for external review.		
F. Catastrophic	Numeric	No commas, signs or decimals

Health Record 164 – OEXCAT Table

A. through D. same as Health Record 92 – OEXCAT Table		
E. Line number	Numeric	164
Number of final adverse determinations overturned upon request for external review.		
F. Catastrophic	Numeric	No commas, signs or decimals

Out-of-Exchange Large Group Health Administration Questions

Health Record 92 – OEXLGGRP Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	OEXLGGRP
E. Line number	Numeric	92
Earned premiums for Reporting Year.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 93 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	93
Number of new policies issued during the period.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 94 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	94
Number of policies renewed during the period.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 95 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	95
Member months for policies issued during the period.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 96 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	96
Member months for policies renewed during the period.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 97 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	97
Number of policy terminations and cancellations initiated by the policyholder.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 98 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	98
Number of policy terminations and cancellations due to non-payment of premium.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 99 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	99
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 100 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	100
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 101 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	101
Number of rescissions.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 102 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	102
Number of insured lives impacted by rescissions.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 103 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	103
Number of prior authorizations requested. (Excluding Pharmacy)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 104 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	104
Number of prior authorizations approved. (Excluding Pharmacy)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 105 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	105
Number of prior authorizations denied. (Excluding Pharmacy)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 106 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	106
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 107 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	107
Number of prior authorizations for mental health benefits, behavioral health benefits, and substance use disorders denied.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 108 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	108
Number of prior authorizations for mental health benefits, behavioral health benefits, and substance use disorders approved.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 109 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	109
Number of prior authorizations requested. (Pharmacy Only)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 110 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	110
Number of prior authorizations approved. (Pharmacy Only)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 111 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	111
Number of prior authorizations denied. (Pharmacy Only)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 112 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	112
Number of claims received.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 113 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	113
Number of claims submitted by network providers.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 114 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	114
Number of claims submitted for by out-of-network providers.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 115 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	115
Number of claim denials for in-network claims.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 116 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	116
In-network claims denied within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 117 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	117
In-network Claims denied within 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 118 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	118
In-network Claims denied within 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 119 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	119
In-network Claims denied beyond 90 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 120 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	120
Number of in-network denied, rejected or returned – Claims Submission Coding Error(s).		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 121 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	121
Number of in-network denied, rejected or returned – Prior Authorization Needed.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 122 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	122
Number of in-network denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 123 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	123
Number of in-network denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 124 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	124
Number of in-network denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 125 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	125
Number of claim denials for out-of-network claims.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 126 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	126
Out-of-network claims denied within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 127 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	127
Out-of-network Claims denied within 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 128 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	128
Out-of-network Claims denied within 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 129 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	129
Out-of-network Claims denied beyond 90 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 130 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	130
Number of out-of-network denied, rejected or returned – Claims Submission Coding Error(s).		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 131 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	131
Number of out-of-network denied, rejected or returned – Prior Authorization Needed.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 132 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	132
Number of out-of-network denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 133 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	133
Number of out-of-network denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 134 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	134
Number of out-of-network denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 135 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	135
Number of paid claims for in-network services.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 136 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	136
In-network claims paid within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 137 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	137
In-network claims paid 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 138 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	138
In-network claims paid 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 139 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	139
In-network claims paid beyond 90 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 140 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	140
Number of paid claims for out-of-network services.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 141 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	141
Out-of-network claims paid within 0-30 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 142 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	142
Out-of-network claims paid within 31-60 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 143 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	143
Out-of-network claims paid within 61-90 days.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 144 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	144
Out-of-network claims paid beyond 90 days		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 145 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	145
Claims Paid		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 146 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	146
Insured/beneficiary co-payment responsibility.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 147 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	147
Insured coinsurance responsibility		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 148 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	148
Insured deductible responsibility.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 149 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	149
Number of claims received.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 150 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	150
Number of claim denials for in-network claims.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 151 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	151
Number of claim denials for out-of-network claims.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 152 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	152
Number of paid claims for in-network services.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 153 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	153
Number of paid claims for out-of-network services.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 154 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	154
Claims Paid.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 155 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	155
Insured/beneficiary co-payment responsibility.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 156 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	156
Insured coinsurance responsibility.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 157 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	157
Insured deductible responsibility.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 158 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	158
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 159 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	159
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 160 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	160
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 161 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	161
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 162 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	162
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 163 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	163
Number of final adverse determinations upheld upon request for external review.		
F. Large Group	Numeric	No commas, signs or decimals

Health Record 164 – OEXLGGRP Table

A. through D. same as Health Record 92 – OEXLGGRP Table		
E. Line number	Numeric	164
Number of final adverse determinations overturned upon request for external review.		
F. Large Group	Numeric	No commas, signs or decimals

Out-of-Exchange Student Health Administration Questions

Health Record 92 – OEXSTDNT Table

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	OEXSTDNT
E. Line number	Numeric	92
Earned premiums for Reporting Year.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 93 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	93
Number of new policies issued during the period.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 94 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	94
Number of policies renewed during the period.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 95 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	95
Member months for policies issued during the period.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 96 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	96
Member months for policies renewed during the period.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 97 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	97
Number of policy terminations and cancellations initiated by the policyholder.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 98 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	98
Number of policy terminations and cancellations due to non-payment of premium.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 99 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	99
Number of insured lives impacted on terminations and cancellations initiated by the policyholder.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 100 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	100
Number of insured lives impacted on policies terminated and cancelled due to non-payment.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 101 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	101
Number of rescissions.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 102 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	102
Number of insured lives impacted by rescissions.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 103 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	103
Number of prior authorizations requested. (Excluding Pharmacy)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 104 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	104
Number of prior authorizations approved. (Excluding Pharmacy)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 105 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	105
Number of prior authorizations denied. (Excluding Pharmacy)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 106 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	106
Number of prior authorizations requested for mental health benefits, behavioral health benefits, and substance use disorders.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 107 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	107
Number of prior authorizations for mental health benefits, behavioral health benefits, and substance use disorders denied.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 108 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	108
Number of prior authorizations for mental health benefits, behavioral health benefits, and substance use disorders approved.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 109 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	109
Number of prior authorizations requested. (Pharmacy Only)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 110 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	110
Number of prior authorizations approved. (Pharmacy Only)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 111 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	111
Number of prior authorizations denied. (Pharmacy Only)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 112 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	112
Number of claims received.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 113 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	113
Number of claims submitted by network providers.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 114 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	114
Number of claims submitted for by out-of-network providers.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 115 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	115
Number of claim denials for in-network claims.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 116 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	116
In-network claims denied within 0-30 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 117 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	117
In-network Claims denied within 31-60 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 118 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	118
In-network Claims denied within 61-90 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 119 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	119
In-network Claims denied beyond 90 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 120 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	120
Number of in-network denied, rejected or returned – Claims Submission Coding Error(s).		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 121 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	121
Number of in-network denied, rejected or returned – Prior Authorization Needed.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 122 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	122
Number of in-network denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 123 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	123
Number of in-network denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 124 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	124
Number of in-network denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 125 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	125
Number of claim denials for out-of-network claims.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 126 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	126
Out-of-network claims denied within 0-30 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 127 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	127
Out-of-network Claims denied within 31-60 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 128 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	128
Out-of-network Claims denied within 61-90 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 129 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	129
Out-of-network Claims denied beyond 90 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 130 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	130
Number of out-of-network denied, rejected or returned – Claims Submission Coding Error(s).		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 131 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	131
Number of out-of-network denied, rejected or returned – Prior Authorization Needed.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 132 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	132
Number of out-of-network denied, rejected or returned – Non-Covered Benefit or Benefit Limitation.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 133 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	133
Number of out-of-network denied, rejected or returned – Not Medically Necessary (Excluding Behavioral Health Benefits).		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 134 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	134
Number of out-of-network denied, rejected or returned – Not Medically Necessary (Behavioral Health Benefits Only).		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 135 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	135
Number of paid claims for in-network services.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 136 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	136
In-network claims paid within 0-30 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 137 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	137
In-network claims paid 31-60 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 138 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	138
In-network claims paid 61-90 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 139 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	139
In-network claims paid beyond 90 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 140 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	140
Number of paid claims for out-of-network services.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 141 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	141
Out-of-network claims paid within 0-30 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 142 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	142
Out-of-network claims paid within 31-60 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 143 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	143
Out-of-network claims paid within 61-90 days.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 144 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	144
Out-of-network claims paid beyond 90 days		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 145 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	145
Claims Paid		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 146 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	146
Insured/beneficiary co-payment responsibility.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 147 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	147
Insured coinsurance responsibility		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 148 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	148
Insured deductible responsibility.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 149 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	149
Number of claims received.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 150 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	150
Number of claim denials for in-network claims.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 151 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	151
Number of claim denials for out-of-network claims.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 152 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	152
Number of paid claims for in-network services.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 153 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	153
Number of paid claims for out-of-network services.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 154 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	154
Claims Paid.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 155 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	155
Insured/beneficiary co-payment responsibility.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 156 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	156
Insured coinsurance responsibility.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 157 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	157
Insured deductible responsibility.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 158 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	158
Number of customer requests for internal reviews of grievances involving adverse determinations (Do not include additional voluntary levels of reviews.)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 159 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	159
Number of adverse determinations upheld upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 160 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	160
Number of adverse determinations overturned upon request for internal review (Do not include additional voluntary levels of reviews.)		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 161 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	161
Number of customer requests for internal reviews of grievances not involving adverse determinations.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 162 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	162
Number of customer requested appeals on final adverse determinations to an external review organization.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 163 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	163
Number of final adverse determinations upheld upon request for external review.		
F. Student Coverage	Numeric	No commas, signs or decimals

Health Record 164 – OEXSTDNT Table

A. through D. same as Health Record 92 – OEXSTDNT Table		
E. Line number	Numeric	164
Number of final adverse determinations overturned upon request for external review.		
F. Student Coverage	Numeric	No commas, signs or decimals

Lender Placed Insurance (Home and Auto)

The Lender Placed Insurance line of business consists of three types of records:

Interrogatory – 24 records with 7 columns per record

Claims – 23 records with 13 columns per record

Underwriting – 29 records with 13 columns per record

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

Lender Placed Interrogatories

Lender Placed Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LPIINT
E. Line number	Numeric	1
Single-interest lender-placed auto coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 2

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	2
Single-interest lender-placed auto coverage – If yes, enter the percentage of all lender-placed auto policies/certificates issued during the period which were single-interest lender-placed auto.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 3

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	3
Dual-interest lender-placed auto coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 4

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	4
Dual-interest lender-placed auto coverage – If yes, enter the percentage of all lender-placed auto policies/certificates issued during the period which were dual-interest lender-placed auto.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 5

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	5
Single-interest lender-placed homeowners hazard coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 6

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	6
Single-interest lender-placed homeowners hazard coverage – If yes, enter the percentage of all lender-placed home policies/certificates issued during the period which were single-interest lender-placed homeowners hazard coverage.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 7

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	7
Dual-interest lender-placed homeowners hazard coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 8

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	8
Dual-interest lender-placed homeowners hazard coverage – If yes, enter the percentage of all lender-placed home policies/certificates issued during the period which were dual-interest lender-placed homeowners hazard coverage.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 9

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	9
Single-interest lender-placed homeowners flood coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 10

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	10
Single-interest lender-placed homeowners flood coverage – If yes, enter the percentage of all lender-placed home policies/certificates issued during the period which were single-interest lender-placed homeowners flood coverage.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 11

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	11
Dual-interest lender-placed homeowners flood coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 12

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	12
Dual-interest lender-placed homeowners flood coverage – If yes, enter the percentage of all lender-placed home policies/certificates issued during the period which were dual-interest lender-placed homeowners flood coverage.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 13

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	13
Single-interest lender-placed homeowners wind-only coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 14

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	14
Single-interest lender-placed homeowners wind-only coverage – If yes, enter the percentage of all lender-placed home policies/certificates issued during the period which were single-interest lender-placed homeowners wind-only coverage.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 15

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	15
Dual-interest lender-placed homeowners wind-only coverage - Were there policies/certificates in-force during the period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 16

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	16
Dual-interest lender-placed homeowners wind-only coverage – If yes, enter the percentage of all lender-placed home policies/certificates issued during the period which were dual-interest lender-placed homeowners wind-only coverage.		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 17

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	17
Was the company still actively writing policies/certificates in the state at hear end?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 18

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	18
Has the company had a significant event/business strategy that would affect data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 19

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	19
Significant event/business strategy - If yes, add additional comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 20

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	20
Has all or part of this block of business been sold, closed or moved to another company during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 21

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	21
Block of business sold, closed or moved - If yes, add additional comments		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 22

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	22
How does the company treat subsequent supplemental payments on previously closed claims (or additional payments on a previously reported claim)?		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 23

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	23
Does the company require third parties it contracts with to forward insurance-related complaints to the company so the company may report the complaints in its complaints logs?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 24

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	24
Contracts with third parties – Additional comments if desired		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 25

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	25
Does the company monitor third parties it contracts with to ensure insurance complaints are forwarded to the company?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Lender Placed Record 26

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	26
Monitoring third parties – Additional comments if desired		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 27

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	27
Additional state specific claims comments (optional):		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Record 28

A. through D. same as Lender Placed Record 1		
E. Line number	Numeric	28
Additional state specific underwriting comments (optional):		
F. (no data required)		Leave blank
G. Explanation	Text	Text

Lender Placed Claims

Lender Placed Record 29

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LPICLMS
E. Line number	Numeric	29
Number of claims open at the beginning of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 30

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	30
Number of claims opened during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 31

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	31
Number of claims closed during the period, with payment.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 32

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	32
Number of claims closed during the period, without payment.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 33

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	33
Number of claims remaining open at the end of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 34

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	34
Number of claims closed with payment within 0-30 days.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 35

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	35
Number of claims closed with payment within 31-60 days.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 36

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	36
Number of claims closed with payment within 61-90 days.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 37

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	37
Number of claims closed with payment within 91-180 days.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 38

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	38
Number of claims closed with payment within 181-365 days.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 39

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	39
Number of claims closed with payment beyond 365 days.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 40

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	40
Number of claims closed without payment within 0-30 days.		
N. Single-Interest Auto	Numeric	No commas, signs or decimals
O. Dual-Interest Auto	Numeric	No commas, signs or decimals
P. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
Q. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
R. Single-Interest Home Flood	Numeric	No commas, signs or decimals
S. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
T. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
U. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 41

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	41
Number of claims closed without payment within 31-60 days.		
N. Single-Interest Auto	Numeric	No commas, signs or decimals
O. Dual-Interest Auto	Numeric	No commas, signs or decimals
P. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
Q. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
R. Single-Interest Home Flood	Numeric	No commas, signs or decimals
S. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
T. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
U. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 42

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	42
Number of claims closed without payment within 61-90 days.		
N. Single-Interest Auto	Numeric	No commas, signs or decimals
O. Dual-Interest Auto	Numeric	No commas, signs or decimals
P. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
Q. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
R. Single-Interest Home Flood	Numeric	No commas, signs or decimals
S. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
T. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
U. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 43

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	43
Number of claims closed without payment within 91-180 days.		
N. Single-Interest Auto	Numeric	No commas, signs or decimals
O. Dual-Interest Auto	Numeric	No commas, signs or decimals
P. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
Q. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
R. Single-Interest Home Flood	Numeric	No commas, signs or decimals
S. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
T. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
U. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 44

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	44
Number of claims closed without payment within 181-365 days.		
N. Single-Interest Auto	Numeric	No commas, signs or decimals
O. Dual-Interest Auto	Numeric	No commas, signs or decimals
P. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
Q. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
R. Single-Interest Home Flood	Numeric	No commas, signs or decimals
S. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
T. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
U. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 45

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	45
Number of claims closed without payment beyond 365 days.		
N. Single-Interest Auto	Numeric	No commas, signs or decimals
O. Dual-Interest Auto	Numeric	No commas, signs or decimals
P. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
Q. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
R. Single-Interest Home Flood	Numeric	No commas, signs or decimals
S. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
T. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
U. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 46

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	46
Median days to final payment.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 47

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	47
Number of suits open at beginning of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 48

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	48
Number of suits opened during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 49

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	49
Number of suits closed during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 50

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	50
Number of suits closed during the period with consideration for the borrower.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 51

Field	Type	Contents
A. through D. same as Lender Placed Record 29		
E. Line number	Numeric	51
Number of suits open at end of period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Underwriting Activity

Lender Placed Record 52

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	LPIUNDACT
E. Line number	Numeric	52
Number of master policies in-force at beginning of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 53

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	53
Number of master policies added during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 54

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	54
Number of master policies cancelled for any reason during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 55

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	55
Number of master policies in-force at the end of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 56

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	56
Number of certificates in-force at the beginning of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 57

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	57
Number of certificates written during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 58

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	58
Number of certificates in-force at the end of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 59

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	59
Number of certificates flat-cancelled during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 60

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	60
Number of certificates cancelled for reasons other than flat cancellations during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 61

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	61
Number of flat cancellations on certificates within 45 days of placement.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 62

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	62
Number of flat cancellations on certificates within 45-90 days of placement.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 63

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	63
Number of flat cancellations on certificates after 90 days from placement.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 64

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	64
Number of individual policies in-force at the beginning of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 65

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	65
Number of individual policies written during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 66

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	66
Number of individual policies in-force at the end of the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 67

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	67
Number of individual policies cancelled for reasons other than flat cancellations during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 68

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	68
Number of individual policies flat-cancelled during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 69

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	69
Number of flat cancellations on individual policies within 45 days of placement.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 70

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	70
Number of flat cancellations on individual policies within 45-90 days of placement.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 71

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	71
Number of flat cancellations on individual policies after 90 days from placement.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 72

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	72
Average gross placement rate during period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 73

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	73
Dollar amount of gross written premium during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 74

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	74
Dollar amount of net written premium during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 75

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	75
Net written premium during period for policies/certificates for which no separate charge is made to the borrower.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 76

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	76
Dollar amount of premium earned during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 77

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	77
Dollars of claims paid during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 78

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	78
Dollars of claims incurred during the period.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 79

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	79
Number of complaints received directly from the DOI.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Lender Placed Record 80

Field	Type	Contents
A. through D. same as Lender Placed Record 52		
E. Line number	Numeric	80
Number of complaints received directly from any person or entity other than the DOI.		
F. Single-Interest Auto	Numeric	No commas, signs or decimals
G. Dual-Interest Auto	Numeric	No commas, signs or decimals
H. Single-Interest Home Hazard	Numeric	No commas, signs or decimals
I. Dual-Interest Home Hazard	Numeric	No commas, signs or decimals
J. Single-Interest Home Flood	Numeric	No commas, signs or decimals
K. Dual-Interest Home Flood	Numeric	No commas, signs or decimals
L. Single-Interest Home Wind-Only	Numeric	No commas, signs or decimals
M. Dual-Interest Home Wind-Only	Numeric	No commas, signs or decimals

Disability Income

The Disability Income line of business consists of three types of records:

Interrogatory - 16 records with 7 columns per record

Claims - 50 records with 13 columns per record

Underwriting - 22 records with 13 columns per record

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

Disability Income Interrogatory

Disability Income Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	DIINT
E. Line Number	Numeric	1
Does the company have Individual Voluntary Short-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 2

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	2
Does the company have Individual Voluntary Long-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 3

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	3
Does the company have Individual Employer-Paid Short-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 4

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	4
Does the company have Individual Employer-Paid Long-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 5

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	5
Does the company have Group Voluntary Short-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 6

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	6
Does the company have Group Voluntary Long-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 7

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	7
Does the company have Group Employer-Paid Short-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 8

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	8
Does the company have Group Employer-Paid Long-Term coverage to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 9

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	9
Did the reporting entity have a significant event or business strategy change that would affect the data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 10

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	10
Significant event or business strategy - If yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Disability Income Record 11

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	11
Has all or part of the reporting entity's disability income protection business been sold, closed or moved to another insurer during the reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Disability Income Record 12

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	12
Disability income protection business - If yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Disability Income Record 13

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	13
Number of class action lawsuits?		
F. (no data required)		Leave blank
G. Explanation		Text

Disability Income Record 14

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	14
Additional state specific Underwriting comments (optional):		
F. (no data required)		Leave blank
G. Explanation		Text

Disability Income Record 15

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	15
Additional state specific claims comments (optional):		
F. (no data required)		Leave blank
G. Explanation		Text

Disability Income Record 16

A. through D. same as Disability Income Record 1		
E. Line number	Numeric	16
Additional comments (optional):		
F. (no data required)		Leave blank
G. Explanation		Text

Disability Income Claims

Disability Income Record 17

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	DICLMS
E. Line Number	Numeric	17
Pending benefit determinations, beginning of reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 18

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	18
Active paid claims, beginning of reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 19

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	19
Claims received during reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 20

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	20
New paid claim determinations during reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 21

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	21
Claim denials during reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 22

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	22
Paid claims closed during reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 23

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	23
Pending benefit determinations, end of reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 24

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	24
Active paid claims, end of reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 25

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	25
Number of claims processed with initial claim decision within 1-14 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 26

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	26
Number of claims processed with initial claim decision within 15-30 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 27

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	27
Number of claims processed with initial claim decision within 31-45 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 28

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	28
Number of claims processed with initial claim decision over 45 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 29

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	29
Median Processing Time: The median processing time for claims resulting in payments reported in lines 25 through 28.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 30

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	30
Number of claims processed with initial claim decision within 1-30 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 31

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	31
Number of claims processed with initial claim decision within 31-60 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 32

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	32
Number of claims processed with initial claim decision within 61-90 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 33

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	33
Number of claims processed with initial claim decision over 90 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 34

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	34
Median Processing Time: The median processing time for claims resulting in payments reported in lines 30 through 33.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 35

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	35
Number of claims closed without payment within 1-14 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 36

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	36
Number of claims closed without payment within 15-30 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 37

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	37
Number of claims closed without payment within 31-45 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 38

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	38
Number of claims closed without payment over 45 days.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 39

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	39
Median Processing Time: The median processing time for claims closed without payment reported in lines 35 through 38.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. (no data required)		Leave blank
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. (no data required)		Leave blank
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. (no data required)		Leave blank

Disability Income Record 40

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	40
Number of claims closed without payment within 1-30 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 41

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	41
Number of claims closed without payment within 31-60 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 42

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	42
Number of claims closed without payment within 61-90 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 43

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	43
Number of claims closed without payment over 90 days.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 44

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	44
Median Processing Time: The median processing time for claims closed without payment reported in lines 40 through 43.		
F. (no data required)		Leave blank
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. (no data required)		Leave blank
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. (no data required)		Leave blank
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. (no data required)		Leave blank
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 45

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	45
Claimant not covered under the policy as of date of disability onset.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 46

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	46
Claimant returned to work during elimination period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 47

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	47
Pre-existing condition.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 48

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	48
Claimant not disabled under the policy definition of disabled.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 49

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	49
Lack of documentation.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 50

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	50
Disability arising from diagnosis excluded under the policy.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 51

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	51
Disability due to work-related injury or condition excluded under the policy.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 52

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	52
Disability caused by excluded circumstance other than a work-related injury.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 53

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	53
Misrepresentation.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 54

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	54
All other denials.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 55

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	55
Claimant returned to work - own occupation/job.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 56

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	56
Claimant returned to work - any occupation/job.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 57

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	57
Lack of documentation.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 58

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	58
Non-participation in evaluation.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 59

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	59
Death of claimant.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 60

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	60
Failure to participate in rehabilitation.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 61

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	61
Misrepresentation.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 62

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	62
Claimant had offsetting compensation.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 63

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	63
Maximum benefit reached.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 64

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	64
Not disabled with respect to "own occupation" but has not returned to work.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 65

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	65
Not disabled with respect to "any occupation" but has not returned to work.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 66

A. through D. same as Disability Income Record 17		
E. Line Number	Numeric	66
Other closed after payment.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Underwriting Activity

Disability Income Record 67

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	DIUNDACT
E. Line Number	Numeric	67
Number of policies in force at the beginning of the reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 68

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	68
Number of new policies issued during the reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 69

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	69
Dollar amount of direct written premium.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 70

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	70
Number of policyholder cancellations and non-renewals.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 71

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	71
Number of insurer non-renewals.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 72

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	72
Number of insurer cancellations.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 73

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	73
Number of rescissions within two years from policy issue.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 74

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	74
Number of rescissions after two years from policy issue.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 75

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	75
Number of policies in force at the end of the reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 76

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	76
Number of lives covered under policies in force at the beginning of the reporting period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 77

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	77
Number of lives covered under new policies issued during the reporting period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 78

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	78
Number of lives covered under policyholder cancellations and non-renewals.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 79

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	79
Number of lives covered under insurer non-renewals.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 80

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	80
Number of lives covered under insurer cancellations.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 81

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	81
Number of lives covered under rescinded policies.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 82

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	82
Number of lives covered under policies in force at the end of the reporting period.		
F. (no data required)		Leave blank
G. (no data required)		Leave blank
H. (no data required)		Leave blank
I. (no data required)		Leave blank
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 83

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	83
Number of complaints received directly from any entity other than the DOI.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 84

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	84
Number of lawsuits open as of the beginning of the reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 85

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	85
Number of new lawsuits opened during the reporting period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 86

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	86
Number of lawsuits closed during the reporting period (total).		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 87

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	87
Number of lawsuits closed during the reporting period with consideration for the consumer.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Disability Income Record 88

A. through D. same as Disability Income Record 67		
E. Line Number	Numeric	88
Number of lawsuits open as of the end of the period.		
F. Individual Voluntary Short-Term	Numeric	No commas, signs or decimals
G. Individual Voluntary Long-Term	Numeric	No commas, signs or decimals
H. Individual Employer-Paid Short-Term	Numeric	No commas, signs or decimals
I. Individual Employer-Paid Long-Term	Numeric	No commas, signs or decimals
J. Group Voluntary Short-Term	Numeric	No commas, signs or decimals
K. Group Voluntary Long-Term	Numeric	No commas, signs or decimals
L. Group Employer-Paid Short-Term	Numeric	No commas, signs or decimals
M. Group Employer-Paid Long-Term	Numeric	No commas, signs or decimals

Private Flood

The Private Flood line of business consists of four types of records:

- Interrogatory - 51 records with 7 columns per record
- Claims - 18 records with 11 columns per record
- Underwriting - 12 records with 11 columns per record
- Lawsuits and Complaints - 6 records with 11 columns per record

Note: All CAPS are required for state abbreviations and where indicated in the Contents column acceptable values.

Private Flood Interrogatory

Private Flood Record 1

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	PFINT
E. Line Number	Numeric	1
Does the reporting company write private flood policies or endorsements?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 2

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	2
Were private flood policies or endorsements in force during the reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 3

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	3
In which annual statement lines of business on the state page of the statutory annual statement does the company report private flood experience?		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 4

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	4
Were there private flood policies or endorsements in force during the reporting period that provided Personal Property coverage?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 5

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	5
Were there private flood policies or endorsements in force during the reporting period that provided Loss of Use coverage?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 6

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	6
Was the company still actively writing private flood coverage in the state at year end?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 7

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	7
How does company treat subsequent supplemental payments on previously closed claims (or additional payments on a previously reported claim)? Re-open original claim/open new claim. If re-open original claim, report 1. If open new claim, report 2. If other, report 3.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 8

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	8
Does the reporting company have stand-alone (first dollar coverage) to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 9

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	9
If Yes, has the company had a significant event/business strategy that would affect stand-alone (first dollar coverage) data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 10

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	10
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 11

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	11
If Yes, has the stand-alone (first dollar coverage) block of business or part of this block of business been sold, closed or moved to another company during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 12

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	12
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 13

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	13
If Yes, does the number of stand-alone (first dollar coverage) policies in force at the beginning of the reporting period in this report match the number of policies or endorsements in force at the end of the reporting period for the first prior year report?		
F. Response		Leave blank
G. (no data required)		Leave blank

Private Flood Record 14

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	14
If No, explain the difference.		
F. (no data required)		Leave blank
G. Explanation		Leave blank

Private Flood Record 15

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	15
Does the reporting company have stand-alone (excess coverage) to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 16

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	16
If Yes, has the company had a significant event/business strategy that would affect stand-alone (excess coverage) data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 17

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	17
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 18

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	18
If Yes, has the stand-alone (excess coverage) block of business or part of this block of business been sold, closed or moved to another company during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 19

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	19
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 20

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	20
If Yes, does the number of stand-alone (excess coverage) policies in force at the beginning of the reporting period in this report match the number of policies or endorsements in force at the end of the reporting period for the first prior year report?		
F. Response		Leave blank
G. (no data required)		Leave blank

Private Flood Record 21

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	21
If No, explain the difference.		
F. (no data required)		Leave blank
G. Explanation		Leave blank

Private Flood Record 22

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	22
Does the reporting company have endorsements to a homeowners policy (first dollar coverage) to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 23

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	23
If Yes, has the company had a significant event/business strategy that would affect endorsements to a homeowners policy (first dollar coverage) data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 24

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	24
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 25

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	25
If Yes, has the endorsements to a homeowners policy (first dollar coverage) block of business or part of this block of business been sold, closed or moved to another company during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 26

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	26
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 27

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	27
If Yes, does the number of endorsements to a homeowners policy (first dollar coverage) in force at the beginning of the reporting period in this report match the number of endorsements in force at the end of the reporting period for the first prior year report?		
F. Response		Leave blank
G. (no data required)		Leave blank

Private Flood Record 28

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	28
If No, explain the difference.		
F. (no data required)		Leave blank
G. Explanation		Leave blank

Private Flood Record 29

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	29
Does the reporting company have endorsements to a homeowners policy (excess coverage) to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 30

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	30
If Yes, has the company had a significant event/business strategy that would affect endorsements to a homeowners policy (excess coverage) data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 31

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	31
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 32

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	32
If Yes, has the endorsements to a homeowners policy (excess coverage) block of business or part of this block of business been sold, closed or moved to another company during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 33

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	33
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 34

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	34
If Yes, does the number of endorsements to a homeowners policy (excess coverage) in force at the beginning of the reporting period in this report match the number of endorsements in force at the end of the reporting period for the first prior year report?		
F. Response		Leave blank
G. (no data required)		Leave blank

Private Flood Record 35

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	35
If No, explain the difference.		
F. (no data required)		Leave blank
G. Explanation		Leave blank

Private Flood Record 36

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	36
Does the reporting company have endorsements to a policy other than homeowners (first dollar coverage) to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 37

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	37
If Yes, has the company had a significant event/business strategy that would affect endorsements to a policy other than homeowners (first dollar coverage) data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 38

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	38
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 39

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	39
If Yes, has the endorsements to a policy other than homeowners (first dollar coverage) block of business or part of this block of business been sold, closed or moved to another company during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 40

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	40
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 41

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	41
If Yes, does the number of endorsements to a policy other than homeowners (first dollar coverage) in force at the beginning of the reporting period in this report match the number of endorsements in force at the end of the reporting period for the first prior year report?		
F. Response		Leave blank
G. (no data required)		Leave blank

Private Flood Record 42

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	42
If No, explain the difference.		
F. (no data required)		Leave blank
G. Explanation		Leave blank

Private Flood Record 43

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	43
Does the reporting company have endorsements to a policy other than homeowners (excess coverage) to report?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 44

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	44
If Yes, has the company had a significant event/business strategy that would affect endorsements to a policy other than homeowners (excess coverage) data for this reporting period?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 45

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	45
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 46

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	46
If Yes, has the endorsements to a policy other than homeowners (excess coverage) block of business or part of this block of business been sold, closed or moved to another company during the year?		
F. Response	Text	Y or N
G. (no data required)		Leave blank

Private Flood Record 47

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	47
If Yes, explain.		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 48

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	48
If Yes, does the number of endorsements to a policy other than homeowners (excess coverage) in force at the beginning of the reporting period in this report match the number of endorsements in force at the end of the reporting period for the first prior year report?		
F. Response		Leave blank
G. (no data required)		Leave blank

Private Flood Record 49

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	49
If No, explain the difference.		
F. (no data required)		Leave blank
G. Explanation		Leave blank

Private Flood Record 50

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	50
Additional state specific claims comments (optional):		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Record 51

A. through D. same as Private Flood Record 1		
E. Line number	Numeric	51
Additional state specific underwriting comments (optional):		
F. (no data required)		Leave blank
G. Explanation		Text

Private Flood Claims

Private Flood Record 52

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	PRIVATEFLOOD
E. Line Number	Numeric	52
Number of claims open at the beginning of the period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 53

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	53
Number of claims opened during the period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 54

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	54
Number of claims closed during the period, with payment.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 55

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	55
Number of claims closed during the period, without payment.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 56

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	56
Number of claims open at the end of the period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 57

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	57
Median days to final payment.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 58

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	58
Number of claims closed with payment within 0-30 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 59

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	59
Number of claims closed with payment within 31-60 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 60

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	60
Number of claims closed with payment within 61-90 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 61

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	61
Number of claims closed with payment within 91-180 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 62

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	62
Number of claims closed with payment within 181-365 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 63

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	63
Number of claims closed with payment beyond 365 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 64

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	64
Number of claims closed without payment within 0-30 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 65

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	65
Number of claims closed without payment within 31-60 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 66

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	66
Number of claims closed without payment within 61-90 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 67

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	67
Number of claims closed without payment within 91-180 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 68

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	68
Number of claims closed without payment within 181-365 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 69

Field	Type	Contents
A. through D. same as Private Flood Record 52		
E. Line Number	Numeric	69
Number of claims closed without payment beyond 365 days.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Underwriting

Private Flood Record 70

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	PRIVATEFLOOD
E. Line Number	Numeric	70
Number of private flood policies or endorsements in force at end of reporting period in the first prior year report.		
F. Stand-alone policies (first dollar coverage)		Leave blank
G. Stand-alone policies (excess coverage)		Leave blank
H. Endorsement to a Homeowners Policy (first dollar coverage)		Leave blank
I. Endorsement to a Homeowners Policy (excess coverage)		Leave blank
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)		Leave blank
K. Endorsement to a Policy Other than Homeowners (excess coverage)		Leave blank

Private Flood Record 71

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	71
Number of private flood policies or endorsements in force at the beginning of the reporting period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 72

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	72
Number of private flood policies or endorsements written during the reporting period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 73

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	73
Number of private flood policies or endorsements in force at the end of the reporting period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 74

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	74
The number of private flood policies or endorsements in force at the beginning of the reporting period in this report minus the number of policies or endorsements in force at the end of the reporting period for the first prior year report.		
F. Stand-alone policies (first dollar coverage)		Leave blank
G. Stand-alone policies (excess coverage)		Leave blank
H. Endorsement to a Homeowners Policy (first dollar coverage)		Leave blank
I. Endorsement to a Homeowners Policy (excess coverage)		Leave blank
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)		Leave blank
K. Endorsement to a Policy Other than Homeowners (excess coverage)		Leave blank

Private Flood Record 75

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	75
Dollar amount of direct premium written during the reporting period for private flood policies or endorsements.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 76

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	76
Number of company-initiated non-renewals during the period for private flood policies.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 77

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	77
Number of cancellations for non-pay or non-sufficient funds for private flood policies or endorsements.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 78

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	78
Number of cancellations at the insured's request for private flood policies or endorsements.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 79

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	79
Number of company-initiated cancellations that occur in the first 59 days after effective date, excluding rewrites to an affiliated company for private flood policies or endorsements.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 80

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	80
Number of company-initiated cancellations that occur 60 to 90 days after effective date, excluding rewrites to an affiliated company for private flood policies or endorsements.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 81

Field	Type	Contents
A. through D. same as Private Flood Record 70		
E. Line Number	Numeric	81
Number of company-initiated cancellations that occur greater than 90 days after effective date, excluding rewrites to an affiliated company for flood policies or endorsements.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Lawsuits and Complaints

Private Flood Record 82

Field	Type	Contents
A. Data year	Numeric	2020
B. NAIC company code	Numeric	NAIC CoCode
C. State	Text	Participating State Abbreviation
D. Form	Text	PRIVATEFLOOD
E. Line Number	Numeric	82
Number of lawsuits open at beginning of the period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 83

Field	Type	Contents
A. through D. same as Private Flood Record 82		
E. Line Number	Numeric	83
Number of lawsuits opened during the period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 84

Field	Type	Contents
A. through D. same as Private Flood Record 82		
E. Line Number	Numeric	84
Number of lawsuits closed during the period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 85

Field	Type	Contents
A. through D. same as Private Flood Record 82		
E. Line Number	Numeric	85
Number of lawsuits closed during the period with consideration for the consumer.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 86

Field	Type	Contents
A. through D. same as Private Flood Record 82		
E. Line Number	Numeric	86
Number of lawsuits open at end of period.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Private Flood Record 87

Field	Type	Contents
A. through D. same as Private Flood Record 82		
E. Line Number	Numeric	87
Number of complaints received directly from any person or entity other than the DOI.		
F. Stand-alone policies (first dollar coverage)	Numeric	No commas, signs or decimals
G. Stand-alone policies (excess coverage)	Numeric	No commas, signs or decimals
H. Endorsement to a Homeowners Policy (first dollar coverage)	Numeric	No commas, signs or decimals
I. Endorsement to a Homeowners Policy (excess coverage)	Numeric	No commas, signs or decimals
J. Endorsement to a Policy Other than Homeowners (first dollar coverage)	Numeric	No commas, signs or decimals
K. Endorsement to a Policy Other than Homeowners (excess coverage)	Numeric	No commas, signs or decimals

Sample CSV Records

Note: As mentioned in the Data File Specifications section at the beginning of this manual, it is acceptable to exclude individual records from a record type group when the individual record contains no data. (**CAUTION** – a zero or a space is considered data but a null is not.) A common instance of this is found among the Interrogatory records where one record requires a Y or N answer and the following record instructs, “If Yes, explain.” When the first record is answered N there is nothing to explain in the second record. In this case the second record may be submitted with all the data fields in column F and beyond as null (blank) or the record may be omitted entirely.

In the sample records displayed below, all records in every record type group are included. However, those records eligible for omission, as described above, are highlighted *for display purposes only*. If a company chooses to include null records it is NOT necessary to highlight those records in the upload file.

Disclaimer: All data used in the sample records is fictitious. The appearance of text wrapping in any of these records is a result of sizing the data to fit on the pages of this manual. Each record type group contains two states in order to provide more examples.

The following sample records were created using Microsoft Excel® 2010 and saved using the .csv file format option. When the different record types have different numbers of columns within a single line of business, it is necessary to create a separate spreadsheet for each record type (i.e., one for Interrogatory, another for Claims, etc.) Once created, upload records may be submitted as separate files or concatenated into a single file for upload all at one time.

Life

In this Life sample there is data provided for 1 state: MN. MN has Individual Life Cash and Individual Life Non-Cash Value data to report.

Life Interrogatory Records (7 columns)

2020,71835,MN,LIFEINT,1,Y,
2020,71835,MN,LIFEINT,2,Y,
2020,71835,MN,LIFEINT,3,Y,
2020,71835,MN,LIFEINT,4,,
2020,71835,MN,LIFEINT,5,Y,
2020,71835,MN,LIFEINT,6,,
2020,71835,MN,LIFEINT,7,,No comments
2020,71835,MN,LIFEINT,8,,No comments

Life Data Records (7 columns)

2020,71835,MN,LIFE,9,5,5
2020,71835,MN,LIFE,10,75,75

2020,71835,MN,LIFE,11,24,24
2020,71835,MN,LIFE,12,55,
2020,71835,MN,LIFE,13,40,
2020,71835,MN,LIFE,14,5,
2020,71835,MN,LIFE,15,6,
2020,71835,MN,LIFE,16,10,
2020,71835,MN,LIFE,17,22,
2020,71835,MN,LIFE,18,45,
2020,71835,MN,LIFE,19,65,
2020,71835,MN,LIFE,20,110,110
2020,71835,MN,LIFE,21,115,115
2020,71835,MN,LIFE,22,35,35
2020,71835,MN,LIFE,23,111,111
2020,71835,MN,LIFE,24,85000,85000
2020,71835,MN,LIFE,25,650000,650000
2020,71835,MN,LIFE,26,650000,650000
2020,71835,MN,LIFE,27,20,21
2020,71835,MN,LIFE,28,10,10
2020,71835,MN,LIFE,29,9,9
2020,71835,MN,LIFE,30,9,9
2020,71835,MN,LIFE,31,5,5
2020,71835,MN,LIFE,32,5,5
2020,71835,MN,LIFE,33,10,10
2020,71835,MN,LIFE,34,5,5
2020,71835,MN,LIFE,35,2,2
2020,71835,MN,LIFE,36,1,1
2020,71835,MN,LIFE,37,1,1

Annuity

In this Annuity sample there is data provided for 2 states: IN and MI. IN has Individual Fixed Annuity and Individual Variable Annuity data to report while MI has Individual Fixed Annuity data only.

Annuity Interrogatory Records (7 columns)

2017,12345,IN,ANNUITIESINT,1,Y,
2017,12345,IN,ANNUITIESINT,2,Y,
2017,12345,IN,ANNUITIESINT,3,N,
2017,12345,IN,ANNUITIESINT,4,,
2017,12345,IN,ANNUITIESINT,5,N,
2017,12345,IN,ANNUITIESINT,6,,
2017,12345,IN,ANNUITIESINT,7,,The percentage of fixed annuity replacements appears high due to the small number of contracts sold in 2011.
2017,12345,IN,ANNUITIESINT,8,,
2017,12345,MI,ANNUITIESINT,1,Y,
2017,12345,MI,ANNUITIESINT,2,N,
2017,12345,MI,ANNUITIESINT,3,N,
2017,12345,MI,ANNUITIESINT,4,,
2017,12345,MI,ANNUITIESINT,5,N,
2017,12345,MI,ANNUITIESINT,6,,
2017,12345,MI,ANNUITIESINT,7,,
2017,12345,MI,ANNUITIESINT,8,,

Annuity Data Records (7 columns)

2017,12345,IN,ANNUITIES,9,8,4
2017,12345,IN,ANNUITIES,10,8,2
2017,12345,IN,ANNUITIES,11,0,2
2017,12345,IN,ANNUITIES,12,6,3
2017,12345,IN,ANNUITIES,13,2,1
2017,12345,IN,ANNUITIES,14,0,0
2017,12345,IN,ANNUITIES,15,12,4
2017,12345,IN,ANNUITIES,16,20,10
2017,12345,IN,ANNUITIES,17,1,5
2017,12345,IN,ANNUITIES,18,0,2
2017,12345,IN,ANNUITIES,19,21,17
2017,12345,IN,ANNUITIES,20,4,3
2017,12345,IN,ANNUITIES,21,4,3
2017,12345,IN,ANNUITIES,22,1,2
2017,12345,IN,ANNUITIES,23,9,9
2017,12345,IN,ANNUITIES,24,82,14
2017,12345,IN,ANNUITIES,25,3,0
2017,12345,IN,ANNUITIES,26,154,199
2017,12345,IN,ANNUITIES,27,1121462,1078185
2017,12345,IN,ANNUITIES,28,0,0
2017,12345,MI,ANNUITIES,9,91,
2017,12345,MI,ANNUITIES,10,35,
2017,12345,MI,ANNUITIES,11,56,
2017,12345,MI,ANNUITIES,12,79,
2017,12345,MI,ANNUITIES,13,10,
2017,12345,MI,ANNUITIES,14,2,
2017,12345,MI,ANNUITIES,15,31,
2017,12345,MI,ANNUITIES,16,8,
2017,12345,MI,ANNUITIES,17,3,

2017,12345,MI,ANNUITIES,18,2,
2017,12345,MI,ANNUITIES,19,44,
2017,12345,MI,ANNUITIES,20,3,
2017,12345,MI,ANNUITIES,21,28,
2017,12345,MI,ANNUITIES,22,421,
2017,12345,MI,ANNUITIES,23,912,
2017,12345,MI,ANNUITIES,24,204,
2017,12345,MI,ANNUITIES,25,1,
2017,12345,MI,ANNUITIES,26,9349,
2017,12345,MI,ANNUITIES,27,72859284,
2017,12345,MI,ANNUITIES,28,0,

Private Passenger Auto

In this Private Passenger Auto sample, data is provided for 2 MI and MO. MI is reporting only coverage types BI, PD, UMBI, and PIP while MO is reporting all coverage types except UMPD and CSL.

PPA Interrogatory Records (7 columns)

2017,54321,MI,PPAINT,1,N,
2017,54321,MI,PPAINT,2,N,
2017,54321,MI,PPAINT,3,Y,
2017,54321,MI,PPAINT,4,Y,
2017,54321,MI,PPAINT,5,Y,
2017,54321,MI,PPAINT,6,N,
2017,54321,MI,PPAINT,7,N,
2017,54321,MI,PPAINT,8,N,
2017,54321,MI,PPAINT,9,Y,
2017,54321,MI,PPAINT,10,Y,
2017,54321,MI,PPAINT,11,N,
2017,54321,MI,PPAINT,12,,
2017,54321,MI,PPAINT,13,,
2017,54321,MI,PPAINT,14,N,
2017,54321,MI,PPAINT,15,,
2017,54321,MI,PPAINT,16,N,
2017,54321,MI,PPAINT,17,,
2017,54321,MI,PPAINT,18,,Reopen original claim file.
2017,54321,MI,PPAINT,19,,Warnings reviewed and all data is correct as submitted.
2017,54321,MI,PPAINT,20,,Warnings reviewed and all data is correct as submitted.
2017,54321,MO,PPAINT,1,Y,
2017,54321,MO,PPAINT,2,Y,
2017,54321,MO,PPAINT,3,Y,
2017,54321,MO,PPAINT,4,Y,
2017,54321,MO,PPAINT,5,Y,
2017,54321,MO,PPAINT,6,N,
2017,54321,MO,PPAINT,7,Y,
2017,54321,MO,PPAINT,8,N,
2017,54321,MO,PPAINT,9,Y,
2017,54321,MO,PPAINT,10,Y,
2017,54321,MI,PPAINT,11,N,
2017,54321,MI,PPAINT,12,,
2017,54321,MO,PPAINT,13,,
2017,54321,MO,PPAINT,14,N,
2017,54321,MO,PPAINT,15,,
2017,54321,MO,PPAINT,16,N,
2017,54321,MO,PPAINT,17,,
2017,54321,MO,PPAINT,18,,Attached to original claim and new portion adjudicated.
2017,54321,MO,PPAINT,19,,Data verified.
2017,54321,MO,PPAINT,20,,Data verified.

PPA Claims Records (14 columns)

2017,54321,MI,PPACLMS,21,,,5,0,6,,,,44
2017,54321,MI,PPACLMS,22,,,3,20,0,,,,7
2017,54321,MI,PPACLMS,23,,,3,7,2,,,,15
2017,54321,MI,PPACLMS,24,,,1,2,2,,,,4
2017,54321,MI,PPACLMS,25,,,4,11,2,,,,32
2017,54321,MI,PPACLMS,26,,,1350,45,870,,,,952

2017,54321,MI,PPACLMS,27,,,0,2,0,,,,,0
 2017,54321,MI,PPACLMS,28,,,0,3,0,,,,,1
 2017,54321,MI,PPACLMS,29,,,0,2,0,,,,,0
 2017,54321,MI,PPACLMS,30,,,0,0,0,,,,,0
 2017,54321,MI,PPACLMS,31,,,0,0,0,,,,,0
 2017,54321,MI,PPACLMS,32,,,3,0,2,,,,,14
 2017,54321,MI,PPACLMS,33,,,0,1,0,,,,,1
 2017,54321,MI,PPACLMS,34,,,0,1,0,,,,,0
 2017,54321,MI,PPACLMS,35,,,0,0,0,,,,,1
 2017,54321,MI,PPACLMS,36,,,0,0,0,,,,,1
 2017,54321,MI,PPACLMS,37,,,0,0,0,,,,,0
 2017,54321,MI,PPACLMS,38,,,1,0,2,,,,,1
 2017,54321,MI,PPACLMS,39,,,10,0,5,,,,,11
 2017,54321,MI,PPACLMS,40,,,5,0,2,,,,,8
 2017,54321,MI,PPACLMS,41,,,10,0,4,,,,,13
 2017,54321,MI,PPACLMS,42,,,5,0,3,,,,,6
 2017,54321,MO,PPACLMS,21,6908,3839,6460,7082,950,,2231,,57
 2017,54321,MO,PPACLMS,22,28666,43226,6457,42610,1075,,4370,,174
 2017,54321,MO,PPACLMS,23,26027,44016,5787,30389,830,,3539,,90
 2017,54321,MO,PPACLMS,24,7783,2564,1901,15255,421,,1657,,84
 2017,54321,MO,PPACLMS,25,1764,485,5229,4048,774,,1405,,57
 2017,54321,MO,PPACLMS,26,14,2,192,14,205,,103,,100
 2017,54321,MO,PPACLMS,27,17887,38921,742,22605,101,,618,,9
 2017,54321,MO,PPACLMS,28,2415,1377,386,3846,48,,572,,13
 2017,54321,MO,PPACLMS,29,521,340,334,951,51,,440,,17
 2017,54321,MO,PPACLMS,30,2868,1821,1329,1768,189,,974,,28
 2017,54321,MO,PPACLMS,31,1994,1168,1495,1046,185,,608,,20
 2017,54321,MO,PPACLMS,32,342,389,1501,173,256,,327,,3
 2017,54321,MO,PPACLMS,33,5186,1605,461,8044,98,,567,,35
 2017,54321,MO,PPACLMS,34,1264,367,205,2717,73,,237,,11
 2017,54321,MO,PPACLMS,35,495,112,138,1237,34,,166,,8
 2017,54321,MO,PPACLMS,36,513,383,373,1713,70,,347,,17
 2017,54321,MO,PPACLMS,37,225,80,361,970,63,,205,,12
 2017,54321,MO,PPACLMS,38,100,17,363,574,83,,135,,1
 2017,54321,MO,PPACLMS,39,8,2,105,42,977,,5,,0
 2017,54321,MO,PPACLMS,40,9,2,578,51,99,,5,,1
 2017,54321,MO,PPACLMS,41,5,0,63,33,531,,1,,0
 2017,54321,MO,PPACLMS,42,12,4,620,60,545,,9,,1

PPA Underwriting Records (6 columns)

2017,54321,MI,PPAUNDACT,43,261
 2017,54321,MI,PPAUNDACT,44,254
 2017,54321,MI,PPAUNDACT,45,196
 2017,54321,MI,PPAUNDACT,46,839288
 2017,54321,MI,PPAUNDACT,47,0
 2017,54321,MI,PPAUNDACT,48,0
 2017,54321,MI,PPAUNDACT,49,0
 2017,54321,MI,PPAUNDACT,50,0
 2017,54321,MI,PPAUNDACT,51,0
 2017,54321,MI,PPAUNDACT,52,0
 2017,54321,MI,PPAUNDACT,53,23
 2017,54321,MO,PPAUNDACT,43,579910
 2017,54321,MO,PPAUNDACT,44,579910
 2017,54321,MO,PPAUNDACT,45,69633
 2017,54321,MO,PPAUNDACT,46,383269505
 2017,54321,MO,PPAUNDACT,47,2013

2017,54321,MO,PPAUNDACT,48,37983
2017,54321,MO,PPAUNDACT,49,76845
2017,54321,MO,PPAUNDACT,50,216
2017,54321,MO,PPAUNDACT,51,14
2017,54321,MO,PPAUNDACT,52,22
2017,54321,MO,PPAUNDACT,53,84

Homeowners

In this Homeowners sample, data is provided for CO and NE. Both states are reporting all five coverage types.

Homeowners Interrogatory Records (7 columns)

2017,54321,CO,HOINT,1,Y,
2017,54321,CO,HOINT,2,Y,
2017,54321,CO,HOINT,3,Y,
2017,54321,CO,HOINT,4,Y,
2017,54321,CO,HOINT,5,Y,
2017,54321,CO,HOINT,6,Y,
2017,54321,CO,HOINT,7,N,
2017,54321,CO,HOINT,8,,
2017,54321,CO,HOINT,9,,
2017,54321,CO,HOINT,10,Y,
2017,54321,CO,HOINT,11,,Newly licensed in CO.
2017,54321,CO,HOINT,12,N,
2017,54321,CO,HOINT,13,,
2017,54321,CO,HOINT,14,,Subsequent monetary activity is appended to the original claim for handling regardless of the open or closed status of the original claim.
2017,54321,CO,HOINT,15,,This is a refile. An error was uncovered in our initial submission.
2017,54321,CO,HOINT,16,,
2017,54321,NE,HOINT,1,Y,
2017,54321,NE,HOINT,2,Y,
2017,54321,NE,HOINT,3,Y,
2017,54321,NE,HOINT,4,Y,
2017,54321,NE,HOINT,5,Y,
2017,54321,NE,HOINT,6,Y,
2017,54321,NE,HOINT,7,N,
2017,54321,NE,HOINT,8,,
2017,54321,NE,HOINT,9,,
2017,54321,NE,HOINT,10,N,
2017,54321,NE,HOINT,11,,
2017,54321,NE,HOINT,12,N,
2017,54321,NE,HOINT,13,,
2017,54321,NE,HOINT,14,,Claim is reopened for processing.
2017,54321,NE,HOINT,15,,Claims are light due to this being first year.
2017,54321,NE,HOINT,16,, "Our sales volume is not high, but the underwriting looks solid"

Homeowners Claims Records (10 columns)

2017,54321,CO,HOCLMS,17,1955,594,283,182,978
2017,54321,CO,HOCLMS,18,22650,5489,382,305,11325
2017,54321,CO,HOCLMS,19,15551,4518,336,278,7777
2017,54321,CO,HOCLMS,20,8300,1165,81,66,4152
2017,54321,CO,HOCLMS,21,754,400,248,143,374
2017,54321,CO,HOCLMS,22,12,8,45,93,45
2017,54321,CO,HOCLMS,23,11996,3268,100,71,2998
2017,54321,CO,HOCLMS,24,1112,429,110,34,3556
2017,54321,CO,HOCLMS,25,595,217,14,33,298
2017,54321,CO,HOCLMS,26,942,262,20,56,471
2017,54321,CO,HOCLMS,27,675,252,31,45,338
2017,54321,CO,HOCLMS,28,231,90,61,39,116
2017,54321,CO,HOCLMS,29,7448,860,26,4,3724
2017,54321,CO,HOCLMS,30,341,143,10,22,171

2017,54321,CO,HOCLMS,31,127,52,7,7,64
2017,54321,CO,HOCLMS,32,216,52,7,8,108
2017,54321,CO,HOCLMS,33,123,42,9,11,62
2017,54321,CO,HOCLMS,34,45,16,22,14,23
2017,54321,CO,HOCLMS,35,10,22,99,2,5
2017,54321,CO,HOCLMS,36,16,22,52,0,8
2017,54321,CO,HOCLMS,37,7,15,43,1,4
2017,54321,CO,HOCLMS,38,19,29,108,1,9
2017,54321,NE,HOCLMS,17,328,80,60,19,38
2017,54321,NE,HOCLMS,18,1038,80,20,54,108
2017,54321,NE,HOCLMS,19,921,60,61,32,65
2017,54321,NE,HOCLMS,20,432,60,10,31,64
2017,54321,NE,HOCLMS,21,13,40,9,10,17
2017,54321,NE,HOCLMS,22,78,175,175,91,75
2017,54321,NE,HOCLMS,23,202,10,10,4,8
2017,54321,NE,HOCLMS,24,185,10,10,6,12
2017,54321,NE,HOCLMS,25,138,10,5,4,15
2017,54321,NE,HOCLMS,26,176,10,16,6,12
2017,54321,NE,HOCLMS,27,102,10,10,5,10
2017,54321,NE,HOCLMS,28,118,10,10,7,8
2017,54321,NE,HOCLMS,29,95,10,1,7,14
2017,54321,NE,HOCLMS,30,86,10,1,6,12
2017,54321,NE,HOCLMS,31,65,10,1,5,10
2017,54321,NE,HOCLMS,32,82,10,1,6,12
2017,54321,NE,HOCLMS,33,48,10,1,4,8
2017,54321,NE,HOCLMS,34,56,10,5,3,8
2017,54321,NE,HOCLMS,35,11,19,4,0,0
2017,54321,NE,HOCLMS,36,8,13,5,2,4
2017,54321,NE,HOCLMS,37,3,17,8,1,2
2017,54321,NE,HOCLMS,38,16,15,1,1,2

Homeowners Underwriting Records (6 columns)

2017,54321,CO,HOUNDACT,39,242310
2017,54321,CO,HOUNDACT,40,242310
2017,54321,CO,HOUNDACT,41,20690
2017,54321,CO,HOUNDACT,42,205156289
2017,54321,CO,HOUNDACT,43,744
2017,54321,CO,HOUNDACT,44,8929
2017,54321,CO,HOUNDACT,45,20000
2017,54321,CO,HOUNDACT,46,106
2017,54321,CO,HOUNDACT,47,47
2017,54321,CO,HOUNDACT,48,188
2017,54321,CO,HOUNDACT,49,34
2017,54321,NE,HOUNDACT,39,28980
2017,54321,NE,HOUNDACT,40,28980
2017,54321,NE,HOUNDACT,41,8806
2017,54321,NE,HOUNDACT,42,20804069
2017,54321,NE,HOUNDACT,43,1583
2017,54321,NE,HOUNDACT,44,22
2017,54321,NE,HOUNDACT,45,44
2017,54321,NE,HOUNDACT,46,300
2017,54321,NE,HOUNDACT,47,221
2017,54321,NE,HOUNDACT,48,25
2017,54321,NE,HOUNDACT,49,8

Long-Term Care

In this LTC sample there is data provided for 2 states: WA and NV. WA has Stand-Alone LTC, Life LTC Hybrid, and Annuity LTC Hybrid data to report while NV has Life LTC Hybrid data only.

LTC Interrogatory Records (7 columns)

2017,12345,WA,LTCINT,1,Y,
2017,12345,WA,LTCINT,2,Y,
2017,12345,WA,LTCINT,3,Y,
2017,12345,WA,LTCINT,4,N,
2017,12345,WA,LTCINT,5,,
2017,12345,WA,LTCINT,6,N,
2017,12345,WA,LTCINT,7,,
2017,12345,WA,LTCINT,8,N,
2017,12345,WA,LTCINT,9,,
2017,12345,WA,LTCINT,10,Y,
2017,12345,WA,LTCINT,11,,Stand-Alone LTC written before 1995 was closed
2017,12345,WA,LTCINT,12,Y,
2017,12345,WA,LTCINT,13,,Life LTC Hybrid assumed from ABC Life Ins.
2017,12345,WA,LTCINT,14,Y,
2017,12345,WA,LTCINT,15,,Annuity LTC Hybrid written before 1995 moved to DEF Ins.
2017,12345,WA,LTCINT,16,,First year reporting
2017,12345,WA,LTCINT,17,,
2017,12345,WA,LTCINT,18,,
2017,12345,NV,LTCINT,1,N,
2017,12345,NV,LTCINT,2,Y,
2017,12345,NV,LTCINT,3,N,
2017,12345,NV,LTCINT,4,N,
2017,12345,NV,LTCINT,5,,
2017,12345,NV,LTCINT,6,N,
2017,12345,NV,LTCINT,7,,
2017,12345,NV,LTCINT,8,N,
2017,12345,NV,LTCINT,9,,
2017,12345,NV,LTCINT,10,N,
2017,12345,NV,LTCINT,11,,
2017,12345,NV,LTCINT,12,Y,
2017,12345,NV,LTCINT,13,,Life LTC Hybrid assumed from ABC Life Ins.
2017,12345,NV,LTCINT,14,N,
2017,12345,NV,LTCINT,15,,
2017,12345,NV,LTCINT,16,,
2017,12345,NV,LTCINT,17,,First year reporting
2017,12345,NV,LTCINT,18,,

LTC General Information Records (8 Columns)

2017,12345,WA,LTCGENINFO,19,251,551,45
2017,12345,WA,LTCGENINFO,20,5,56,4
2017,12345,WA,LTCGENINFO,21,1,2,0
2017,12345,WA,LTCGENINFO,22,1,2,0
2017,12345,WA,LTCGENINFO,23,0,0,0
2017,12345,WA,LTCGENINFO,24,254,603,49
2017,12345,WA,LTCGENINFO,25,2,2,0
2017,12345,WA,LTCGENINFO,26,3,1,1
2017,12345,WA,LTCGENINFO,27,,3,0

2017,12345,WA,LTCGENINFO,28,,0,1
2017,12345,WA,LTCGENINFO,29,,0,0
2017,12345,WA,LTCGENINFO,30,1,4,0
2017,12345,NV,LTCGENINFO,19,,750,
2017,12345,NV,LTCGENINFO,20,,42,
2017,12345,NV,LTCGENINFO,21,,2,
2017,12345,NV,LTCGENINFO,22,,2,
2017,12345,NV,LTCGENINFO,23,,2,
2017,12345,NV,LTCGENINFO,24,,786,
2017,12345,NV,LTCGENINFO,25,,9,
2017,12345,NV,LTCGENINFO,26,,8,
2017,12345,NV,LTCGENINFO,27,,14,
2017,12345,NV,LTCGENINFO,28,,2,
2017,12345,NV,LTCGENINFO,29,,1,
2017,12345,NV,LTCGENINFO,30,,6,

LTC Claimant Records (8 Columns)

2017,12345,WA,LTCCLMNT,31,15,110,4
2017,12345,WA,LTCCLMNT,32,30,10,4
2017,12345,WA,LTCCLMNT,33,11,30,10
2017,12345,WA,LTCCLMNT,34,21,2,1
2017,12345,WA,LTCCLMNT,35,27,117,6
2017,12345,WA,LTCCLMNT,36,6,25,1
2017,12345,WA,LTCCLMNT,37,1,0,2
2017,12345,WA,LTCCLMNT,38,7,6,2
2017,12345,WA,LTCCLMNT,39,0,1,1
2017,12345,WA,LTCCLMNT,40,5,2,7
2017,12345,WA,LTCCLMNT,41,0,2,0
2017,12345,WA,LTCCLMNT,42,1,2,1
2017,12345,WA,LTCCLMNT,43,14,17,20
2017,12345,WA,LTCCLMNT,44,11,32,9
2017,12345,WA,LTCCLMNT,45,10,29,2
2017,12345,WA,LTCCLMNT,46,5,2,1
2017,12345,NV,LTCCLMNT,31,,251,
2017,12345,NV,LTCCLMNT,32,,12,
2017,12345,NV,LTCCLMNT,33,,152,
2017,12345,NV,LTCCLMNT,34,,131,
2017,12345,NV,LTCCLMNT,35,,381,
2017,12345,NV,LTCCLMNT,36,,4,
2017,12345,NV,LTCCLMNT,37,,9,
2017,12345,NV,LTCCLMNT,38,,8,
2017,12345,NV,LTCCLMNT,39,,1,
2017,12345,NV,LTCCLMNT,40,,5,
2017,12345,NV,LTCCLMNT,41,,2,
2017,12345,NV,LTCCLMNT,42,,4,
2017,12345,NV,LTCCLMNT,43,,201,
2017,12345,NV,LTCCLMNT,44,,42,
2017,12345,NV,LTCCLMNT,45,,9,
2017,12345,NV,LTCCLMNT,46,,1,

LTC Benefits Records (8 Columns)

2017,12345,WA,LTCBENEPAY,47,24,98,5
2017,12345,WA,LTCBENEPAY,48,251,1210,74
2017,12345,WA,LTCBENEPAY,49,2,7,0
2017,12345,WA,LTCBENEPAY,50,28,121,3
2017,12345,WA,LTCBENEPAY,51,221,1126,50
2017,12345,WA,LTCBENEPAY,52,29,72,23
2017,12345,WA,LTCBENEPAY,53,0,1,1
2017,12345,WA,LTCBENEPAY,54,1,1,0
2017,12345,WA,LTCBENEPAY,55,2,3,0
2017,12345,WA,LTCBENEPAY,56,0,2,0
2017,12345,WA,LTCBENEPAY,57,0,2,0
2017,12345,WA,LTCBENEPAY,58,0,0,0
2017,12345,NV,LTCBENEPAY,47,,418,
2017,12345,NV,LTCBENEPAY,48,,245,
2017,12345,NV,LTCBENEPAY,49,,24,
2017,12345,NV,LTCBENEPAY,50,,610,
2017,12345,NV,LTCBENEPAY,51,,224,
2017,12345,NV,LTCBENEPAY,52,,10,
2017,12345,NV,LTCBENEPAY,53,,9,
2017,12345,NV,LTCBENEPAY,54,,2,
2017,12345,NV,LTCBENEPAY,55,,13,
2017,12345,NV,LTCBENEPAY,56,,5,
2017,12345,NV,LTCBENEPAY,57,,6,
2017,12345,NV,LTCBENEPAY,58,,0,

LTC Lawsuits Records (8 Columns)

2017,12345,WA,LTCLAW,59,9,18,0
2017,12345,WA,LTCLAW,60,2,8,1
2017,12345,WA,LTCLAW,61,6,9,1
2017,12345,WA,LTCLAW,62,1,2,0
2017,12345,WA,LTCLAW,63,5,17,0
2017,12345,NV,LTCLAW,59,,24,
2017,12345,NV,LTCLAW,60,,2,
2017,12345,NV,LTCLAW,61,,4,
2017,12345,NV,LTCLAW,62,,3,
2017,12345,NV,LTCLAW,63,,22

Health

In this Health sample there is data provided for two states, AL and FL, reporting all types of coverage in both states.

In-Exchange and Out-of-Exchange Interrogatories Records (7 Columns)

2020,12345,AL,HLTHINT,1,Y,
2020,12345,AL,HLTHINT,2,Y,
2020,12345,AL,HLTHINT,3,Y,
2020,12345,AL,HLTHINT,4,Y,
2020,12345,AL,HLTHINT,5,Y,
2020,12345,AL,HLTHINT,6,,2
2020,12345,AL,HLTHINT,7,Y,
2020,12345,AL,HLTHINT,8,,
2020,12345,AL,HLTHINT,9,Y,
2020,12345,AL,HLTHINT,10,Y,
2020,12345,AL,HLTHINT,11,Y,
2020,12345,AL,HLTHINT,12,Y,
2020,12345,AL,HLTHINT,13,Y,
2020,12345,AL,HLTHINT,14,Y,
2020,12345,AL,HLTHINT,15,,4
2020,12345,AL,HLTHINT,16,,5
2020,12345,AL,HLTHINT,17,Y,
2020,12345,AL,HLTHINT,18,,
2020,12345,FL,HLTHINT,1,Y,
2020,12345,FL,HLTHINT,2,Y,
2020,12345,FL,HLTHINT,3,Y,
2020,12345,FL,HLTHINT,4,Y,
2020,12345,FL,HLTHINT,5,Y,
2020,12345,FL,HLTHINT,6,,2
2020,12345,FL,HLTHINT,7,Y,
2020,12345,FL,HLTHINT,8,,
2020,12345,FL,HLTHINT,9,Y,
2020,12345,FL,HLTHINT,10,Y,
2020,12345,FL,HLTHINT,11,Y,
2020,12345,FL,HLTHINT,12,Y,
2020,12345,FL,HLTHINT,13,Y,
2020,12345,FL,HLTHINT,14,Y,
2020,12345,FL,HLTHINT,15,,4
2020,12345,FL,HLTHINT,16,,5
2020,12345,FL,HLTHINT,17,Y,
2020,12345,FL,HLTHINT,18,,

In-Exchange Individual Health Records (10 Columns)

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2020,12345,AL,HLTHIEXINDIV,20,185,50,65,70,370
2020,12345,AL,HLTHIEXINDIV,21,350,201,170,185,906
2020,12345,AL,HLTHIEXINDIV,22,2220,600,780,840,4440
2020,12345,AL,HLTHIEXINDIV,23,4200,2412,2040,2220,10872
2020,12345,AL,HLTHIEXINDIV,24,57,56,55,54,222
2020,12345,AL,HLTHIEXINDIV,25,88,87,86,85,346
2020,12345,AL,HLTHIEXINDIV,26,62,61,60,59,242
2020,12345,AL,HLTHIEXINDIV,27,93,92,91,90,366

2020,12345,AL,HLTHIEXINDIV,28,,,,,101
2020,12345,AL,HLTHIEXINDIV,29,12,65,22,9,108
2020,12345,AL,HLTHIEXINDIV,30,,,,,650
2020,12345,AL,HLTHIEXINDIV,31,,,,,523
2020,12345,AL,HLTHIEXINDIV,32,,,,,75
2020,12345,AL,HLTHIEXINDIV,33,,,,,55
2020,12345,AL,HLTHIEXINDIV,34,,,,,40
2020,12345,AL,HLTHIEXINDIV,35,,,,,11
2020,12345,AL,HLTHIEXINDIV,36,,,,,250
2020,12345,AL,HLTHIEXINDIV,37,,,,,200
2020,12345,AL,HLTHIEXINDIV,38,,,,,50
2020,12345,AL,HLTHIEXINDIV,39,550,425,300,267,1542
2020,12345,AL,HLTHIEXINDIV,40,500,400,250,200,1350
2020,12345,AL,HLTHIEXINDIV,41,50,25,50,67,192
2020,12345,AL,HLTHIEXINDIV,42,400,300,150,100,950
2020,12345,AL,HLTHIEXINDIV,43,100,75,50,20,245
2020,12345,AL,HLTHIEXINDIV,44,100,75,50,20,245
2020,12345,AL,HLTHIEXINDIV,45,100,75,50,20,245
2020,12345,AL,HLTHIEXINDIV,46,100,75,0,40,215
2020,12345,AL,HLTHIEXINDIV,47,75,50,25,15,165
2020,12345,AL,HLTHIEXINDIV,48,75,50,25,15,165
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2020,12345,AL,HLTHIEXINDIV,52,400,300,150,100,950
2020,12345,AL,HLTHIEXINDIV,53,100,75,50,20,245
2020,12345,AL,HLTHIEXINDIV,54,100,75,50,20,245
2020,12345,AL,HLTHIEXINDIV,55,100,75,50,20,245
2020,12345,AL,HLTHIEXINDIV,56,100,75,0,40,215
2020,12345,AL,HLTHIEXINDIV,57,75,50,25,15,165
2020,12345,AL,HLTHIEXINDIV,58,75,50,25,15,165
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2020,12345,AL,HLTHIEXINDIV,80,,,,,35
2020,12345,AL,HLTHIEXINDIV,81,,,,,165000
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2020,12345,AL,HLTHIEXINDIV,85,5,5,6,6,22
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2020,12345,AL,HLTHIEXINDIV,87,2,2,3,3,10
2020,12345,AL,HLTHIEXINDIV,88,6,7,8,9,30
2020,12345,AL,HLTHIEXINDIV,89,,,,,15
2020,12345,AL,HLTHIEXINDIV,90,,,,,8
2020,12345,AL,HLTHIEXINDIV,91,,,,,7
2020,12345,FL,HLTHIEXINDIV,19,18500000,5000000,5000000,5000000,33500000
2020,12345,FL,HLTHIEXINDIV,20,185,50,65,70,370
2020,12345,FL,HLTHIEXINDIV,21,350,201,170,185,906
2020,12345,FL,HLTHIEXINDIV,22,2220,600,780,840,4440
2020,12345,FL,HLTHIEXINDIV,23,4200,2412,2040,2220,10872
2020,12345,FL,HLTHIEXINDIV,24,57,56,55,54,222
2020,12345,FL,HLTHIEXINDIV,25,88,87,86,85,346
2020,12345,FL,HLTHIEXINDIV,26,62,61,60,59,242
2020,12345,FL,HLTHIEXINDIV,27,93,92,91,90,366
2020,12345,FL,HLTHIEXINDIV,28,,,,,101
2020,12345,FL,HLTHIEXINDIV,29,12,65,22,9,108
2020,12345,FL,HLTHIEXINDIV,30,,,,,650
2020,12345,FL,HLTHIEXINDIV,31,,,,,523
2020,12345,FL,HLTHIEXINDIV,32,,,,,75
2020,12345,FL,HLTHIEXINDIV,33,,,,,55
2020,12345,FL,HLTHIEXINDIV,34,,,,,40
2020,12345,FL,HLTHIEXINDIV,35,,,,,11
2020,12345,FL,HLTHIEXINDIV,36,,,,,250
2020,12345,FL,HLTHIEXINDIV,37,,,,,200
2020,12345,FL,HLTHIEXINDIV,38,,,,,50
2020,12345,FL,HLTHIEXINDIV,39,550,425,300,267,1542
2020,12345,FL,HLTHIEXINDIV,40,500,400,250,200,1350
2020,12345,FL,HLTHIEXINDIV,41,50,25,50,67,192
2020,12345,FL,HLTHIEXINDIV,42,400,300,150,100,950
2020,12345,FL,HLTHIEXINDIV,43,100,75,50,20,245
2020,12345,FL,HLTHIEXINDIV,44,100,75,50,20,245
2020,12345,FL,HLTHIEXINDIV,45,100,75,50,20,245
2020,12345,FL,HLTHIEXINDIV,46,100,75,0,40,215
2020,12345,FL,HLTHIEXINDIV,47,75,50,25,15,165
2020,12345,FL,HLTHIEXINDIV,48,75,50,25,15,165
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2020,12345,FL,HLTHIEXINDIV,51,75,50,25,15,165
2020,12345,FL,HLTHIEXINDIV,52,400,300,150,100,950
2020,12345,FL,HLTHIEXINDIV,53,100,75,50,20,245
2020,12345,FL,HLTHIEXINDIV,54,100,75,50,20,245
2020,12345,FL,HLTHIEXINDIV,55,100,75,50,20,245
2020,12345,FL,HLTHIEXINDIV,56,100,75,0,40,215
2020,12345,FL,HLTHIEXINDIV,57,75,50,25,15,165
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 2020,12345,FL,HLTHIEXINDIV,79,,,,,40
 2020,12345,FL,HLTHIEXINDIV,80,,,,,35
 2020,12345,FL,HLTHIEXINDIV,81,,,,,165000
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In-Exchange Small Group Health Records (10 Columns)

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 2020,12345,AL,HLTHIEXSMGRP,23,4200,2412,2040,2220,10872
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 2020,12345,AL,HLTHIEXSMGRP,25,,,,,
 2020,12345,AL,HLTHIEXSMGRP,26,62,61,60,59,242
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 2020,12345,AL,HLTHIEXSMGRP,29,12,65,22,9,108
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 2020,12345,AL,HLTHIEXSMGRP,37,,,,,200
 2020,12345,AL,HLTHIEXSMGRP,38,,,,,50
 2020,12345,AL,HLTHIEXSMGRP,39,550,425,300,267,1542
 2020,12345,AL,HLTHIEXSMGRP,40,500,400,250,200,1350
 2020,12345,AL,HLTHIEXSMGRP,41,50,25,50,67,192
 2020,12345,AL,HLTHIEXSMGRP,42,400,300,150,100,950
 2020,12345,AL,HLTHIEXSMGRP,43,100,75,50,20,245
 2020,12345,AL,HLTHIEXSMGRP,44,100,75,50,20,245
 2020,12345,AL,HLTHIEXSMGRP,45,100,75,50,20,245
 2020,12345,AL,HLTHIEXSMGRP,46,100,75,0,40,215
 2020,12345,AL,HLTHIEXSMGRP,47,75,50,25,15,165
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2020,12345,AL,HLTHIEXSMGRP,50,75,50,25,15,165
2020,12345,AL,HLTHIEXSMGRP,51,75,50,25,15,165
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2020,12345,AL,HLTHIEXSMGRP,53,100,75,50,20,245
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2020,12345,AL,HLTHIEXSMGRP,55,100,75,50,20,245
2020,12345,AL,HLTHIEXSMGRP,56,100,75,0,40,215
2020,12345,AL,HLTHIEXSMGRP,57,75,50,25,15,165
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2020,12345,AL,HLTHIEXSMGRP,77,,,,,15
2020,12345,AL,HLTHIEXSMGRP,78,,,,,15
2020,12345,AL,HLTHIEXSMGRP,79,,,,,40
2020,12345,AL,HLTHIEXSMGRP,80,,,,,35
2020,12345,AL,HLTHIEXSMGRP,81,,,,,165000
2020,12345,AL,HLTHIEXSMGRP,82,,,,,50000
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2020,12345,FL,HLTHIEXSMGRP,19,18500000,5000000,5000000,5000000,33500000
2020,12345,FL,HLTHIEXSMGRP,20,,,,,
2020,12345,FL,HLTHIEXSMGRP,21,,,,,
2020,12345,FL,HLTHIEXSMGRP,22,2220,600,780,840,4440
2020,12345,FL,HLTHIEXSMGRP,23,4200,2412,2040,2220,10872
2020,12345,FL,HLTHIEXSMGRP,24,,,,,
2020,12345,FL,HLTHIEXSMGRP,25,,,,,
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In-Exchange Catastrophic Records (6 Columns)

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2020,12345,AL,HLTHIEXCAT,44,245
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2020,12345,AL,HLTHIEXCAT,67,9500
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2020,12345,FL,HLTHIEXCAT,36,250
2020,12345,FL,HLTHIEXCAT,37,200
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 2020,12345,FL,HLTHIEXCAT,87,10
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In-Exchange Multi-State Individual Health Records (10 Columns)

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 2020,12345,AL,HLTHIEXMSIND,29,12,65,22,9,108
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2020,12345,AL,HLTHIEXMSIND,37,,,,,200
2020,12345,AL,HLTHIEXMSIND,38,,,,,50
2020,12345,AL,HLTHIEXMSIND,39,550,425,300,267,1542
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2020,12345,AL,HLTHIEXMSIND,45,100,75,50,20,245
2020,12345,AL,HLTHIEXMSIND,46,100,75,0,40,215
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2020,12345,AL,HLTHIEXMSIND,53,100,75,50,20,245
2020,12345,AL,HLTHIEXMSIND,54,100,75,50,20,245
2020,12345,AL,HLTHIEXMSIND,55,100,75,50,20,245
2020,12345,AL,HLTHIEXMSIND,56,100,75,0,40,215
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2020,12345,FL,HLTHIEXMSIND,29,12,65,22,9,108
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2020,12345,FL,HLTHIEXMSIND,36,,,,,250
2020,12345,FL,HLTHIEXMSIND,37,,,,,200
2020,12345,FL,HLTHIEXMSIND,38,,,,,50
2020,12345,FL,HLTHIEXMSIND,39,550,425,300,267,1542
2020,12345,FL,HLTHIEXMSIND,40,500,400,250,200,1350
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2020,12345,FL,HLTHIEXMSIND,45,100,75,50,20,245
2020,12345,FL,HLTHIEXMSIND,46,100,75,0,40,215
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2020,12345,FL,HLTHIEXMSIND,53,100,75,50,20,245
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2020,12345,FL,HLTHIEXMSIND,55,100,75,50,20,245
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2020,12345,FL,HLTHIEXMSIND,78,,,,,15
 2020,12345,FL,HLTHIEXMSIND,79,,,,,40
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 2020,12345,FL,HLTHIEXMSIND,81,,,,,165000
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In-Exchange Multi-State Group Health Records (10 Columns)

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 2020,12345,AL,HLTHIEXMSSGRP,28,,,,,101
 2020,12345,AL,HLTHIEXMSSGRP,29,12,65,22,9,108
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Out-of-Exchange Grandfathered Records (9 Columns)

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Out-of-Exchange Catastrophic Records (6 Columns)

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Out-of-Exchange Large Group Health Records (6 Columns)

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Out-of-Exchange Student Coverage Records (6 Columns)

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Lender-Placed Insurance

In this Lender-Placed sample there is data provided for 2 states: MN and TX. MN has Single and Dual Interest Auto data only to report while TX has all types of data to report.

Lender-Placed Interrogatories (7 columns)

2020,12345,MN,LPIINT,1,Y,
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2020,12345,MN,LPIINT,6,,
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2020,12345,MN,LPIINT,17,N,
2020,12345,MN,LPIINT,18,Y,
2020,12345,MN,LPIINT,19,,
2020,12345,MN,LPIINT,20,Y,
2020,12345,MN,LPIINT,21,,
2020,12345,MN,LPIINT,22,,We reopen the claim.
2020,12345,MN,LPIINT,23,Y,
2020,12345,MN,LPIINT,24,,We have no comment.
2020,12345,MN,LPIINT,25,Y,
2020,12345,MN,LPIINT,26,,We try.
2020,12345,MN,LPIINT,27,,I'm a claims comment
2020,12345,MN,LPIINT,28,,And I am an underwriting comment.
2020,12345,TX,LPIINT,1,Y,
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2020,12345,TX,LPIINT,4,,90
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2020,12345,TX,LPIINT,21,,
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 2020,12345,TX,LPIINT,23,Y,
 2020,12345,TX,LPIINT,24,,We have no comment.
 2020,12345,TX,LPIINT,25,Y,
 2020,12345,TX,LPIINT,26,,We try.
 2020,12345,TX,LPIINT,27,,I'm a claims comment
 2020,12345,TX,LPIINT,28,,And I am an underwriting comment.

Lender-Placed Claims (13 Columns)

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 2020,12345,TX,LPICLMS,42,10,12,15,17,20,22,25,27
 2020,12345,TX,LPICLMS,43,10,20,30,40,50,60,70,80
 2020,12345,TX,LPICLMS,44,11,22,33,44,55,66,77,88
 2020,12345,TX,LPICLMS,45,4,5,6,7,8,9,3,2
 2020,12345,TX,LPICLMS,46,97,101,138,118,178,90,69,88
 2020,12345,TX,LPICLMS,47,9,7,3,1,5,1,7,9
 2020,12345,TX,LPICLMS,48,12,15,17,3,1,3,7,9
 2020,12345,TX,LPICLMS,49,15,14,13,2,4,3,2,1
 2020,12345,TX,LPICLMS,50,3,2,1,0,1,1,1,0
 2020,12345,TX,LPICLMS,51,6,8,7,2,2,1,12,17

Lender-Placed Underwriting (13 columns)

2020,12345,MN,LPIUNDACT,52,75,,,,,,,,,
2020,12345,MN,LPIUNDACT,53,50,,,,,,,,,
2020,12345,MN,LPIUNDACT,54,35,,,,,,,,,
2020,12345,MN,LPIUNDACT,55,90,,,,,,,,,
2020,12345,MN,LPIUNDACT,56,94,,,,,,,,,
2020,12345,MN,LPIUNDACT,57,63,,,,,,,,,
2020,12345,MN,LPIUNDACT,58,105,,,,,,,,,
2020,12345,MN,LPIUNDACT,59,22,,,,,,,,,
2020,12345,MN,LPIUNDACT,60,30,,,,,,,,,
2020,12345,MN,LPIUNDACT,61,3,,,,,,,,,
2020,12345,MN,LPIUNDACT,62,4,,,,,,,,,
2020,12345,MN,LPIUNDACT,63,15,,,,,,,,,
2020,12345,MN,LPIUNDACT,64,80,,,,,,,,,
2020,12345,MN,LPIUNDACT,65,80,,,,,,,,,
2020,12345,MN,LPIUNDACT,66,142,,,,,,,,,
2020,12345,MN,LPIUNDACT,67,9,,,,,,,,,
2020,12345,MN,LPIUNDACT,68,9,,,,,,,,,
2020,12345,MN,LPIUNDACT,69,6,,,,,,,,,
2020,12345,MN,LPIUNDACT,70,1,,,,,,,,,
2020,12345,MN,LPIUNDACT,71,2,,,,,,,,,
2020,12345,MN,LPIUNDACT,72,15,,,,,,,,,
2020,12345,MN,LPIUNDACT,73,2064698,,,,,,,,,
2020,12345,MN,LPIUNDACT,74,1651758,,,,,,,,,
2020,12345,MN,LPIUNDACT,75,247764,,,,,,,,,
2020,12345,MN,LPIUNDACT,76,2271168,,,,,,,,,
2020,12345,MN,LPIUNDACT,77,15000,,,,,,,,,
2020,12345,MN,LPIUNDACT,78,13200,,,,,,,,,
2020,12345,MN,LPIUNDACT,79,8,,,,,,,,,
2020,12345,MN,LPIUNDACT,80,10,,,,,,,,,
2020,12345,TX,LPIUNDACT,52,75,200,300,400,500,450,350,1100
2020,12345,TX,LPIUNDACT,53,50,25,75,100,125,100,75,80
2020,12345,TX,LPIUNDACT,54,35,45,55,65,75,85,95,105
2020,12345,TX,LPIUNDACT,55,90,180,320,435,550,465,330,1075
2020,12345,TX,LPIUNDACT,56,94,250,375,500,625,563,438,1375
2020,12345,TX,LPIUNDACT,57,63,32,94,125,157,125,94,100
2020,12345,TX,LPIUNDACT,58,105,175,393,452,642,435,364,1380
2020,12345,TX,LPIUNDACT,59,22,102,61,143,82,163,68,66
2020,12345,TX,LPIUNDACT,60,30,5,15,30,58,90,100,29
2020,12345,TX,LPIUNDACT,61,3,50,18,38,17,38,15,9
2020,12345,TX,LPIUNDACT,62,4,32,18,75,30,85,8,7
2020,12345,TX,LPIUNDACT,63,15,20,25,30,35,40,45,50
2020,12345,TX,LPIUNDACT,64,80,32,90,188,175,30,200,750
2020,12345,TX,LPIUNDACT,65,80,35,40,90,62,40,50,200
2020,12345,TX,LPIUNDACT,66,142,43,38,174,159,-22,164,872
2020,12345,TX,LPIUNDACT,67,9,12,46,52,39,46,43,39
2020,12345,TX,LPIUNDACT,68,9,12,46,52,39,46,43,39
2020,12345,TX,LPIUNDACT,69,6,4,8,3,7,9,15,9
2020,12345,TX,LPIUNDACT,70,1,3,30,38,18,20,8,7
2020,12345,TX,LPIUNDACT,71,2,5,8,11,14,17,20,23
2020,12345,TX,LPIUNDACT,72,15,20,25,30,35,40,45,50
2020,12345,TX,LPIUNDACT,73,206498,31686,6389,3822689,43847,574362547,6189,5648921
2020,12345,TX,LPIUNDACT,74,165175,25345,5106,3061811,379078,459490038,4951,4519137
2020,12345,TX,LPIUNDACT,75,247764,38018,7659,4592723,56862,68923506,743,677871
2020,12345,TX,LPIUNDACT,76,227116,34898,7212,4099958,521232,631798802,6808,6213813
2020,12345,TX,LPIUNDACT,77,15000,88000,888888,76259,47625,362718364,777777,888888

2020,12345,TX,LPIUNDACT,78,13200,77440,782222,67108,41910,319192161,684444,782222
2020,12345,TX,LPIUNDACT,79,8,7,76,54,33,23,30,15
2020,12345,TX,LPIUNDACT,80,10,3,5,9,66,3,1,7

Disability Income Insurance

In this Disability Income sample there is data provided for AK and all coverages.

Disability Income Interrogatories (7 columns)

2020,12345,AK,DIINT,1,Y,
2020,12345,AK,DIINT,2,Y,
2020,12345,AK,DIINT,3,Y,
2020,12345,AK,DIINT,4,Y,
2020,12345,AK,DIINT,5,Y,
2020,12345,AK,DIINT,6,Y,
2020,12345,AK,DIINT,7,Y,
2020,12345,AK,DIINT,8,Y,
2020,12345,AK,DIINT,9,N,
2020,12345,AK,DIINT,10,,
2020,12345,AK,DIINT,11,N,
2020,12345,AK,DIINT,12,,
2020,12345,AK,DIINT,13,,2
2020,12345,AK,DIINT,14,,
2020,12345,AK,DIINT,15,,
2020,12345,AK,DIINT,16,,

Disability Income Claims (13 columns)

2020,12345,AK,DICLMS,17,125,125,125,125,125,125,125,125
2020,12345,AK,DICLMS,18,200,200,200,200,200,200,200,200
2020,12345,AK,DICLMS,19,100,100,100,100,100,100,100,100
2020,12345,AK,DICLMS,20,75,75,75,75,75,75,75,75
2020,12345,AK,DICLMS,21,50,50,50,50,50,50,50,50
2020,12345,AK,DICLMS,22,75,75,75,75,75,75,75,75
2020,12345,AK,DICLMS,23,100,100,100,100,100,100,100,100
2020,12345,AK,DICLMS,24,275,275,275,275,275,275,275,275
2020,12345,AK,DICLMS,25,20,,20,,20,,20,
2020,12345,AK,DICLMS,26,15,,15,,15,,15,
2020,12345,AK,DICLMS,27,10,,10,,10,,10,
2020,12345,AK,DICLMS,28,5,,5,,5,,5,
2020,12345,AK,DICLMS,29,21,,21,,21,,21,
2020,12345,AK,DICLMS,30,,20,,20,,20,,20
2020,12345,AK,DICLMS,31,,15,,15,,15,,15
2020,12345,AK,DICLMS,32,,10,,10,,10,,10
2020,12345,AK,DICLMS,33,,5,,5,,5,,5
2020,12345,AK,DICLMS,34,,21,,21,,21,,21
2020,12345,AK,DICLMS,35,20,,20,,20,,20,
2020,12345,AK,DICLMS,36,15,,15,,15,,15,
2020,12345,AK,DICLMS,37,10,,10,,10,,10,
2020,12345,AK,DICLMS,38,5,,5,,5,,5,
2020,12345,AK,DICLMS,39,21,,21,,21,,21,
2020,12345,AK,DICLMS,40,,20,,20,,20,,20
2020,12345,AK,DICLMS,41,,15,,15,,15,,15
2020,12345,AK,DICLMS,42,,10,,10,,10,,10
2020,12345,AK,DICLMS,43,,5,,5,,5,,5
2020,12345,AK,DICLMS,44,,21,,21,,21,,21
2020,12345,AK,DICLMS,45,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,46,0,0,0,0,0,0,0,0

2020,12345,AK,DICLMS,47,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,48,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,49,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,50,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,51,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,52,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,53,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,54,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,55,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,56,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,57,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,58,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,59,10,10,10,10,10,10,10,10,10
2020,12345,AK,DICLMS,60,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,61,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,62,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,63,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,64,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,65,0,0,0,0,0,0,0,0,0
2020,12345,AK,DICLMS,66,0,0,0,0,0,0,0,0,0

Disability Income Underwriting (13 columns)

2020,12345,AK,DIUNDACT,67,500,500,500,500,500,500,500,500
2020,12345,AK,DIUNDACT,68,50,50,50,50,50,50,50,50
2020,12345,AK,DIUNDACT,69,125000,125000,125000,125000,125000,125000,125000,125000
2020,12345,AK,DIUNDACT,70,20,20,20,20,20,20,20,20
2020,12345,AK,DIUNDACT,71,20,20,20,20,20,20,20,20
2020,12345,AK,DIUNDACT,72,20,20,20,20,20,20,20,20
2020,12345,AK,DIUNDACT,73,15,15,15,15,15,15,15,15
2020,12345,AK,DIUNDACT,74,5,5,5,5,5,5,5,5
2020,12345,AK,DIUNDACT,75,470,470,470,470,470,470,470,470
2020,12345,AK,DIUNDACT,76,,,,,500,500,500,500
2020,12345,AK,DIUNDACT,77,,,,,50,50,50,50
2020,12345,AK,DIUNDACT,78,,,,,20,20,20,20
2020,12345,AK,DIUNDACT,79,,,,,20,20,20,20
2020,12345,AK,DIUNDACT,80,,,,,20,20,20,20
2020,12345,AK,DIUNDACT,81,,,,,20,20,20,20
2020,12345,AK,DIUNDACT,82,,,,,470,470,470,470
2020,12345,AK,DIUNDACT,83,35,35,35,35,35,35,35,35
2020,12345,AK,DIUNDACT,84,3,3,3,3,3,3,3,3
2020,12345,AK,DIUNDACT,85,0,0,0,0,0,0,0,0
2020,12345,AK,DIUNDACT,86,2,2,2,2,2,2,2,2
2020,12345,AK,DIUNDACT,87,1,1,1,1,1,1,1,1
2020,12345,AK,DIUNDACT,88,1,1,1,1,1,1,1,1

Private Flood Insurance

In this Private Flood sample there is data provided for AK and all coverages.

Private Flood Interrogatories (7 columns)

2020,12345,AK,PFINT,1,Y,
2020,12345,AK,PFINT,2,Y,
2020,12345,AK,PFINT,3,,1
2020,12345,AK,PFINT,4,Y,
2020,12345,AK,PFINT,5,Y,
2020,12345,AK,PFINT,6,Y,
2020,12345,AK,PFINT,7,,1
2020,12345,AK,PFINT,8,Y,
2020,12345,AK,PFINT,9,Y,
2020,12345,AK,PFINT,10,,1
2020,12345,AK,PFINT,11,Y,
2020,12345,AK,PFINT,12,,1
2020,12345,AK,PFINT,15,Y,
2020,12345,AK,PFINT,16,Y,
2020,12345,AK,PFINT,17,,1
2020,12345,AK,PFINT,18,Y,
2020,12345,AK,PFINT,19,,1
2020,12345,AK,PFINT,22,Y,
2020,12345,AK,PFINT,23,Y,
2020,12345,AK,PFINT,24,,1
2020,12345,AK,PFINT,25,Y,
2020,12345,AK,PFINT,26,,1
2020,12345,AK,PFINT,29,Y,
2020,12345,AK,PFINT,30,Y,
2020,12345,AK,PFINT,31,,1
2020,12345,AK,PFINT,32,Y,
2020,12345,AK,PFINT,33,,1
2020,12345,AK,PFINT,36,Y,
2020,12345,AK,PFINT,37,Y,
2020,12345,AK,PFINT,38,,1
2020,12345,AK,PFINT,39,Y,
2020,12345,AK,PFINT,40,,1
2020,12345,AK,PFINT,43,Y,
2020,12345,AK,PFINT,44,Y,
2020,12345,AK,PFINT,45,,1
2020,12345,AK,PFINT,46,Y,
2020,12345,AK,PFINT,47,,1
2020,12345,AK,PFINT,50,,1
2020,12345,AK,PFINT,51,,1

Private Flood Claims (11 columns)

2020,12345,AK,PRIVATEFLOOD,52,1,2,3,4,5,6
2020,12345,AK,PRIVATEFLOOD,53,7,8,9,10,11,12
2020,12345,AK,PRIVATEFLOOD,54,13,14,15,16,17,18
2020,12345,AK,PRIVATEFLOOD,55,19,20,21,22,23,24
2020,12345,AK,PRIVATEFLOOD,56,25,26,27,28,29,30
2020,12345,AK,PRIVATEFLOOD,57,31,32,33,34,35,36
2020,12345,AK,PRIVATEFLOOD,58,37,38,39,40,41,42
2020,12345,AK,PRIVATEFLOOD,59,43,44,45,46,47,48
2020,12345,AK,PRIVATEFLOOD,60,49,50,51,52,53,54
2020,12345,AK,PRIVATEFLOOD,61,55,56,57,58,59,60
2020,12345,AK,PRIVATEFLOOD,62,61,62,63,64,65,66
2020,12345,AK,PRIVATEFLOOD,63,67,68,69,70,71,72
2020,12345,AK,PRIVATEFLOOD,64,73,74,75,76,77,78
2020,12345,AK,PRIVATEFLOOD,65,79,80,81,82,83,84
2020,12345,AK,PRIVATEFLOOD,66,85,86,87,88,89,90
2020,12345,AK,PRIVATEFLOOD,67,92,93,94,95,96,97
2020,12345,AK,PRIVATEFLOOD,68,98,99,100,101,102,103
2020,12345,AK,PRIVATEFLOOD,69,104,105,106,107,108,109

Private Flood Underwriting (11 columns)

2020,12345,AK,PRIVATEFLOOD,71,7,8,9,10,11,12
2020,12345,AK,PRIVATEFLOOD,72,13,14,15,16,17,18
2020,12345,AK,PRIVATEFLOOD,73,19,20,21,22,23,24
2020,12345,AK,PRIVATEFLOOD,75,31,32,33,34,35,36
2020,12345,AK,PRIVATEFLOOD,76,37,38,39,40,41,42
2020,12345,AK,PRIVATEFLOOD,77,43,44,45,46,47,48
2020,12345,AK,PRIVATEFLOOD,78,49,50,51,52,53,54
2020,12345,AK,PRIVATEFLOOD,79,55,56,57,58,59,60
2020,12345,AK,PRIVATEFLOOD,80,61,62,63,64,65,66
2020,12345,AK,PRIVATEFLOOD,81,67,68,69,70,71,72

Private Flood Lawsuits and Complaints (11 columns)

2020,12345,AK,PRIVATEFLOOD,82,1,2,3,4,5,6
2020,12345,AK,PRIVATEFLOOD,83,7,8,9,10,11,12
2020,12345,AK,PRIVATEFLOOD,84,13,14,15,16,17,18
2020,12345,AK,PRIVATEFLOOD,85,19,20,21,22,23,24
2020,12345,AK,PRIVATEFLOOD,86,25,26,27,28,29,30
2020,12345,AK,PRIVATEFLOOD,87,31,32,33,34,35,36