NAIC BLANKS (E) WORKING GROUP

Blanks Agenda Item Submission Form

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**FOR NAIC USE ONLY**

<table>
<thead>
<tr>
<th>Agenda Item # 2011-21BWG MOD</th>
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<tr>
<td>Changes to Existing Reporting</td>
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<td>New Reporting Requirement</td>
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**REVIEWED FOR ACCOUNTING PRACTICES AND PROCEDURES IMPACT**

| No Impact | [ X ] |
| Modifies Required Disclosure | [ ] |

**DISPOSITION**

| [ ] Rejected For Public Comment |
| [ ] Referred To Another NAIC Group |
| [ ] Received For Public Comment |
| [ X ] Adopted Date 06/30/2011 |
| [ ] Rejected Date |
| [ ] Deferred Date |
| [ ] Other (Specify) |

**BLANK(S) TO WHICH PROPOSAL APPLIES**

| [ X ] ANNUAL STATEMENT |
| [ X ] INSTRUCTIONS |
| [ ] QUARTERLY STATEMENT |
| [ ] CROSSCHECKS |

- [ ] Life and Accident & Health
- [ ] Property/Casualty
- [ ] Fraternal
- [ ] Health
- [ ] Title
- [ ] Other Specify

Anticipated Effective Date: **Annual 2011**

**IDENTIFICATION OF ITEM(S) TO CHANGE**

Clarify and add crosschecks to the existing instructions. Remove Column 34 for Schedule P, Parts 1, 1A and 1B. Add two columns for development for Schedule P, Parts 2 and 3. Add new Schedule P, Parts 4A, 4B, 4C, 5A, 5B and 5C.

**REASON, JUSTIFICATION FOR AND/OR BENEFIT OF CHANGE**

- Expand and clarify the instructions. Add badly needed cross checks.
- Part 1, Part 1A and Part 1B – Columns 30 and 31, calculate loss ratios using premium without other income. This makes loss ratios for a company consistent year-to-year and by segment. Presently loss ratios for a company can be distorted when the company’s proportion of business written directly changes. Column 34, pooling percentage, is removed. This column has not been used by title insurers.
- Part 2 and Part 3 – add Columns 11 and 12 showing L&LAE reserve development.
- Part 4A, Part 4B and Part 4C – add policy year claim count development schedules similar to the P&C Schedule P.
- Part 5A, Part 5B and Part 5C – add report year claim count development schedules similar to the P&C Schedule P.

**NAIC STAFF COMMENTS**

Comment on Effective Reporting Date: **Annual 2011 should not be a problem.**

Other Comments:

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**This section must be completed on all forms.**

**Revised 6/13/2009**

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ANNUAL STATEMENT INSTRUCTIONS – TITLE

SCHEDULE P

There are four parts and the interrogatories within Schedule P. Part 1 provides detailed information on losses and loss expenses. Part 2 provides a history of incurred losses and loss expenses on a policy year basis. Part 3 provides a history of incurred losses and loss expenses on a report year basis. Part 4 provides a history of claim counts on a policy year basis. Schedule P Interrogatories provides for additional calculation and explanation of various amounts. Part 5 provides a history of claim counts on a report year basis. If the company is unable to provide any part of the data required in Schedule P for years prior to 1994, the company must obtain a letter of waiver from its domiciliary commissioner. A copy of this letter must be included with the company’s annual statement. Data for 1994 and subsequent should be provided in complete detail except for unallocated loss adjustment expenses (ULAE) that should be in complete detail for 1996 and subsequent.

Schedule P includes only the data for the insurer identified on the Jurat Page of the annual statement. Do not include consolidated data for affiliated companies. If the insurer participates in a pooling agreement, it should report only its share of the business, not the total of all participants.

In those instances where an insurer files an amended annual statement as a result of a restatement of prior year written premium, losses or loss adjustment expenses, Schedule P must be restated and included in the amended Annual Statement. In those instances where one title insurer is merged into another title insurer, Schedule P must be prepared so it includes the entire combined history of both companies.

Schedule P, Parts 1 and 2, are organized on a “calendar year” basis so that Written premium and other income for a year are matched with corresponding losses and allocated loss adjustment expenses (ALAE) and unallocated loss adjustment expenses for policies issued during that year. Experience is shown for direct business, reinsurance assumed, reinsurance ceded, and net of reinsurance.

Written premium and other income is on a calendar year basis, and should reconcile with the totals on Schedule T.

Policy year loss and loss adjustment expense payments and reserves should be assigned to the year in which the policy was written under which coverage is triggered. Payments and reserves for escrow and defalcation loss and loss adjustment expenses should be assigned to the year of the associated title insurance order or, if the year is unknown, to the year the defalcation or escrow loss was first known by the company.

Part 2 displays twenty-year loss development triangles on a policy year basis. Part 3 displays a ten-year loss development triangle on a report year basis. In Parts 2 and 3, Losses are combined with ALAE and are net of reinsurance. Loss and ALAE development is shown for total incurred, payments, case basis reserves, bulk reserves and incurred but not reported (IBNR) reserves (policy year basis only). Part 4 displays twenty-year claim count development triangles on a policy year basis.

Schedule P includes only the data for the reporting entity identified on the Jurat Page of the annual statement. Do not include consolidated data for affiliated companies. If the reporting entity participates in a pooling agreement, shown only its share of the business, not the total of all participants.

Written premium and other income is on a calendar year basis, and should balance to Schedule T. Policy year losses incurred should be assigned to the year in which the policy was written under which coverage is triggered.

For report year development, group the claims by year in which the claim was first reported.

Title insurance losses should include all losses on any transaction for which a title insurance premium, rate or charge was made or contemplated. Escrow losses for which the company is contractually obligated should be included. Losses arising from defalcations for which the company is contractually obligated should be included.

Allocated loss adjustment expenses are those that can be related to specific claims and include fees, salaries, overhead and expenses of lawyers for legal services in defense, trial or appeal of suit, other legal services rendered in connection with title claims, and general court costs and fees together with appeal costs and expenses. Allocated loss adjustment expenses should include all costs associated with attorneys involved in litigation of specific claims whether such attorneys are engaged as outside counsel or salaried employees of a reporting entity. Allocated loss adjustment expenses also include any fee or expense, other than claim adjuster services, which is directly attributable to the defense of a particular claim.
Allocated loss adjustment expenses for reinsurance assumed and ceded should be reported in accordance with the terms of the applicable reinsurance contracts. In addition, an assuming reinsurer that incurs allocated loss adjustment expenses in its adjustment of reinsured losses should report ALAE in the manner described above for direct losses.

Unallocated loss adjustment expenses are those expenses, other than allocated loss adjustment expenses, that are assigned to the expense group “Loss Adjustment Expenses.” As an example, the costs related to salaried employees of the insurer involved in the management of claims are included in this category.

Loss and loss adjustment expense reserves are to be presented on a non-discounted basis. The reserves reported are expected to represent the ultimate amounts to be paid, including anticipated inflation.

Discounting of loss and loss adjustment expense reserves is allowed only if expressly permitted by the state insurance department to which this annual statement is being filed. If discounting of loss and loss adjustment expense reserves is reflected on Page 3 of this annual statement, reconciliation is provided in Schedule P, Part 1. Work papers relating to any discount amounts must be available for examination upon request.

Salvage and subrogation should be determined in accordance with SSAP 57, reflected using the following rules:

1. Paid losses must be reported net of realized, but not anticipated, salvage and subrogation. Case basis loss and loss adjustment expense reserves must not be reduced on account of anticipated salvage and subrogation.

2. Paid salvage and subrogation is not realized until a salvage asset or an actual payment pursuant to a subrogation right is in the direct control of the reporting entity and is admissible as an asset for statutory reporting purposes in its own right.

3. Salvage assets and payments pursuant to a subrogation right are to be booked at current market value. Current market value or real estate is to be established through an appraisal conducted by a qualified independent appraiser.

4. If a salvage asset is sold or revalued by the reporting entity within twelve months or realization for an amount less than the value at which it was originally placed on the books of the reporting entity, then the loss on disposition is to be treated as a decrease in paid salvage (same effect as an addition to the paid loss) on the corresponding claim. After twelve months, such salvage revaluation will be treated as a loss on disposition or change in value of an asset, and is not to be deducted from the salvage on the corresponding claim.

5. If a salvage asset is sold or revalued by the reporting entity within twelve months of realization for an amount greater than the value at which it was originally placed on the books of the reporting entity, then the gain on disposition is to be treated as an increase in paid salvage (same effect as a deduction to the paid loss) on the corresponding claim. After twelve months, such salvage revaluation will be treated as a gain on disposition or change in value of an asset, and is not to be added to the salvage on the corresponding claim.

6. IBNR reserves may make a provision for the expected value of future salvage and subrogation on open claims and IBNR claims. This provision must be actuarially determined and should not be based upon current case estimates.

Report all dollar amounts in Schedule P in thousands of dollars ($000 omitted), either by rounding or truncating. All claim counts are to be shown in whole numbers.

The number of claims reported is to be cumulative by policy year. The number of claims reported for each policy year is equal to the number of open claims at the end of the current year plus cumulative claims closed with or without payment for the current and prior calendar years.

For reporting entities reporting on a pooling basis, the pooling percentage should be applied to claim count as well as dollar amounts.

If the company changes its method of counting claims, the new method should be disclosed in the Notes to Financial Statements.
**SCHEDULE P – PART 1**

Part 1 – Summary provides a ten-year summary of loss and ALAE experience for the company. Part 1 – Summary should be equal to the sum of Part 1A and Part 1B. Columnar headings provide instructions necessary for completion.

The “Prior Years” category can be completed using one of the following methods:

1. “Prior Years” consists of all policies issued by the company from inception of the company forward.
2. “Prior Years” consists of all policies issued by the company from 1970 forward.
3. The company can pick a year earlier than 1970 but later than the inception of the company.

Once a method is established, the company should not alter that method at a later date.

The amount of liability to be reported in Column 1 is the policy face amount (net of reinsurance) in those cases not involving a simultaneous issue of multiple policies. In determining the amount of liability to be reported in case of simultaneous issue of an owners policy and a mortgage policy, include the higher liability policy only. This amount is reported in millions of dollars ($000,000 omitted).

Written premiums, other income, losses paid, and unpaid on known claims should reconcile with the Operations and Investment Exhibit.

The known claim reserve includes case basis reserves and “bulk” reserves. “Bulk” reserves are a provision for subsequent development on known claims.

IBNR should make a sufficient provision for ultimate loss and ALAE for unreported or unknown claims.

The net reserve shown in Schedule P, Part 1, Line 12, Column 24 should make a sufficient provision for ultimate loss and LAE for all reported and unreported title insurance claims (including escrow and defalcation claims) for which the company is obligated net of reinsurance. The gross reserves shown in Schedule P, Part 1, Line 12, Column 24 plus Column 19 plus Column 22, should make a sufficient provision for ultimate loss and LAE for all reported and unreported title insurance claims (including escrow and defalcation claims) for which the company is obligated gross of reinsurance ceded.

The work papers showing a reconciliation explaining reinsurance, discounting, and salvage and subrogation adjustments should be available for examination on request.

“Assumed” means reinsurance assumed, including from affiliated pooling agreements.

“Direct” means as directly written. Do not include coverages written as part of an affiliated pooling agreement.

“Ceded” means reinsurance ceded on business so reported as direct or assumed.

Direct, Assumed, and Ceded experience should be provided for Written Premium and Other Income, Loss Payments, Allocated LAE Payments, Known Claim Reserves, and IBNR Reserves.

Loss and ALAE Payments should be reported net of realized salvage and subrogation. Salvage and Subrogation Received represents the cumulative salvage and subrogation realized, as defined in the general instructions to Schedule PSSAP 57. It is shown for reference only and should not be included in the Total Net Paid.

Inception to-date ULAE Payments by policy year should be provided with the allocation of payments to policy year described in the Schedule P Interrogatories.

The known claim reserve includes case basis reserves and “bulk” reserves. “Bulk” reserves are a provision for subsequent development on known claims.

IBNR reserves are a provision for unreported or unknown title insurance claims on all policies issued by the company as of the accounting date.
Unallocated loss expenses unpaid are a provision for ULAE yet to be paid related to claims that are either pending, open or unreported as of the accounting date.

Losses and Allocated Loss Adjustment Expenses ALAE Incurred is the addition of the corresponding Direct, Assumed and Ceded columns for payments, Known Claim Reserves and IBNR Reserves.

Column 2 – Direct Written Premium

Line 11 should equal Schedule T, Line 59, Column 3 plus Column 4 plus Column 5.

Column 4 – Other Income

Line 11 should equal Schedule T, Line 59, Column 6.

Column 17 – Direct Known Claim Reserve

Line 12 should equal Schedule T, Line 59, Column 10.

Column 23 – Unallocated loss Adjustment Expense Unpaid

Line 12 should equal Part 3, Line 25, Column 5.

Column 32 – Net Loss & LAE Per $1000 of Coverage

Amounts used in this calculation should be in whole dollars.

Line 12 – Total

Column 17 plus Column 18 minus Column 19 (net known claim reserve) should equal Line 1 of the Liabilities, Surplus and Other Funds page.

Columns 1 through 29 and Columns 33 and 35 should equal Part 1A plus Part 1B.

SCHEDULE P – PART 1A – POLICIES WRITTEN DIRECTLY

Part 1A provides a summary of loss and ALAE experience for policies written directly.

Policies written directly are those written by home office and owned and operated branch offices of the title insurer.

Refer to Part 1 – Summary for instructions to complete this part.

Column 2 – Direct Written Premium

Line 11 should equal Schedule T, Line 59, Column 3.
SCHEDULE P – PART 1B – POLICIES WRITTEN THROUGH AGENTS

Part 1B provides a summary of loss and ALAE experience for policies written through agents.

Policies written through agents are those written by both affiliated and non-affiliated agency operations.

Refer to Part 1 – Summary for instructions to complete this part.

Column 2 – Direct Written Premium

Line 11 should equal Schedule T, Line 59, Column 4 plus Column 5.

SCHEDULE P – PART 2

Part 2 provides a historical summary of loss and ALAE development by policy year, on a net of reinsurance basis. Columnar headings provide instructions necessary for completion. Column 11 equals Column 10 minus Column 9 for common years (Rows 1 through 20). Column 12 equals Column 10 minus Column 8 for common years (Rows 1 through 19).

The definition of “prior years” should be the same as that used by the company in Part 1.

Part 2 is net of reinsurance. Loss and ALAE payments and reserves should reflect subrogation and salvage according to the rules contained in the general instructions to Schedule P.

For years prior to 1994, some companies did not compute an IBNR reserve. In such cases, the company should display zero IBNR, and make an appropriate disclosure in the Notes to Financial Statements. Some companies compute IBNR in their GAAP annual statements. In such cases, the company should provide IBNR for policy years prior to 1994. The IBNR reserve should not be discounted for investment income.

Columns 1 to 10 should equal the sum of Part 2 should be the addition of Parts 2A, 2B, 2C, and 2D; and Part 2, Column 10 should tie to Part 1, Net Loss and ALAE Incurred.

SCHEDULE P – PART 2A

Part 2A shows cumulative net loss and ALAE payments by year the policy was written as of December 31 of each year shown in Columns 1 to 10. Payments should reflect subrogation, salvage and escrow and defalcation claims according to the rules contained in the general instructions to Schedule PSSAP 57.

Part 2A, Column 10, should equal Part 1, Column 15 minus Column 14.

SCHEDULE P – PART 2B

Part 2B shows case basis reserves by year the policy was written on claims that are open as of December 31 of each year shown in Columns 1 to 10.

SCHEDULE P – PART 2C

Part 2C shows bulk reserves on known claims by year the policy was written for claims that are open as of December 31 of each year shown in columns 1 to 10.

SCHEDULE P – PART 2D

Part 2D shows Incurred But Not Reported (IBNR) reserves as of December 31 of each year shown in Columns 1 to 10. IBNR reserves make a provision for claims not yet reported to the company but can also include other amounts needed to result in an adequate total reserve.

For years prior to 1994, some companies did not compute an IBNR reserve. In such cases, the company should display zero IBNR, and make an appropriate disclosure in the Notes to Financial Statements. Some companies compute IBNR in their GAAP annual statements. In such cases, the company should provide IBNR for policy years prior to 1994. The IBNR reserve should not be discounted for investment income.

Part 2D, Column 10, should equal Part 1, Column 20 plus Column 21 minus Column 22.

SCHEDULE P – PART 3

Part 3 provides a historical summary of loss and ALAE development by report year, on a net of reinsurance basis. Columnar headings provide instructions necessary for completion. Column 11 equals Column 10 minus Column 9 for common years (Rows 1 through 10). Column 12 equals Column 10 minus Column 8 for common years (Rows 1 through 9).

The “Prior Years” category for report year need not be the same as for policy year. Several methods are acceptable, but once established, the company should not alter its method at a later time. The following methods are acceptable:

1. “Prior Years” consists of all claims reported by the company from inception of the company forward.
2. “Prior Years” consists of all claims reported by the company from 1980 forward.
3. The company can pick a year earlier than 1980, but later than the inception of the company.

Part 3 is net of reinsurance. The treatment of salvage and subrogation should be the same as Parts 1 and 2.

Part 3 may not reconcile with Part 1 - Summary due to differences in the meaning of “prior years.”

Part 3, Columns 1 to 10 should equal sum of Parts 3A, 3B, and 3C.

SCHEDULE P – PART 3A

Part 3A shows cumulative net loss and ALAE payments by year the claim was reported as of December 31 of each year shown in Columns 1 to 10. Payments should reflect subrogation, salvage and escrow and defalcation claims according to the rules contained in the general instructions to Schedule PSSAP 57.

Part 3A total of Column 10, should equal Part 1, Line 12, Column 15 minus Column 14. However, Part 3A may not reconcile with Part 1 - Summary due to differences in the meaning of “prior years” resulting in a validation error and would be an acceptable explanation of the error for the Validation Error Explanation Text File submitted as part of the statement filing.
SCHEDULE P – PART 3B

Part 3B shows case basis reserves by year the claim was reported on claims that are open as of December 31 of each year shown in Columns 1 to 10.

Part 3B, total of Column 10 plus Part 3C, total of Column 10, should equal Part 1, Line 12, Columns 17 plus Column 18 minus Column 19.

SCHEDULE P – PART 3C

Part 3C shows bulk reserves on known claims by year the claim was reported for claims that are open as of December 31 of each year shown in Columns 1 to 10. Bulk reserves provide for subsequent development on known claims and do not make a provision for claims not yet reported to the company. A company is not required to carry bulk reserves.

SCHEDULE P – PART 4

Part 4 provides a historical summary of direct claim count development by policy year. Columnar headings provide instructions necessary for completion.

The definition of “prior years” should be the same as that used by the company in Part 1.

Part 4 is gross of reinsurance

SCHEDULE P – PART 4A

Part 4A shows cumulative reported claim counts on a direct basis by year the policy was written as of December 31 of each year shown in Columns 1 to 10.

Part 4A, Column 10 should equal Part 1, Column 16.

SCHEDULE P – PART 4B

Part 4B shows cumulative claims closed with loss payment on a direct basis by year the policy was written as of December 31 of each year shown in Columns 1 to 10.

Part 4B, Column 10 should equal Part 2A, Column 11.

SCHEDULE P – PART 4C

Part 4C shows cumulative claims closed without loss payment on a direct basis by year the policy was written as of December 31 of each year shown in Columns 1 to 10.

Part 4C, Column 10 should equal Part 2A, Column 12.
SCHEDULE P – PART 5

Part 5 provides a historical summary of direct claim count development by report year. Columnar headings provide instructions necessary for completion.

The definition of “prior years” should be the same as that used by the company in Part 3.

Part 5 is gross of reinsurance.

SCHEDULE P – PART 5A

Part 5A shows cumulative reported claim counts on a direct basis by year the claim was reported as of December 31 of each year shown in Columns 1 to 10.

SCHEDULE P – PART 5B

Part 5B shows cumulative claims closed with loss payment on a direct basis by year the claim was reported as of December 31 of each year shown in Columns 1 to 10.

Part 5B, Column 10, should equal Part 3A, Column 11.

SCHEDULE P – PART 5C

Part 5C shows cumulative claims closed without loss payment on a direct basis by year the claim was reported as of December 31 of each year shown in Columns 1 to 10.

Part 5C, Column 10, should equal Part 3A, Column 12.
### SCHEDULE P – PART 1 – SUMMARY

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<th>IBNR Reserves</th>
<th>Unallocated Loss Expense Unpaid</th>
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<th>Total Net Loss Expense Paid (Cols. 7+8+10+11-9+12+14)</th>
<th>Allocated LAE Payments</th>
<th>Unallocated LAE Payments</th>
<th>Net Loss &amp; LAE Per $1000 of Coverage</th>
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### SCHEDULE P – PART 1A – POLICIES WRITTEN DIRECTLY

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<tr>
<th>Years in Which Policies Were Written</th>
<th>Premiums Written and Other Income</th>
<th>Loss and Allocated Loss Adjustment Expenses Payments</th>
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© 2011 National Association of Insurance Commissioners  187
**SCHEDULE P – PART 1B – POLICIES WRITTEN THROUGH AGENTS**

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- (Cols. 26-29) are (Cols. 26-29) + (Cols. 30-31) - (Cols. 32-33)
- (Cols. 32-33) are (Cols. 32-33) + (Cols. 34-35)

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