**Section 4203.30 Data Collection Procedures**

a) Scope of Procedure

Each insurer shall report its business written separately for Illinois and multi-state (including Illinois) for each line, subline, or class, or endorsement specified by this Part. Where zip code reporting is required, each line, subline, class or endorsement shall be reported separately for each zip code. Only data for the voluntary market will be reported.

b) Methods of Compiling Annual Experience

All data contained in this data call shall be submitted on a calendar year basis. For the calendar year experience method, the insurer or agent will report evaluations as of December 31. Data will be reported for the current year minus one year. (For example, the 2017 report will contain data for 2016, evaluated as of December 31, 2016, the latest complete, calendar year experience year.)

c) Experience Method By Line

In reporting the required data, please note the following clarifications:

1) The "Other Liability" line includes classes from liquor liability, day care centers, and lawyers professional liability, and excess/umbrella coverage.

2) Data from Beach Plans and Assigned Risk Plans will not be reported. (The Illinois FAIR Plan Association will submit Illinois-only data for homeowners.) Insurers will not report any FAIR Plan data.

d) Preparation and Completion of Statistical Reports

1) Insurers may report statistics directly, or through an agent. Agents reporting data for more than one insurer will report each insurer's data on separate records.

2) Insurers will report their data within the required time frame using the codes and record formats provided in Sections 4203.50 through 4203.110.

3) Exemption requests:

A) All companies requesting exemption from data submission requirements must notify the Department prior to each filing date. The notice must contain the following information:

i) Name of company or agent;

ii) FEIN (not applicable to agents);

iii) NAIC group and company number (not applicable to agents);

iv) Filing date (e.g., 11/25/06);

v) Address, City, State and Zip code;

vi) Contact person;

vii) Phone number of contact person;

viii) Email address for contact person; and

ix) Reason for exemption.

B) All data for each line of business must be submitted as a complete submission. In the event data is resubmitted, all data previously submitted for that line of business by that insurer will be deleted and replaced by the resubmitted data.

C) Insurers need not submit a record (for either Illinois only or multi-state) for any line, class, or endorsement if written premiums, earned premiums, and paid and outstanding losses in the Illinois-only data are all zeroes.

e) Reporting of Exposures

A count of the number of written exposures will be reported separately for each line, type of business and classification. Section 4203.50 provides the exposure basis for each.

f) Reporting of Premiums

The premium reported will be the premium charged for the policies within each classification. Excess insurance premiums will be reported separately as addressed in subsection (o). Premiums will be reported on both a written and earned basis.

g) Reporting of Losses

Separate fields are provided for both paid losses and outstanding losses. Losses will be reported net as to third party recoveries (under salvage and subrogation). Paid losses are defined as all sums paid to claimants or policyholders in direct settlement of losses covered by the policies. Outstanding losses are defined as the amounts of loss reserves established for paying claims for the reporting period that have not been paid as of the evaluation date. Losses covered by an excess policy will be reported separately as addressed in subsection (p).

h) Reporting of Allocated Loss Adjustment Expenses

Allocated loss adjustment expense (ALAE) includes all expenses of the company which can be identified with and hence allocated to a particular claim. Insurers will report the amount of paid and outstanding ALAE for the private passenger auto liability, medical malpractice, other liability and commercial auto liability lines. Also, ALAE will be collected for business owners insurance and excess insurance. In those situations where an insurer cannot separate indemnity and ALAE, the insurer will submit a separate record; however, the insurer will enter the combined loss and ALAE total in the paid loss or outstanding loss fields and will identify this option by coding the corresponding paid ALAE or outstanding ALAE fields with the word "combined".

i) Reporting Paid Claims Count

Insurers will report the count of their paid claims. A claim closed without a loss payment is not to be reported. A claim involving only allocated loss adjustment expense is not to be reported with a claim count. A claim count is to be reported only for those cases where a loss payment has been made or a loss reserve has been established. A paid claim is defined as a claim for which a payment has been made. In cases where a claim is partially paid with an associated case reserve still maintained, insurers have the option to report the claim count as either paid or outstanding. A case involving loss payments or loss reserves under more than one classification will have a claim count under each classification.

j) Reporting Outstanding Claims Count

Insurers will report the count of outstanding claims. An outstanding claim is defined as a claim for which a case loss reserve exists as of the evaluation date. In cases where a claim is partially paid with an associated case reserve still maintained, insurers have the option to report the claim count as either paid or outstanding. A case involving loss payments or loss reserves under more than one classification will have a claim count under each classification.

k) Run-off Business

Companies with no written or earned premiums, but with paid or outstanding losses in a line, class, subclass, or endorsement for Illinois-only data must report data for that line, class, subclass, or endorsement for both Illinois-only and multi-state. If the aforementioned situation occurs in only the multi-state data, the insurer will not be required to report that data.

l) All Prepaid Policies

Premiums for all policies not having a one-year term shall be reported using a pro rata allocation formula. In all cases policy periods shall be annual or less.

m) Treatment of Installment Payments

All premiums for policies written on an installment basis will be reported as though they were prepaid policies.

n) Rounding Rule

Data will be reported in whole numbers. All decimals will be rounded to the nearest integer. (Decimals less than .5 will be rounded down to the nearest whole number while decimals .5 and above will be rounded up to the nearest whole number.)

o) Reporting Excess Insurance Premiums

Written and earned premiums for excess insurance will be entered in the appropriate fields for this type class. (See Section 4203.70.) Premiums for excess insurance are defined as that premium charged for coverage in excess of the primary policy limits added by a different policy (e.g., umbrella policy or through an endorsement to the policy).

p) Reporting Excess Insurance Losses

Paid losses and outstanding losses for excess insurance will be entered in the appropriate fields for this class. (See Section 4203.70.) An excess loss is defined as a loss resulting in an incurred cost to the insurer in excess of the primary policy limits and covered by a different policy or an endorsement to the policy. Examples include umbrella policies and excess limits endorsements.

(Source: Amended at 42 Ill. Reg. 20370, effective November 1, 2018)