Severe Event Data Collector User Guide
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Home Page

This is the site home page.

Severe Event Data Collector ("SEDC")

Reporting Data for Severe Event Pursuant to COMAR 31.01.02.07

WHO IS REQUIRED TO FILE?

All insurers authorized in the State of Maryland to write property and casualty insurance, the Maryland Automobile Insurance Fund, the Injured Workers Insurance Fund, and the Joint Insurance Association must report claims data. Data must be submitted for each Line of Business and zip code. You can select whether to file by company or by the entire group. Once you select to file as part of a group, you cannot file by individual company.

HOW TO FILE?

File your claims data using this SEDC portal. Failure to file your data timely may result in administrative penalties.

File On-Line:

All companies must file their report electronically by the due date for each reporting period. All carriers have received their user ID and password via electronic mail. If you have not received this information, please email poiiformulaia@maryland.gov or contact us at 410-460-2200. Each user ID and password are unique. You may not use the user ID and password of one company to file on behalf of another. You should print the report you filed for your records as well as the confirmation for your records.
Login Screen

This is the login screen. If you have never signed in to Severe Event Data Collector Application or cannot remember your password, please email pcinform.mia@maryland.gov.
Severe Event Data Collector Selection Screen

This screen displays the list of active severe events for which you can enter data. The available severe events are in a drop down list. When you select a severe event, you will be redirected to the first part of a four part data entry. Only the severe events that are active, are within the reporting period will be displayed, and those that you have not already submitted reports for or you are not referenced as part of a group.

If you do not see the Severe Event and/or filing period in the drop-down list that you wish to report on, one of the following possibilities may have occurred:

- The Severe Event may not be active;
- The filing period for the Severe Event may not be within its reporting period;
- You may already have filed the report, or
- Another company from your group (applies to group filing only) may have already filed the report on your behalf.
Severe Event Data Collector Input Screen, Part 1

This screen is where you select whether your report will be an individual or group report (if you are part of a group and have group members to select).
Severe Event Data Collector Input Screen, Part 2

This screen allows you to input the Staff Contact responsible for providing this Severe Event information. In addition, if you have no claims to file for this reporting period, check the check box before continuing.
Staff Contact Responsible for providing this Severe Event Information

First Name: * Johna
Middle Initial: A
Last Name: * Does

Staff Contact Mailing Address
Address Line 1: 100 S. Baltimore St
Address Line 2: Suite 101
City: Baltimore
State: Maryland
Zip Code: 21201
Email Address: * j.does@maryland.gov
Confirm Email: * j.does@maryland.gov
Phone * / Ext: 410-488-0001 1881

Nothing to Report

☐ No Claims to File for This Reporting Period:

* Required Fields
Severe Event Data Collector Input Screen, Part 3

This screen allows you to input severe event data for each Line of Business and Zip Code. Note the following:

- Please review your claims reported before you submit your filing. All fields are required.
- Ensure the Check Box is checked for each row you wish to enter data, or it will not be saved.
- If zero (0) is entered for 'Percentage Now Closed' field, you must enter 'Comments' in the field next to the field.
- If zero (0) is entered for 'Average Time to Close Claim (Days)' field, you must enter 'Comments' in the field next to the field.
- In the 'Zip Code/County' field, enter the 5-digit zip code and select the correct zip code/county combination from the list. If no results are displayed, the zip code you entered is not a valid zip code for Maryland.
- In addition, please SAVE your work regularly if you are entering many rows of data. This will ensure your session does not time out.
- For claims outside Maryland, please check "Outside of Maryland" and include the city and state in the comments section.

Severe Event Report, Part 3 Part 3 — Claim Information
### NOTE:
- Please review your claims reported before you submit your filing. All fields are required.
- Ensure the check box is checked for each row you wish to enter data, or it will not be saved.
- If zero (0) is entered for 'Percentage Now Closed' field, you must enter 'Comments' in the field next to the field.
- If zero (0) is entered for 'Average Time to Close Claim (Days)' field, you must enter 'Comments' in the field next to the field.
- In the 'Zip Code/County' field, enter the 5-digit zip code and select the correct zip code/county combination from the list. If no results are displayed, the zip code you entered is not a valid zip code for Maryland.
- In addition, please SAVE your work regularly if you are entering many rows of data. This will ensure your session does not time out.
- For claims outside Maryland, please check "Outside of Maryland" and include the city and state in the comments section.

<table>
<thead>
<tr>
<th>Line of Business</th>
<th>Outside of Maryland</th>
<th>Zip Code/County</th>
<th>Number of Claims</th>
<th>Percentage Now Closed</th>
<th>Comments for Percentage Now Closed</th>
<th>Amount Paid to Date</th>
<th>Average Time to Close Claim (Days)</th>
<th>Comments for Avg Time to Close Claim</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Homeowners Claims</td>
<td></td>
<td></td>
<td>21194 - Anacostia</td>
<td>50</td>
<td>10</td>
<td>parent now closed</td>
<td>$50,151.09</td>
<td>3.20</td>
</tr>
<tr>
<td>(2) Commercial Claims - Property Loss</td>
<td></td>
<td></td>
<td>Comments for Outside of Maryland</td>
<td>1</td>
<td>100</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>in VA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Commercial Claims - Other</td>
<td></td>
<td></td>
<td>Comments for Outside of Maryland</td>
<td>10</td>
<td>10</td>
<td></td>
<td>$259,041.00</td>
<td>2.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>In WV</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4) Farm Owners</td>
<td></td>
<td></td>
<td>21127 - Anacostia</td>
<td>4444</td>
<td>100</td>
<td></td>
<td>$27,777,109</td>
<td>899.00</td>
</tr>
</tbody>
</table>

Total: 1,199 99.6% $1,755,558.19 996.49
Severe Event Data Collector Input Screen, Part 4

This screen allows you to review all the data prior to submitting your report.

**Severe Event Summary — Summary**

<table>
<thead>
<tr>
<th>Reporting Data for Severe Event Pursuant to COMAR 31.01.02.07</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part 1 - Event Information</td>
</tr>
<tr>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>Severe Event Name: Hurricane Brussels</td>
</tr>
<tr>
<td>Bulletin #:</td>
</tr>
<tr>
<td>Description: This is a severe hurricane</td>
</tr>
<tr>
<td>Filing Period: 1 (1/24/2016 - 4/2/2016)</td>
</tr>
<tr>
<td>Report by Date: 3/25/2016</td>
</tr>
</tbody>
</table>

**Company Information**

<table>
<thead>
<tr>
<th>Company Name: Allstate Fire and Casualty Insurance Company</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAIC/License #: 29468</td>
</tr>
<tr>
<td>Filing As Group: Yes</td>
</tr>
<tr>
<td>Companies Included: Allstate Insurance Company (13011)</td>
</tr>
<tr>
<td>Encompass Home and Auto Insurance Company (11252)</td>
</tr>
<tr>
<td>Encompass Insurance Company (13758)</td>
</tr>
<tr>
<td>Insurance Property and Casualty Insurance Company (15210)</td>
</tr>
</tbody>
</table>

**User Login:** MIA01305  
**Created By:** MIA01305  
**Date Created:** 4/21/2016  
**Date Modified:** 5/31/2016  
**Modified By:** MIA01305

**Staff Contact Responsible for providing this Severe Event Information**

<table>
<thead>
<tr>
<th>First Name: John</th>
<th>Middle Initial: M</th>
<th>Last Name: Doe</th>
</tr>
</thead>
</table>

**Staff Contact Mailing Address**

<table>
<thead>
<tr>
<th>Address Line 1: 100 S. Baltimore St</th>
<th>Address Line 2: Suite 301</th>
</tr>
</thead>
<tbody>
<tr>
<td>City: Baltimore</td>
<td>State: MD</td>
</tr>
<tr>
<td>Zip Code: 21201</td>
<td>Phone: 410-468-0001</td>
</tr>
</tbody>
</table>

**Claims:**

<table>
<thead>
<tr>
<th>Line of Business</th>
<th>Outside of Maryland</th>
<th>Zip Code/County (ID Outside of MD Comments)</th>
<th>Number of Claims</th>
<th>Percentage of Claims Closed</th>
<th>Percentage of Claims Closed with Comments</th>
<th>Amount Paid to Date</th>
<th>Average Time to Close Claim (Days)</th>
<th>Comments for Avg Time to Close Claim</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial Claims - Other Other Commercial Claims</td>
<td>Yes</td>
<td>In WV</td>
<td>32</td>
<td>100%</td>
<td>100%</td>
<td>20,000.00</td>
<td>2,000</td>
<td>1.20</td>
</tr>
<tr>
<td>Residential Claims - Other Homeowners Claims</td>
<td>Yes</td>
<td>In WV</td>
<td>1</td>
<td>100%</td>
<td>100%</td>
<td>1,000.00</td>
<td>100</td>
<td>1.00</td>
</tr>
<tr>
<td>Private Claims - Other Other Private Claims</td>
<td>Yes</td>
<td>In WV</td>
<td>1</td>
<td>100%</td>
<td>100%</td>
<td>1,000.00</td>
<td>100</td>
<td>1.00</td>
</tr>
<tr>
<td><strong>Total Claims</strong></td>
<td></td>
<td></td>
<td>34</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Severe Events List

This screen lists all the events in the system.

<table>
<thead>
<tr>
<th>Status</th>
<th>Event Name</th>
<th>Bulletin #/URL</th>
<th>Description</th>
<th>Period 1</th>
<th>Period 2</th>
<th>Period 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active</td>
<td>Test Event 1</td>
<td>Bulletin #1</td>
<td>This is a very long description. It is supposed to be up to 255 characters. I want it to wrap in the box automatically. I am just testing to see if it will wrap the text.</td>
<td>From Date: 1/1/2018 To Date: 1/31/2018 Report By: 2/28/2018</td>
<td>From Date: 2/1/2018 To Date: 3/31/2018 Report By: 4/30/2018</td>
<td>From Date: 3/1/2018 To Date: 4/30/2018 Report By: 5/31/2018</td>
</tr>
<tr>
<td>Active</td>
<td>Hurricane</td>
<td>Bulletin #2, Bulletin #3, Bulletin #4</td>
<td>This is a test hurricane.</td>
<td>From Date: 4/1/2018 To Date: 5/31/2018 Report By: 6/30/2018</td>
<td>From Date: 5/1/2018 To Date: 6/30/2018 Report By: 7/31/2018</td>
<td>From Date: 6/1/2018 To Date: 7/31/2018 Report By: 8/31/2018</td>
</tr>
<tr>
<td>Passive</td>
<td>Test Event 2</td>
<td>Bulletin #5</td>
<td>This is a test event.</td>
<td>From Date: 7/1/2018 To Date: 8/31/2018 Report By: 9/30/2018</td>
<td>From Date: 8/1/2018 To Date: 9/30/2018 Report By: 10/30/2018</td>
<td>From Date: 9/1/2018 To Date: 10/30/2018 Report By: 11/30/2018</td>
</tr>
<tr>
<td>Active</td>
<td>May 20th Test Event</td>
<td></td>
<td>Usually performed on Testing</td>
<td>From Date: 10/1/2018 To Date: 11/30/2018 Report By: 12/31/2018</td>
<td>From Date: 11/1/2018 To Date: 12/31/2018 Report By: 1/31/2019</td>
<td>From Date: 12/1/2018 To Date: 1/31/2019 Report By: 2/28/2019</td>
</tr>
<tr>
<td>Passive</td>
<td>May 20th Test Event</td>
<td>Bulletin #6</td>
<td>This is the May 20th test event.</td>
<td>From Date: 1/1/2019 To Date: 2/28/2019 Report By: 3/31/2019</td>
<td>From Date: 2/1/2019 To Date: 3/31/2019 Report By: 4/30/2019</td>
<td>From Date: 3/1/2019 To Date: 4/30/2019 Report By: 5/31/2019</td>
</tr>
<tr>
<td>Active</td>
<td>May 20th Test Event for the MB</td>
<td>Bulletin #7, Bulletin #8, Bulletin #9</td>
<td>This is the May 20th test event for the MB.</td>
<td>From Date: 4/1/2019 To Date: 5/31/2019 Report By: 6/30/2019</td>
<td>From Date: 5/1/2019 To Date: 6/30/2019 Report By: 7/31/2019</td>
<td>From Date: 6/1/2019 To Date: 7/31/2019 Report By: 8/31/2019</td>
</tr>
</tbody>
</table>
Severe Event View Report

This screen allows you to view all completed reports that you filed. If you are referenced in another report as part of a group, you will not be able to see that report. Select a report from the drop down list to view.
Here is a sample view report.

Reporting Data for Severe Event Pursuant to COMAR 31.01.02.47

Please select a report from the list to view the Severe Event information.

If you do not see the Severe Event and/or filing period in the drop-down list that you wish to view, one or the following two possibilities may have occurred:

- You may not have filed the report for the specified period or
- Another company from your group (applicable to group filing only) may have filed the report on your behalf. You cannot view a report filed by another company that included you in the report as a group filing.

- Bulletin #: Bulletin 9-11-16
- Bulletin #: Bulletin P.12-16
- Description: This is a test hurricane.
- Report by Date: 5/01/2014

Company Information

- Company Name: Allstate Fire and Casualty Insurance Company
- NAIC/License #: 29688
- FEIN #: 84-2159038
- Filing As Group: Yes
- Allstate Insurance Company (99212)
- Companies Included:
  - Esurance Home and Auto Insurance Company (11325)
  - Esurance Insurance Company (21358)
  - Esurance Property and Casualty Insurance Company (30213)
- User Login: MIA0200
- Date Created: 4/29/2014
- Date Submitted: 5/16/2014
- Date Modified: 5/16/2014
- Modified By: SEAdmin

Staff Contact Responsible for providing this Severe Event Information

- First Name: [Redacted]
- Middle Initial: A
- Last Name: [Redacted]

Staff Contact Mailing Address

- Address 1: 100 S. Baltimore St.
- Address 2: Suite 101
- City: Baltimore
- State: MD
- Zip Code: 21201
- Email Address: [Redacted]
- Phone / Ext: 410-468-0001 / 1051

Claims:

<table>
<thead>
<tr>
<th>Line of Business</th>
<th>Outside of Maryland</th>
<th>Zip Code/County</th>
<th>Number of Claims</th>
<th>Percentage of Claims</th>
<th>Comments for Percentage of Claims</th>
<th>Amount Paid to Date</th>
<th>Average Time to Close Claims</th>
<th>Comments for Avg Time to Close Claim</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercial Claims - Other</td>
<td>Yes</td>
<td>MD</td>
<td>10</td>
<td>10.00</td>
<td>100.00</td>
<td>$12,345.67</td>
<td>2.00 days</td>
<td></td>
</tr>
<tr>
<td>Property Loss</td>
<td>Yes</td>
<td>VA</td>
<td>1</td>
<td>100.00</td>
<td>490.00</td>
<td></td>
<td>1.00 days</td>
<td></td>
</tr>
<tr>
<td>Farm Claims</td>
<td>No</td>
<td>VA</td>
<td>10</td>
<td>10.00</td>
<td>100.00</td>
<td>$12,345.67</td>
<td>2.00 days</td>
<td></td>
</tr>
<tr>
<td>Homeowners Claims</td>
<td>No</td>
<td>MD</td>
<td>50</td>
<td>20.00</td>
<td>100.00</td>
<td>$12,345.67</td>
<td>3.00 days</td>
<td></td>
</tr>
</tbody>
</table>
Total Maryland Claims:

Number of Claims: 4001
Percentage Now Closed: 96.87%
Amount Paid to Date: $5,735,838.33
Avg. Time to Close Claim (Days): 99.41
Severe Event About

This screen displays all the Terminology and Definitions as well as input criteria.

**About. Severe Event Report Application**

1. **Lines of Business:** Terminology and definition

   - **Business Interruption Insurance:** means insurance that covers the loss of income, continuing fixed expenses, or extra expenses a business suffers after a disaster while its facility is either closed because of the disaster or in the process of being rebuilt after the disaster.

   - **Commercial Auto Insurance:** means liability and physical damage insurance that covers vehicles used for commercial purposes.

   - **Commercial Property Insurance:** means all property not categorized as residential property. This does not include claims for business interruption insurance.

   - **Farm Owners Insurance:** means insurance that provides liability coverage and a coverage for damage to physical structures and other property located on a farm.

   - **Homeowners Insurance:** means insurance for a residential property provided under a homeowner’s insurance policy: condominium owner’s policy; mobile homeowner’s policy; renter’s policy; or a noncommercial farm owner’s policy.

   - **Private Passenger Auto Insurance:** means liability and physical damage insurance that covers a vehicle driven for personal use. This includes automobiles, motor cycles and recreational vehicles.

   - **Privately Issued flood Insurance:** means specific insurance coverage against property loss from flooding under any policy or endorsement, issued by an entity other than the National Flood Insurance Program (NFIP).

   - **Workers’ Compensation Insurance:** means insurance providing wage replacement and medical benefits to employees injured in the course of employment in exchange for mandatory relinquishment of the employee’s right to the employer’s employer for the tort of negligence. This includes associated employer’s liability coverage.

   - **All other lines:** means any line of business or coverage that is not included in the above list for which claims attributable to the severe event subject to a data call were reported. This does not include mortgage/financial guaranty, title, fidelity, surety, medical malpractice or professional liability lines of insurance.

2. **Supply the following by zip code or county for each line of business:**

   - **Number of claims received:** This means all claims reported regardless of whether a payment was received.

   - **Amount paid on claims to date:** The dollar amount paid on claims to date.

   - **Number of claims closed with payment:** This includes all claims closed where a loss payment was made regardless of the date of loss or when the claim was received. This does not include claims closed where loss adjustment expense was incurred but no payment to the insured was made.

   - **Number of claims closed without payment:** This includes all claims closed where no loss payment was made regardless of the date of loss or when the claim was received. This means all claims closed where loss adjustment expense was incurred but no payment to the insured was made.
Severe Event Contact Us

This screen displays our phone number and email.

Contact

Phone: 410-468-2200
Severe Event Email: severe.im.miss@maryland.gov