INSURANCE BUREAU OF CANADA — BUREAU D'ASSURANCE DU CANADA

AUTOMOBILE STATISTICAL PLAN 2008

FREQUENTLY ASKED QUESTIONS

July, 2008

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Frequently Asked Questions

1. EDITING PROCEDURE

1.1. *Is FSA validated against Statistical Territory?*

No; FSA is checked against Province (which is derived from Statistical Territory).

1.2. *Is FSA validated against the street address?*

No; FSA check against Canada Post postal code table which are updated once a month.

1.3. *What happens if we continue to report data that has a stop date?*

Data that has a stop date associated with either the value or the field can no longer be reported and affected fields MUST be left blank. Reporting data after the stop date will result in an error.

1.4. *Is there a summary of hard and soft errors in the 2008 reportings?*

All errors are hard errors, with the following exceptions:

- VIN algorithm errors for Ontario non-Private Passenger Vehicles
- VIN algorithm errors outside Ontario
- VIN and Vehicle Code/Model Year consistency errors for Ontario non-Private Passenger Vehicles
- VIN and Vehicle Code/Model Year consistency errors outside Ontario
- RIN algorithm errors
- Driver License Number algorithm errors for Third Party Accident Driver.

1.5. *What happens when data is reported in fields where such data is not required according to the ASP?*

Reporting data or values where such data is not required will result in an error, because otherwise it would result in unintended consequences in various downstream processes, such as regulatory exhibits, CLEAR and various fraud detection and underwriting tools used on a daily basis by the industry in serving the consumer.

Both the *Automobile Statistical Plan* and the *Edit Rules Documentation* identify all the situations where data is required and the valid values. Acceptable default values of blank or zero are also noted. Reporting data or values not specifically noted in the documentation will result in an error.

2. ERROR PROCESSING

2.1. ***Do we still have 30 days to correct errors?***

Yes; although the requirement to report the original submission was changed some time ago to 15 days after the end of the month being reported, 30 days are still allowed for correction of errors. Refer to Bulletin AU-2005-01.

3. FIELD FORMATS AND DEFINITIONS

3.1 ***What is the difference between a standard and a non-standard deductible?***

Deductibles are used for physical damage coverages (including DCPD) and are reported as the actual dollar values used in rating the risk. Distinctions are made between "standard" and "non-standard" deductibles; this distinction is related to the type of the deductible and NOT to the amount of the deductible.

A **standard deductible** is one with a fixed dollar value that is the same whether one is rating the risk or adjusting a claim. Waiving of the deductible in certain claim situations does not make an otherwise standard deductible into a non-standard deductible.

Whether or not a deductible is standard is NOT related to the amount of the deductible; for example, both a fixed-dollar $500 deductible and a fixed-dollar $650 deductible would be considered standard deductibles. A deductible calculated as a percentage of the price of the vehicle is a standard deductible and must be expressed as a dollar amount for reporting purposes.

A **non-standard deductible** is any deductible that cannot be categorized as a standard deductible, which is the same whether one is rating the risk or adjusting a claim. Examples of such deductibles include disappearing deductibles, which vary with the size of the claim, and discounted deductibles, where the actual deductible on claims would vary according to the claimant's driving experience.

3.2 ***How is "group marketing" defined?***

Referred to in subsection 16(5) of the Ontario Insurance Act, a "group marketing plan" is an arrangement made in writing between an insurer and a sponsor to market automobile insurance to members of an organized group.

3.3 ***What is the definition of Years Licensed, including when there has been a suspension?***

Report the number of years the operator has been legally permitted to operate a vehicle in Canada or the United States (i.e., excluding any amount of time the license was suspended).

3.4 ***How do we report the number of years claim-free?***

If the rated operator is the principal operator, report the number of years of claim-free private passenger vehicle, moped or on-road motorcycle operation of the operator with the least number of years of claims-free experience, excluding any separately rated occasional operators.

If the rated operator is a separately rated occasional operator, report the number of years of claim-free private passenger vehicle, moped or on-road motorcycle operation of the operator with the least number of years of claim-free experience of all occasional operators on the policy to whom the separate rate applies.

3.5 ***The documentation states that we will need to provide the G2 license date, but the MVR abstracts provide only the G1 license date. Therefore, won't it be difficult to obtain and provide the G2 date?***

The definition in the ASP is meant to standardize the definition of Number of Years Licensed at the request of industry representatives. It should be the number derived from the application form and used by the insurer in rating the risk.

3.6 ***We will have to begin reporting the postal code of where the vehicle is garaged or "primarily used." Can you clarify what will be considered "primarily used?"***

An insurer may rate the vehicle using a location that is different from the garaging location because it is the location where the vehicle is driven or primarily used. Both the Statistical Territory and Postal Code FSA reflect the location the company uses to rate the risk. Therefore, the definition of "primarily used" for the purposes of Postal Code FSA is identical to its definition for the purposes of Statistical Territory in the current Statistical Plan.

3.7 ***What is meant by "clean" in the FA Clean Driver indicator?***

It varies by province. Companies should check FA Rule 102.B, which in Ontario reads as follows:

"Clean Driver Discount

Where a risk meets the following requirements, a 10% discount shall be applied to the Liability, Accident Benefits, UA, DCPD and Collision or Collision portion of All Perils premiums.

- No regular or frequent driver of the vehicle has had any major, minor or serious convictions in the 36 months immediately preceding the commencement of the insurance.
- No at fault accidents have been assigned to the vehicle or its substitute within the 60 months preceding the commencement of the insurance.
- No cancellations for non-payment have been assigned to the Applicant within the 36 months immediately preceding the commencement of the insurance.
- All drivers of the vehicle hold a valid Canadian driver's license."

3.8 **D*oes the new field "FA Clean Driver indicator" apply to Risk Sharing Pool policies?***

Not at this time; the Automobile Statistical Plan does not collect information for the Risk Sharing Pools.

3.9 ***My interpretation of the Trailer Indicator is as follows: The indicator is 'Y' when type of use = 65, and is 'N' in all other cases. Is this correct?***

No. The Trailer Indicator is used to signify that the reported information reflects an attached trailer (e.g., utility trailer, tent trailer, snowmobile trailer, etc.). Type of Use 65 signifies an unattached trailer home, which is NOT considered an attached trailer.

3.10 ***What is the format you are expecting for the reporting of deductible amounts?***

Deductible amounts are numeric and are reported right-justified and zero-filled.

3.11 ***How do we report a 4-character vehicle code in the new 6-character field?***

The Vehicle Code field has been expanded for future use. Report the existing 4-character vehicle codes left-justified and blank-filled.

3.12 ***What type of claims should we consider when calculating Number of Years Claims Free***

The Automobile Statistical Plan has been amended to include the following paragraph:

"For purposes of coding Number of Claims and Number of Years Claims Free for an operator, a claim means a claim, which was either closed with indemnity payment or remains open, for damages under Third Party Liability (including Direct Compensation) or Collision (including collision portion of All Perils) coverage, arising, in one occurrence, out of the ownership, use or operation, by the operator, of an automobile, moped or on-road motorcycle, where the user or operator of such vehicle at the time of the occurrence was deemed not to be fault-free."

3.13 ***The ERD documentation refers to "Loss or Expense Amount > 0, what if the amount is less than zero?***

All edits are performed on the absolute value of the number being reported without regard to Transaction Type (i.e. Debit/ Credit transactions).

3.14 ***Certain fields, such as Kind of Loss Codes, have been expanded. Are there plans for using the expanded positions?***

No, not at the current time. The fields were expanded for future use. Once that use is determined, companies will be given sufficient notice.

3.15 ***In Appendix B of the Edit Rules Documentation there appears to be new driver license formats for certain provinces; are there new formats added?***

There are no new formats added; all existing provincial formats were verified with respective provincial authorities and the changes reflect streamlining the formats.

3.16 ***What is to be reported in a field, if it is not required for a particular Province or Policy Date?***

If a field is not required, it must be left blank, otherwise an error will be raised; e.g. First Chance New Driver Discount is only required in New Brunswick, for Individually Rated Private Passenger Vehicles on policies on and after Jan. 1, 2005; in all other conditions this field must be left blank.

3.17 ***Do we use the Fill-character if we have no value for the field?***

The Fill Character referred to in the Automobile Statistical Plan denotes the character used to fill the field when the value doesn't occupy the entire field. It does NOT signify a default value, i.e. if a field is not required it must be left blank (see. 3.16 above).

3.18 ***Can I report Retiree Discount with all coverages?***

Retiree Discount is only applicable to Accident Benefits Coverage in Ontario, for Individually Rated Private Passenger Vehicles on policies on and after Jan. 1, 1997. In all other conditions this field must be left blank (including conditions where Accident Benefits Premium/ Claim Coverage code is NOT reported on the individual transaction).

3.19 ***Why am I getting errors when I report zeroes in the Rate Group fields?***
Rate Groups are implemented in the Automobiles Statistical Plan at the request of GISA for future use. Ample lead time will be provided for implementation of these fields but until such time, the fields must be left blank.

3.20 ***Why am I getting error when I am reporting the new 6-character Vehicle codes? I am using VIC's extended vehicle codes.***

6-character vehicle codes are implemented in the Automobile Statistical Plan for future use. Continue to report the existing 4-character vehicle codes left-aligned, followed by 2 blank characters.

4. FIELD REPORTING REQUIREMENTS

4.1 *GENERAL*

4.1.1 ***Do we report a deductible value for a non-standard deductible?***

Yes; report the value used in rating the applicable physical damage coverage.

4.1.2 ***We don't have the conviction information for the premium transaction until we collect the MVR later, so how do we report this?***

Report the conviction information used to rate the risk. If any new information is obtained after the data is submitted, use an offset/onset transaction to report the change. This is the same procedure used to report a change in location and a change of vehicle.

Please remember that the information on any claims transaction must match the information on the premium transaction.

4.1.3 ***How do we report Retiree Discount, where we don't offer such a discount?***

The Retiree Discount field must be filled in only for individually rated private passenger vehicles in Ontario; outside Ontario and for other classes of vehicles in Ontario, this field MUST be left blank (see also 3.18).

4.1.4 ***Can we continue to report New Brunswick Third Party Liability as one coverage?***

No; for transactions with Policy Effective Dates on or after January 1, 2008, the Third Party Liability premium must be reported split across BI, PD and DCPD (similar to Ontario).

4.1.5 ***How do we report optional Accident Benefits fields in the new 600-byte format?***

These fields have been eliminated in the 600-byte format. This applies to all policies and claims regardless of Policy Effective Dates.

4.1.6 ***For some fields, it is written "Prior to 2008 only." Does that mean that we don't have to fill in those fields for January 2008? And the implementation date has changed to January 7, 2008; so is this now the "before and after" date for everything in the transition guide?***

Third Party Liability limit codes and certain other fields are not to be used for transactions with Policy Effective Dates on and after January 1, 2008; the "prior to 2008" qualifier refers to Policy Effective Dates, NOT to the implementation date of the new system. The fields are provided in the new 600-byte format to allow for reporting of transactions with Policy Effective Dates prior to January 1, 2008. For transactions with Policy Effective Dates on and after January 1, 2008, these fields MUST be left blank.

4.1.7 ***What would be the Driving Record value for type of use '65' now that we are no longer reporting the value '7'?***

Report the Driving Record value used in rating the risk for the applicable coverage.

4.1.8 ***How should the sign (positive or negative) be reported for amount fields?***

The sign applicable to amount fields will be determined by the Transaction Type. Reporting of signed amount fields will result in an error.

4.1.9 ***The Automobile Statistical Plan available from the GISA website does not include the UITS fields and indicate all these as "reserved fields". Are these fields still required?***

The scope of the GISA Automobile Statistical Plan does not include UITS fields which are mandated under the Facility Association Plan of Operation. All UITS fields remain mandatory under that Plan and can be found in the Automobile Statistical Plan available from IBC's web-site.

4.1.10 ***Please clarify reporting of new codes/ values related to policies having Endorsement transactions in 2008.***

All new codes/values apply for transactions with Policy Effective Dates January 1, 2008 and later, except for the new Kind of Loss codes, which are effective with Accident dates January 1, 2008 and later.

4.1.11 ***How do we report conviction information if we receive additional information mid-term.***

If new information is available mid-term, report that information upon renewal, however, if a claim occurs within the current policy terms you must report the same conviction information which you reported on the premium transaction.

4.1.12 ***The Edit Rules Documentation uses Policy Effective Date as a condition related to Third Party Policy Identification, whereas the ASP uses Accident Date. Please clarify.***

The ERD is being amended to use Accident Date for the reporting requirement of Third Party Policy Identification AND Policy Effective Date for the new format for this field.

4.1.13 ***We occasionally have policies with a term greater than 12 months. How are they to be reported, including any claims?***

For policies written with a term of more than 12 months, multiple transactions must be reported for each 12-month (or shorter) term. Any cancellations/endorsements or losses on the policy must be reported with the appropriate Policy Effective Date (e.g., if a claim occurs during the second 12-month term, the Policy Effective Date for the second 12-month term must be reported in the claim transaction). **Please refer to Policy Effective Date in ASP Chapter 4 – Field Definitions.**

4.1.14 ***How can I report coverage extension endorsements and premium adjustment without submitting offset/onset transactions?***

We are developing an alternative process to report these transactions to allow insurers to report minor premium changes in one transaction, without the need for off-setting previously reported information. This will be accomplished using two new Transaction Types, "4" and "M", they can be reported with exposure = 00000 and no other changes in coverage and classification information.

Because of a number of high-priority changes which must be implemented prior to implementation in January 2008, this new process can not be implemented until later in the Spring of 2008. We will develop an interim process to be employed by companies who choose to report in this manner.

Refer to Bulletin DQ-2007-21 for more details.

4.1.15 ***Why am I getting errors when I report a re-instatement policy mid-term?***

Transaction Types 1 and 3 (FA only) should only be used for new and 'full-term' reinstatement policies, for other than 'full-term' (i.e. a re-instatement with an effective date different from the Policy Effective Date) use Transaction Type 2.

4.1.16 How do I report an endorsement that has a premium such as OPCF 20, 27, 43?

You have 2 options:

1) You can blend the premium for the endorsement with the premium of the controlling coverage.
Example:
OPCF 20, has a premium of $25.00, and your Collision has a premium of $300, report one premium of $325 under correct Collision deductible code (30 or 39)

2) You can report the premium for the OPCF 20, on a separate record with an exposure equal to zero, and coverage code equal to the same coverage code of the controlling coverage on the vehicle. If you chose this method you must use transaction type 4 for debit transaction, and M for a credit transaction. Transaction type "4" and "M" are used to report adjustments to previously reported amounts; therefore exposure is not required on these transactions.

4.1.17 ***What kind of endorsements do I report with Transaction Types 4/M and what is meant by "a minor premium adjustment"?***

The kind of endorsements which can be reported with Transaction Type 4/M and zero exposure are those endorsements with only premium adjustments and no other changes to the risk. E.g. a change to deductible/ limit, change of vehicle or change in location can NOT be reported in this manner since other information has changed; these types of transactions must be reported as offset/ onset (offsetting the previous information and reporting the new information for the unexpired term).

The reference to minor premium adjustments is noted, since any significant premium adjustment would likely be as a result of other information changing.

4.2 *FLEETS*

4.2.1 ***What should be reported in the Driving Record field for fleets on policies with Policy Effective dates on and after 20080101?***

Driving Record is not required for fleets and MUST be left blank.

4.2.2 ***What should be reported in the Vehicle Location Code field for fleets?***

This is similar to reporting of Statistical Territory and MUST reflect the garaging or principal use of the vehicle; in the case of a multi-location fleet it should reflect the head-office location.

4.2.3 ***What should be reported in the Collision/All Perils/Comprehensive Deductible Amount field for fleets?***

Report the specific deductible amount used in rating the risk. Refer to the definition of deductibles in question 3.1.

4.3 *ATTACHED TRAILERS*

4.3.1 ***What is a trailer?***

A trailer is a unit that does not have a motor, and needs to be attached to a vehicle to be moved.

4.3.2 ***Is operator information required for trailers?***

No; operator information is not required for trailers and the fields MUST be left blank.

4.3.3 ***How do I correctly report a trailer?***

Type of use for a trailer has to match the same type of use as the vehicle towing the trailer.
The only time this rule is different is if the trailer is a camper unit where the sides, roof and bottom, are all hard. (tent trailers are not classified as a camper trailer) A camper unit has its own type of use - 65.
As of Policy Effective date 20080101 and later the Driving record is to also match the same driving record as the towing vehicle.
A new field called Trailer Indicator must be reported as "Y"

Exposure must be reported.
Vehicle code - use the same vehicle as the towing vehicle OR use a vehicle that starts with a TXXX, and followed by 3 numeric values of your choice.

4.3.4 ***What Driving Record value must be reported for attached trailers?***

Report the Driving Record value used in rating the towing vehicle for the applicable coverage.

4.3.5 ***If the attached trailer is part of a fleet, do we report the driving record?***

No, driving record is not reported for fleets on policies with Policy Effective dates on and after 20080101.

4.3.6 ***Do we have to report exposure on attached trailers?***

Yes, exposure is mandatory on an attached trailer reported on a transaction with a policy effective date of 20080101 and later.

4.4 *FACILITY ASSOCIATION*

4.4.1 ***How do we report FA fields if we are not a servicing carrier?***

If you are not a Facility Association Servicing Carrier, these fields MUST be left blank.

4.4.2 ***What do we report in the Insurance Fraud Convictions field?***

This applies to individually rated policies for Facility Association Servicing Carriers only and MUST be left blank in other situations.

4.5 *UITS*

4.5.1 ***In regard to the requirement to report both the VIN and the RIN: When a vehicle is leased, the RIN on the vehicle portion of the ownership is different than on the plate portion. Do you know which RIN should be reported?***

The RIN field is required ONLY on fleet transactions and ONLY in Ontario. For individually rated vehicles – Type of Business = 0, 1, 2, 8 or 9 – this field MUST be left blank. If Type of Business is 4, you have the option to report the RIN or the VIN if the fleet is reported on a per-car basis. When reporting the VIN, the RIN field could have either the RIN value or be left blank. If

Type of Business is 3 (including bulk-rated fleets), the VIN field should always be NOT APPLICABLE and the RIN MUST be reported (see exceptions in the *Statistical Plan*).

4.5.2 ***Will the RIN be required for all vehicles or just new business?***

RIN has been required for transactions since 2001 and is required for all fleet-rated vehicles in Ontario.

4.5.3 ***When are we supposed to fill in the Registrant Identification Number (RIN) field or the Vehicle Identification Number (VIN) field or both?***

For individually rated vehicles, VINs MUST be reported. For fleets, the RIN MUST be reported if VINs are not available. For fleets rated on a bulk basis, the RIN MUST always be reported. Please note that the VIN field can not be left blank.

4.5.4 ***Do we have to report VINs on vehicles that are unplated and unregistered?***

Yes; for individually rated vehicles, VINs must be reported whether the vehicle is plated/unplated or registered/unregistered. Refer to question 4.5.3 above.

4.5.5 ***What should I do if a VIN is less than 17 characters with a model year 1981 or newer?***

Verify with the insured that the VIN is in fact less than 17-characters.
If the vehicle is from a foreign market you need: pictures of the VIN, certificate of origin, bill of sale. Send this information to VIC (vic@ibc.ca) for investigation. If the investigation results are that the VIN is correct, VIC will add it to the exception file.

4.5.6 ***What should I do if a VIN does not pass the algorithm check edit?***

Verify with the insured that the VIN is correct. If the VIN is correct please provide pictures of the VIN, certificate of origin, bill of sale and send this information to VIC (vic@ibc.ca) for investigation. If the investigation results are that the VIN is correct, VIC will add it to the exception file.

4.5.7 ***What should I do if a VIN does not pass the Vehicle Code consistency edit?***

As long as the VIN is not from a foreign market, re-check the VIN with the vehicle and not with the ownership. Then send the Make, Model and year to VIC (vic@vic@ibc.ca) for it to be added to the database.

5. IMPLEMENTATION

5.1 ***Are companies in run off required to submit data in the new format? They have no data with Policy Effective Dates in 2008.***

Because run-off companies will not have new policies in 2008 and later, the new data requirements do not apply to them. Run-off companies may continue to report in the existing 450-byte record format. However, starting in January 2008, their files must be submitted using the new naming convention and one of the new file transfer mechanisms.
Companies may receive some error to tightening of edit rules.

5.2 ***Can we report old claims in the new 600 – character format?***

Yes; in fact starting with January 2008 entry dates, all claims data MUST be submitted in the new record format regardless of Policy Effective Date. Please note that certain existing fields have been expanded.

6. SUBMISSION REQUIREMENTS

6.1 ***If the Secure File Transfer option does not work, can we use one of the other options?***

Yes; there are three methods reporting companies can use to transmit new Automobile files securely to IBC:

a. Site-to-Site VPN
b. Web Browser
c. Web Services

Please consult the *Data Submission Requirements Manual* for details on the various methods.

6.2 ***If IBC receives the same file twice, how will IBC handle the second file?***

The procedure is the same as today; that is, if the batch trailer information is identical to that of a previously reported batch, the file will be placed on hold for confirmation with the company.

6.3 ***How do I add the Plan and Kind to the header?***

The last qualifier of the dataset name identifies the Plan and Kind. Detailed information about the naming convention and submission requirements can be found in the *Data Submission Requirements Manual*.

6.4 ***Will there be one FTP site?***

There will be two FTP sites. A new FTP site will accept the new automobile submissions. The existing FTP site will remain available to accept non-automobile submissions.

6.5 ***How do we identify a "test" submission?***

"Test" submissions will be reported on a separate file from production submissions and will be identified by a qualifier in the file name, as defined in the *Data Submission Requirements Manual*.

6.6 ***What is the required frequency of submissions in the new format for the different files – Premium, Paid Losses and Outstanding Loss Reserves? I believe that the latter changed from bi-annually to quarterly, but did the others change?***

The submission frequency for Outstanding Loss Reserves has changed to quarterly; all others remain unchanged.

6.7 ***The Data Submission Requirements Manual does not specify where signs for the dollar amount in the trailer record are to be reported; how is this to be reported?***

The sign of the dollar amount in Trailer record must be placed following the amount (i.e. in pos. 34). The acceptable values for the sign position are: "+" or blank for positive amounts and "-" for negative amounts. The Data Submission Requirements Manual will be updated accordingly.

6.8 *Will there be a separate FTP site for testing?*

No, the new FTP site will accept both production and test files. Please also see 6.4 above.

6.9 *Are there requirements for data encryption?*

There are no additional requirements for data encryption as our FTP sites will be secured using SSL or site-to-site VPN. Both methods will encrypt the data as it goes through the network.

6.10 *Are there requirements to include LRECL and BLKSIZE parameters for the 600-byte file?*

No, the new FTP site will not require these parameters; however the other plans (2, 4 and 7) will still require these parameters.

6.11 *Using the current production system, I can combine and submit one file containing the data for the two reporting companies in our company group. For All-Industry Testing, I have received a separate FTP user ID for each of the two companies. Does this mean that we can no longer report these companies together in a single file?*

If you report data for multiple reporting company numbers belonging to the same organization, you can continue to combine the data into a single file and transmit using either of the FTP accounts.

For flexibility, IBC has assigned FTP accounts for each reporting company number. This way each FTP account could have a different designated primary contact. If a submitted file is rejected, the notification will go to the primary contact for that particular FTP ID.

6.12 Why am I getting the error messages "Exceeded error tolerance" or "Exceeded high end error tolerance?"

When a file is submitted to the new system, the number of errors in an RU Batch is checked to determine if it should be "Accepted," put on "Hold" or "Deleted."

For example, if a reported RU contains between 2,501 and 5,000 records and there are 1,000 or fewer errors, then the RU Batch has a status of "Accepted." If there are between 1,001 and 1,500 error transactions, then the RU Batch has a status of "Hold" with the message "Exceeded error tolerance." If there are 1,501 or more error transactions, then the RU Batch has a status of "Deleted" with the message "Exceeded high end error tolerance."

For "Deleted" status, companies will have to correct and submit the RU again.

6.13 Why was my batch placed on hold due to "number of claims appears incorrect"?

In July 2008, IBC introduced a new anomaly to put claims files on HOLD. If you are reporting a claims file with a claim count of "zero", the batch will go on hold, and if you have reported a batch with a large volume of claim counts '1' or a very low volume of claim count '1' the batch will also be put on HOLD.
Both of these situations are extreme issues and reflect a problem with the reporting of claim count on your loss records.
Listed below is a chart that demonstrates how to correctly report claim count. We also issued a more detailed bulletin on this topic in February 2004. Please visit this link for a copy of this bulletin http://www.ibc.ca/en/DQ_Management/documents/DQ_Bulletins_2004/DQ-2004-03.pdf

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Data Accuracy

REPORTING TABLE **Transaction**	Claim count
First indemnity payment reported	1
Exception: First indemnity payment if it follows the first reserve and is reported in same month	0
Additional or subsequent indemnity payments	0
Reserve entries if no indemnity payment entry	1
Reserve entries after an indemnity payment	0

6.14 ***Prior to transmitting the file do we need to issue the quote site command "SITE lrecl=500 recfm=fb blksize=23500 cy pri=10 sec=30"?***

For the new auto submissions (600 byte format) we do not need to issue the quote site command. The quote site command is only required for submitting the old stat plan (450 byte format) and when connecting to the old ftp.ibc.ca site.

6.15 ***For companies that are testing multiple reporting company numbers, do they have to submit files separately divided by the FTP credentials per company, or can they combine reporting company testing through a single FTP account?***
For instance, organization XYZ has reporting companies 123 and 456. Can they submit files for both reporting companies through the FTP account for reporting company 123, or do they have to submit 123 files through the FTP account for 123 and 456 files through the FTP account for 456?

Companies with multiple reporting company numbers can FTP files using a single FTP account as long as all the reporting company numbers belong to the same organization. FTP credentials are separated because of notifications. If a submitted file is rejected, the notification will go to the primary contact of that particular company.

For example, Org ID XYZ has reporting companies 123 and 456. Users can submit all files only using FTP account for company 123; however if the file submitted for 456 is rejected the notification will go to the contact of that company not 123.

7. TESTING

7.1 ***How do we test data submissions? What happened to PRIME?***

PRIME was replaced for automobile only with a new test environment that is incorporated in IBC's new data collection system.   Companies can now test their automobile data submissions via the Test Analysis module within the Submission Management application.

The *Data Submission Requirements Manual* contains detailed information about submitting test data to IBC.

PRIME will continue to be available for testing OSAB data submissions.

8. APPLICATIONS

8.1 Can you please provide a brief description on the security features of the new system to include access to the FTP server, user authentication and data storage?

The FTP server is not open to the public but is accessible only to insurers with previously established security association to IBC. Such security association is based on agreed upon IPSec parameters which may include encryption, hashing method and tunneling properties. Even with a secured channel, the insurer's sending devices' IP address has to be explicitly defined and includes what service request is allowed by IBC to the sending device.

All FTP accounts are authenticated against a user database utilizing LDAP technology. Each FTP account has standard user privileges, restricted to placing files only in a single folder associated to the account. Access to other account folders is denied/restricted. Access activities to the servers are constantly monitored with alerting in place to notify IBC technical staff when out of the ordinary activity is detected.

Once the data is transferred, it is picked up by an application process and fed to a validation engine. A copy of the file is kept on the account holder's archive folder while the processed data is stored in a SAN-based data warehouse secured by a second tier firewall. This firewall is not only capable of restricting access to the database but also employs "deep packet inspection" capabilities. Lastly, all database access requests are controlled by role-based authentication and LDAP technology.

8.2 How long will it take for my submitted file to be available in the Submission Management application?

It will generally take approximately 2hours (the time it takes for the collection process to complete) before information regarding your submitted file will be available in the Submission Management application. There may be instances where it takes longer to process and display the results.

8.3 Will I continue to receive a daily email from IBC containing the Statistical Submission Status Report (SSSR)?

No; however this report is now available on-line. Statistical Submission Coordinators may access this information by logging on to the Submission Analysis module within Submission Management. The information is available by selecting 'Statistical Submission Status Report' from the list. Companies are reminded when viewing the report to indicate the previous day, when the dataset was received. To advance to additional pages within the report, click on the arrow within the upper toolbar.

8.4 What are the parameters for passwords for the new applications?

New passwords must:

- Have a minimum of 7 characters and a maximum of 32
- Contain characters from three of the following four groups:
  1. Uppercase letters (A, B, C…)
  2. Lowercase letters (a, b, c…)
  3. Numbers (1,2,3…)
  4. Symbols (!, @, #, $, %, etc.)
- Not be the same as the five previous passwords
- Not contain the user's name or user ID, or either of these spelled backwards

Please note that users will be locked out after three sign-on attempts with incorrect passwords.

8.5 When will Bulk Correction functionality be available?

There is currently no scheduled roll out date. For more information refer to Bulletin DQ-2008-09.