

**Financial Data Manager Application
2022 User Guidebook**

**For the Reporting of 2021 Data
Evaluated as of December 31, 2021
and Due to be Reported during 2022**

Financial Data Manager User Guidebook: Table of Contents

Section One – General Application Instruction	4
I. Introduction	4
II. Annual Calls	5
III. Support Requirements	5
IV. Privacy and Security Statement.....	5
V. Terms of Service and Conditions of Use	5
VI. Obtaining a User ID and Password	5
VII. Logging In	6
VIII. Home Screen FDM and Menu Items.....	8
A. Menu Items	8
1. Search > Failed Edits Search.....	8
2. Acknowledgment	8
3. Call List.....	8
4. FAQ	8
B. Announcements.....	9
C. Acknowledgment and Call List.....	10
1. Navigation of Call Submissions on FDM.....	11
1. Submission #	12
2. Status.....	12
3. Last Updated	12
4. Username	12
5. Edit and Delete	12
6. New Call and Get Template	12
7. Bulk Submit.....	12
2. Navigation in a Call on FDM	13
1. Back to Call List	13
2. Export to Excel	13
3. Validate Call	14
4. Saved Call.....	14
5. Submit	15
6. Reference Calls.....	15

7. Create Notes to Bureau	15
3. Navigation in an Excel Call Template	17
1. Layout	17
2. Navigation	17
3. Data Entry	17
4. Importing the Template into FDM	18
5. Draft (Saved Calls)	18
6. Submitted Calls	19
7. Change Call Year	19
D. FAQ Section	20
Section Two – General Information on Entering Call Data	21
I. State Specification	21
II. Group Reporting	21
III. Entering Data	22
IV. Calculated Fields	22
V. No Experience	22
Section Three – Specific Information on Entering Call Data	23
I. Call Acknowledgments	23
II. Policy Year Calls (#1, 8, 9, and 12)	24
A. Premiums (Columns 1, 2, and 3)	24
B. Losses (Columns 4-7, Columns 9-18, Columns 21-26)	25
C. Claim Counts (Columns 8, 19, 20)	25
D. Line X (all Columns)	25
E. Line Y (all Columns)	25
F. Line z (all Columns)	25
G. Reconciliation Page	26
III. Delaware Calendar Year Expense Data – Call #2	26
A. Layout	26
IV. Large Claim Experience by Policy Year Call #4	27
A. Layout	27
V. Pennsylvania Calendar Expense Data Call #14	28
A. Layout	28
VI. Policy Year Call for Catastrophe Experience #15	29

A. Layout.....	29
VII. Pennsylvania Schedule W	30
A. Pennsylvania Schedule W Constraints affecting Unpaid Claim Estimates	31
B. Part A-1, Part A-Statistical Code 9740, Part A-Statistical Code 9741, and Part A-5.....	31
C. Parts B-1 and B-5	31
D. Parts C-1 and C-5	31
E. Parts D-1 and D-2	31
F. Parts E-1 and E-2	32
G. Schedule W Review	32
H. Schedule W – Coal	32
I. Schedule W – Coal Review	32
VIII. Statutory Page 14	33
A. Layout.....	33
IX. Running the Edits Contained within FDM	33
X. Responding to Failed Edits or Run Report Anomalies	35
A. Create Notes Method of Explaining Errors (at the time of submission)	35
B. Carrier Notes sent Email or Regular Mail, After Call Submission	36
XI. Bureau Criticisms	36
XII. Troubleshooting.....	37
Section Four – Edit Listing	38
I. Calls Subject to the FDIP	38
II. Schedule W - Coal	38

Section One – General Application Instructions

I. Introduction

The Financial Data Manager (FDM) is an Internet-based system that allows carriers to enter, edit, and submit Financial Calls and Schedule W (Calls) subject to the Financial Data Incentive Program (FDIP) to the Pennsylvania Compensation Rating Bureau and the Delaware Compensation Rating Bureau, Inc. (herein collectively referred to as the Bureaus) and, for Schedule W only, to the Pennsylvania Insurance Department (Department).

FDM is a system designed to increase the timeliness and quality of data submissions by eliminating paper submissions, providing carriers with immediate feedback of failed edits, and providing carriers with a central location for their data to ease the review of multiple calls. This system also provides carriers with the opportunity to view a log of criticisms sent by either the Department or the Bureaus.

This document will provide an overview of the functions available to carriers within the FDM and helpful hints for using the application. It is recommended that the user read through this entire document before using FDM.

Proper use of FDM requires specialized knowledge of workers compensation financial call reporting for the state of Pennsylvania and/or Delaware. This guide is not meant to replace individual Call instructions. The user will still need to refer to the individual Call instructions associated with a particular Call for the proper completion of the Call. **Instructions for individual Calls, Forms, and Schedule W can be accessed via the Bureaus' website at www.pcrb.com for both Pennsylvania and Delaware (pcrb.com will bring you to the Bureaus homepage where you can select Pennsylvania or Delaware). Simply select the Data Reporting link, then click on Financial Data Reporting, and finally select the Financial Call Package to find the list of call instructions.** Schedule W instructions can also be accessed on the Pennsylvania Insurance Department's website at www.insurance.pa.gov.

II. Annual Calls

FDM currently supports the submissions of the Following:

Call Acknowledgments

Pennsylvania Call #1 – Policy Year Call for Compensation Experience

Pennsylvania Call #4 – Large Claim Experience by Policy Year Call

Pennsylvania Call #8 – Net (As Written) Large Deductible Policy Year Call

Pennsylvania Call #9 – Gross (1st Dollar) Large Deductible Policy Year Call

Pennsylvania Call #14 – Pennsylvania Calendar Year Expense Data Call

Pennsylvania Call #15 – Policy Year Call for Catastrophe Experience

Pennsylvania Schedule W - (See Section III, Part VII, Item G)

Pennsylvania Schedule W – Constraints affecting Unpaid Claim Estimates (See section III, Part VII, Item A)

Pennsylvania Schedule W – Coal (See Section III, Part VII, Item H)
Pennsylvania Statutory Page 14
Delaware Call #1 – Policy Year Call for Compensation Experience
Delaware Call #2 – Calendar Year Expense Data Call
Delaware Call #4 – Large Claim Experience by Policy Year Call
Delaware Call #8 – Net (As Written) Large Deductible Policy Year Call
Delaware Call #9 – Gross (1st Dollar) Large Deductible Policy Year Call
Delaware Call #12 – Assigned Risk Policy Year Call
Delaware Call #15 – Policy Year Call for Catastrophe Experience
Delaware Statutory Page 14

All required Calls are included within FDM. Access to instructions for these Calls are available via our website, www.pcrb.com.

III. Support Requirements

Browser requirements: Google Chrome, Microsoft Edge, or Firefox

Note the application response time may vary depending on how you access the internet and the speed of your connection. The pictures of the screens shown in this guide may differ slightly from what you see on your screen depending on the resolution of your monitor.

This Portal can be accessed via a link on the Bureaus' website, www.pcrb.com, by selecting the Application Login on the top left of the page. To use FDM, carriers must have a Bureau approved User ID and Password.

IV. Privacy and Security Statement

Carrier may view the Bureau's Privacy and Security Statement within FDM. The login screen for FDM contains a link which will provide access to the Privacy and Security Statement.

V. Terms of Service and Conditions of Use

Carrier may view the Bureau's Terms of Service and Conditions of Use for the FDM. The login screen for FDM contains a link which will allow the user to view this agreement.

VI. Obtaining a User ID and Password

Note that both FDM and the legacy FDRA are located within the Application Login of the PCRB website. Therefore, all users must be registered in the PCRB's Application Login. The legacy FDRA logins cannot be used in FDM. Carrier user access is managed directly through each CGA. All carriers are required to have a completed FDIP/FDM Designation of Contact Person Form filed with the PCRB/DCRB. The Contact Person acts as a contact between his/her employer, the Bureaus, and the Pennsylvania Insurance Department for purposes of coordinating and accomplishing timely and accurate submission of financial data for all carriers included within the

indicated group. The Bureaus will provide this information to the Department so that all parties are aware of the appropriate contact for your group. The contact person does not have to be responsible for filling out financial call or the Pennsylvania Schedule W, but will be responsible for seeing that calls and Pennsylvania Schedule W are submitted on a timely basis, securing responses to questions posed by either the Bureaus or the Department with respect to their group's financial calls or Pennsylvania Schedule W, and for communication regarding the FDIP including payment of any assessments levied against their company.

Carriers requiring changes in the setup and maintenance of User IDs and passwords for use in the legacy FDRA should contact the Bureau directly. Those DCP's assigned Carrier Group Administrator status have the ability to add additional users for their company and will be able to disable them, as necessary. A User ID cannot be changed. A user can, however, change their Password. The user should click on the "User Profile" then "Change Password" option and follow instructions.

VII. Logging In

To login to FDM, please visit our website at www.pcrb.com to gain access to the application. Carriers can login via the *Application Login* button found on the top left-hand side of our website. A carrier must enter their approved User ID and Password into the appropriate fields to gain access to the application.

If a user forgets their password at the Login Page, they must click the "Forgot Password?" link. The user will then be taken to a screen where they must enter their Username then click the *Submit* button. Your password will be sent to your email address.

PCRB Pennsylvania Compensation Rating Bureau

DCRB/PCRB Home Home

SIGN IN

User Name:

Password:

Click the "I Agree" button to submit your User Name and Password. Doing so acknowledges that you have read and accept the Bureau's "Privacy and Security Statement" (see Privacy) and "Term of Service and Conditions of Use" (see Legal) regarding use of the facilities on this website.

[Legal | Privacy | Contact Us](#)

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v.14.2

Note that the Application Login provides access to all the secured applications. Therefore, all users must be registered in the PCRB's Application Login. The legacy FDRA logins cannot be used

in FDM. As is the case with most PCRB/DCRB products, carrier user access is managed directly through each CGA. If you are not a registered user in the Application Login, click on the First Time User link and complete the registration form as a Carrier Group User.

After registering, users should click on Request Access to contact the CGA for individual permissions as required.

Request Access (Carrier Group Users Only)
Select **Request Access – To Application(s)** from the main menu to submit a request to the group administrator for access to use a product.
On the Application Access Requests screen, check the box of the product(s) for which the user needs access to and then click the **Request** button.



APPLICATION MANAGER

Home Message Board Help Section **Request Access** Carrier List

APPLICATION ACCESS REQUESTS

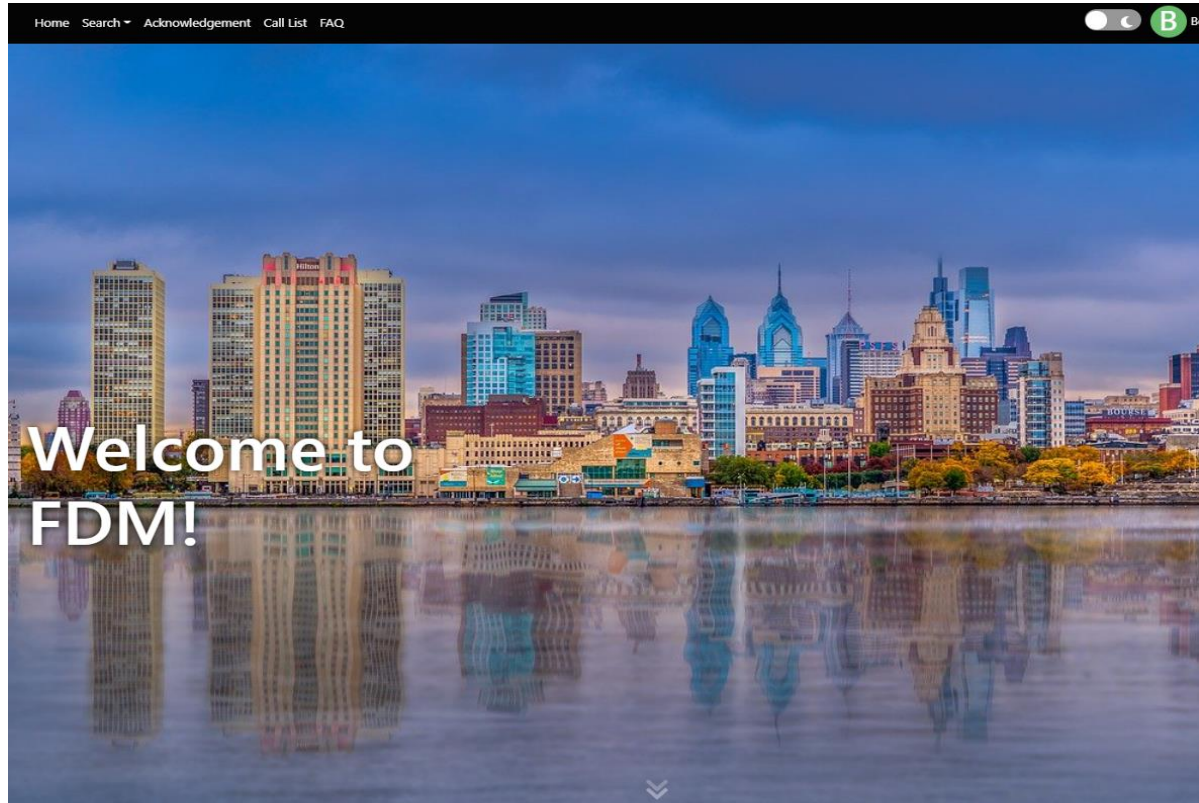
Request?	Application Name	Description	Date Requested
☒	Financial Data Manager	View, Enter and Edit Financial Data Reporting	
☐	Invoice Online	View Invoices	
☐	Test Audit Online	Test Audit Statistics - Download	
☐	WC Data Pro	View, compare and export premium and loss data	

Count: 4

Request

VIII. Home Screen FDM and Menu Items

Once successfully logged into FDM, the carrier will observe the *Home* screen depicted below. Based on the User ID and Password, the application will identify the carrier group and display the carrier group name on the *Home* screen.



To return to the *Home* screen at any time, select the “Home” icon on the top left-hand side of the navigation bar.

A. Menu Items

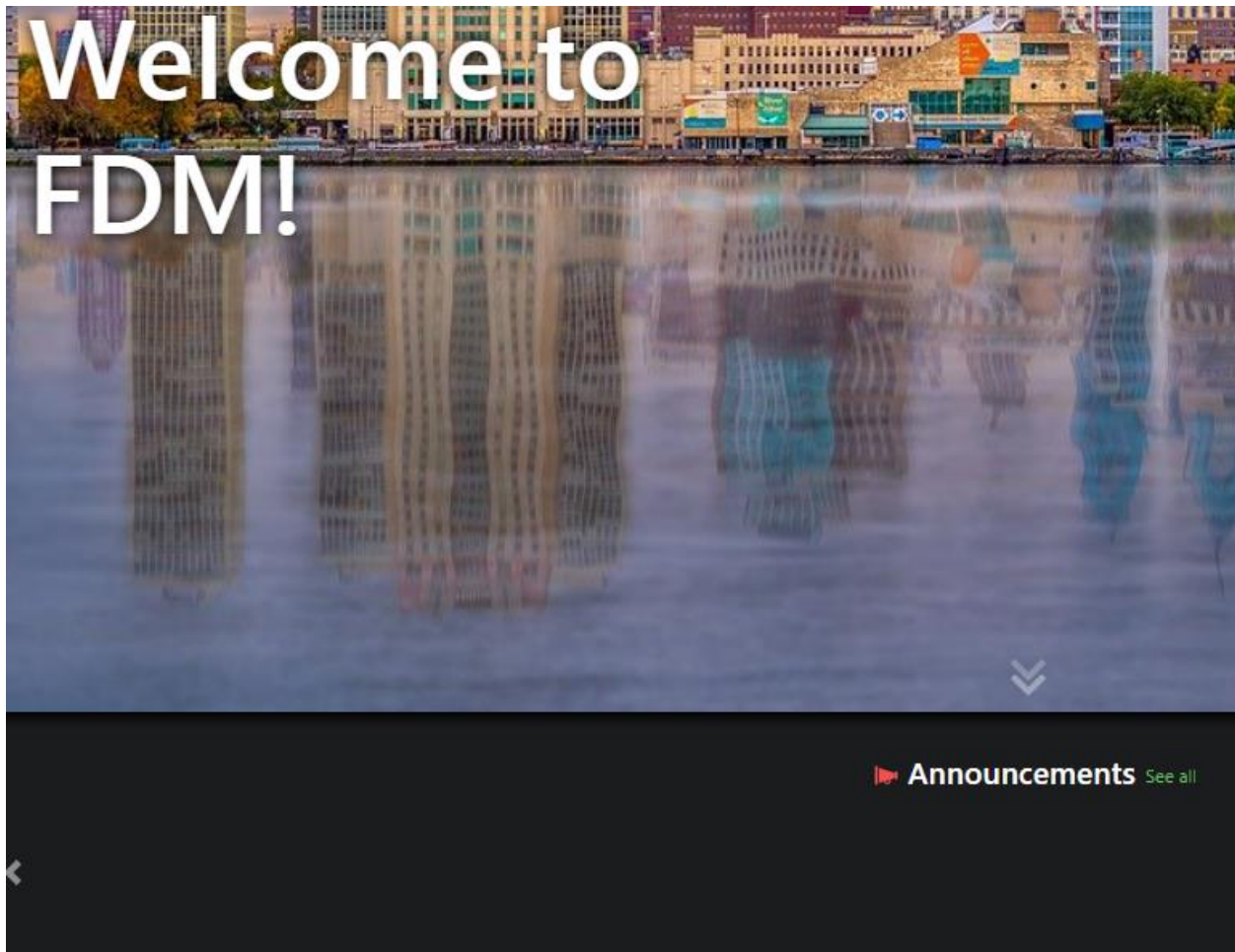
From the Home screen, carriers may access one of the four menu options: **Search > Failed Edits Search, Acknowledgment, Call List, and FAQ.**

1. **Search > Failed Edits Search:** This selection will bring the user to the “Failed Edits Search” screen.
2. **Acknowledgment:** This selection will bring the user to the “Call Acknowledgements” Screen.
3. **Call List:** This Selection will bring the user to the “Call Submissions for [Carrier group] [Call Year]” Screen.
4. **FAQ:** This Selection will bring the user to the “Frequently Asked Questions” screen.

In addition to the above items, the user also has the option to switch between a dark and bright color scheme. This can be done through the *Dark/Light Mode Selector* located on the top right-hand side of the navigation bar.

B. Announcements

The Home screen will show general announcements from the Bureaus. This is located at the bottom of the *Home* screen as depicted here:



The Home screen will show general announcements from the Bureaus. Users should check this screen regularly to remain as informed as possible about data filing, and updates to the application.

To see all announcements that are not currently displayed, select the “*See all*” text. The user can then select individual announcements that they wish to view by clicking the *view* icon located on the right-hand side of the page.

Announcements			
Year	Title	Sent Date	
2026	Message to ALL Carrier Groups	01/28/2021	View 
2024	Message to ALL Carrier Groups	01/28/2021	View 
2023	Hello World	09/24/2020	View 
2023	Announcement to all	08/13/2020	View 
2022	Message to SPECIFIC ALL DE Carrier Groups	01/28/2021	View 
2022	Message to SPECIFIC Carrier Groups	01/28/2021	View 
2022	Message to ALL Carrier Groups	01/28/2021	View 
2022	Message to ALL Carrier Groups	01/28/2021	View 

C. Acknowledgment and Call List

The Call List option will display a window with all the Calls available to be modified, saved and/or submitted. **Note** all Calls will be displayed for both states, Pennsylvania and Delaware. However, the Calls will not be available until the user completes and saves the Call Acknowledgment as shown below.

[Home](#)
[Search](#)
[Acknowledgement](#)
[Call List](#)
[FAQ](#)

Call Submissions for REDWOOD FIRE AND CASUALTY INSURANCE COMPANY 2020

Call Year
2020

Carrier Group
REDWOOD FIRE AND CASUALTY INSURANCE COMPANY

Bulk Submit

Attachments

Unacknowledged calls: PG. 14 DE

This requires you to select a Call year, select the company you will be completing the Calls for and confirming the contact email. Once this form has been saved, the list of Calls for DE and PA will be displayed. The user should then select either “Will Submit” or “No Experience” for each Call and then select “Save” at the bottom of the screen. The Call List will then display the Calls you have indicated will be submitted.

All successfully imported data templates will be displayed as shown below in ascending order.

Call Submissions for AIG 2020				
Call Year	2020	Carrier Group		Bulk Submit
Attachments				
CALL 1 DE				
Get Template				
Submission #	Status	Last Updated	Username	
4972	Submitted	12/03/2020	aigdemo demo	View
4982	Submitted	01/06/2021	Glenn Trace	View
5080	Submitted 460 Unresolved	02/02/2021	Glenn Trace	View
5519	Submitted 327 Unresolved	02/03/2021	Glenn Trace	View
5540	Submitted 536 Unresolved	02/04/2021	Glenn Trace	View
6076	Draft 682 Unresolved	02/05/2021	aigdemo demo	Edit Delete

The status will be displayed and the number of unresolved issues regarding the submission will be displayed as a badge next to the status. The user can open the call with the “Edit” option or “Delete” option the Call. After submitting, the carrier will not be able to edit that submission but will be able to submit more if needed.

1. Navigation of Call Submissions on FDM

The user can also select the Call Year and Carrier Group from the dropdown. The Call Year is defined as data that is being reported for Financial Calls valued as of December 31 of that year. For example, if the user chooses 2019 for the Call year, the data reported will be valued as of December 31, 2019. The Call Year can be selected from the dropdown.

Note this selection will only be available for Call Years 2019 and forward within FDM. If you need to submit corrections and/or new calls for years prior to 2019 (for calls valued

as of December 31, 2018 and prior) you would need to refer to the previous version of the FDM application which is the Financial Data Reporting Application (FDRA).

The layout of the individual Call List is shown below and lists the following headings for each Call: **Submission #, Status, Last Updated, Username, Multiple Submissions and Actions.**

Call Submissions for AIG 2019

Call Year: 2019 Carrier Group: AIG Bulk Submit

Attachments

CALL 1 DE

New Call 1 DE Get Template

NONE

CALL 1 PA

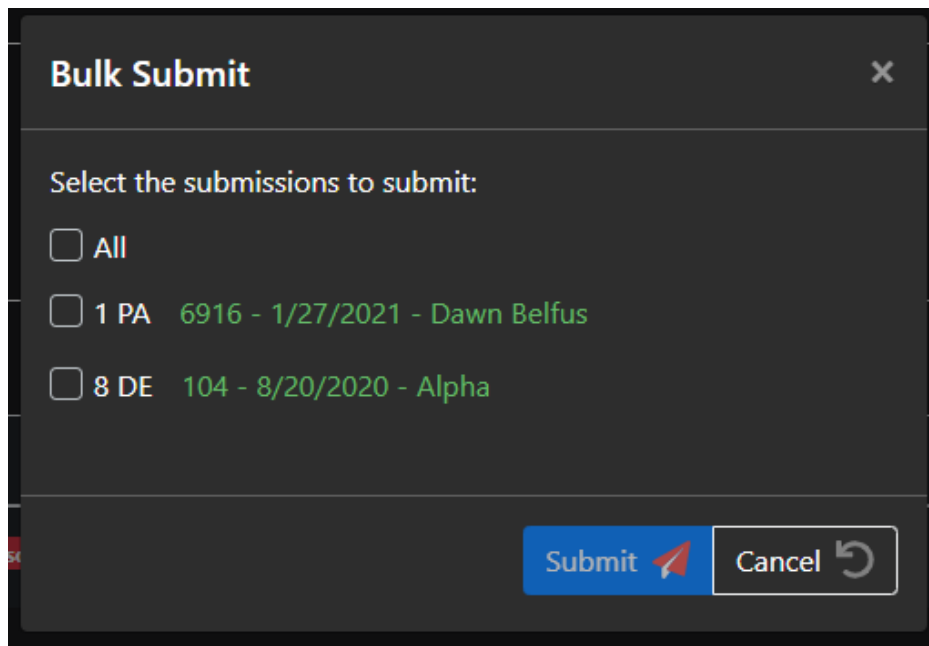
Get Template

Submission #	Status	Last Updated	Username	
6916	Draft 2 Unresolved	01/27/2021	Dawn Belfus	Edit Delete

CALL 4 DE

New Call 4 DE Get Template

1. **Submission #:** Identifies the submission.
2. **Status:** Will indicate whether the Call has been saved as a draft or Submitted.
3. **Last Updated:** Reflects the original date the Calls has been saved within the application.
4. **Username:** Indicates the username of the individual who provided the draft or submission.
5. **Edit and Delete:** User can edit and/or delete an existing draft within the application once a Call has been saved.
6. **New Call and Get Template:** The user can select the “New Call [call will be displayed]” where the user can select the “Get Template” option where a Microsoft Excel spreadsheet that is formatted for this specific call will be downloaded.
7. **Bulk Submit:** Item allows the user to submit data for all calls associated within the selected Call Year and Carrier Group that have been previously uploaded.

A dark-themed dialog box titled "Bulk Submit" with a close button (X) in the top right corner. The text "Select the submissions to submit:" is displayed. Below it are three checkboxes: "All", "1 PA 6916 - 1/27/2021 - Dawn Belfus", and "8 DE 104 - 8/20/2020 - Alpha". At the bottom right are two buttons: "Submit" (blue with a red arrow icon) and "Cancel" (white with a grey arrow icon).

2. Navigation in a Call on FDM

Only one Call can be opened/viewed at any given time. To navigate through the Call, the user must use the scroll buttons to the right and bottom of the call.

It is recommended that the user moves deliberately from cell to cell using the mouse. The application response time may vary depending on how the user accesses the Internet. Recommended web browsers include the following: Google Chrome, Microsoft Edge, or Firefox as your web browser.

Once inside a Call, users will have to click on the Call List located on the menu bar at the top of the page. If a user leaves a Call before saving it, by clicking on the Call List, the changes will be lost.

If at any time the application does not return the intended result, the user should click on the Refresh browser button. See below:

1. Back to Call List: Clicking the Call List link on the menu bar will bring the user back to the Call Submissions screen.

2. Export to Excel: When you click on this link the Call data and headings are exported into an Excel workbook.

If the user wishes to save the Call in Excel, they can go to File, Save and proceed to name the file as they would any Excel file. Once the Call is in Excel you can use the standard Print and Page Setup features available in Excel to print a copy of the Call for your files.

Additionally, exporting the Call data to Excel will allow the user to perform various ad hoc reports at their convenience. The Export to Excel option will return a different Excel file layout than that of the Import template layout so users can distinguish the export from the import. Do not use the export option to import data.

3. Validate Call: This function allows the user to review the quality of the Call data using the edits set forth in the FDIP. By reviewing the failed edits before submitting the Calls to the Bureaus, a carrier can resolve data problems or address data anomalies at the time of submission to possibly avoid the potential of incurring fines. A user may **Validate** a call as needed on a saved call.

The user will need to click the ref calls on the side bar choosing the calls you want to run against that call. If a Saved version of a Call does exist, the user can choose to run edits against that version if preferred.

If the user wishes to make no changes to the list of Calls being compared in the editing process, they should click on the ok button. If the user wishes to make changes click on the dot by that call, then the user should click ok. The user will then need to click the save tab, then validate tab located on the side bar.

The failed edits total will appear on the errors tab located on the side bar. The user should click on the errors tab and the failed edits will be listed for the user. Each Edit will have a chat box below the edit to address these errors.

4. Saved Call: The **Save** button will save the data once the Call template has been imported without submitting the Call to the Bureaus. Once the Call is saved, a message will appear indicating that the Call was successfully saved. The user should not exit the screen until the user receives such message. If the user moves out of a Call without receiving the “Successfully Saved Call” message, the data that was just entered will be lost. Also, if the user clicks on a Menu Item before saving a Call, the application will not save the changes.

The user may import a Call template and save the data as many times as the user wishes without incurring any resubmission fees under the FDIP.

By utilizing the **Save** option the user can review a Call, come back to it later and submit the Call once they are satisfied with their data entries and/or failed edit explanations. **Note** only one version of a saved Call on FDM can exist at any given time. If the user imports a Call template and hits the *Save* button, this will overwrite the previously saved version.

The user should save the call before validating the call to see the errors. Carriers must address all errors before you will be able to submit the call. Since many of the edits are dependent on the individual Call's relation to other Bureau Calls, it

is recommended that the user save ALL Calls to generate all the possible edit failures before submitting a single Call.

5. Submit: The **Submit** button sends the Call to the Bureaus. Before FDM sends the Call to the Bureaus the user must address all edits that have errors. If the user tries to submit a call that has errors that have not been addressed, they will receive the message “Error Submitting Submission!”.

The user will find the **Submit** button located on the sidebar. Once the user clicks the **Submit** button a pop-up box will appear, and the user will need to answer the questions before clicking the submit button located at the bottom of the pop-up box.

When the user clicks the **Submit** button, with all errors having been addressed you will receive the message “Successfully Submitted.”

After the Call has been submitted, the user can go back to the menu bar to click Call List. It is here where you can see the submission information.

The status of the Call is now **Submitted**. The **Submitted Call** is accessible only through the **View** Menu item.

6. Reference Calls: This feature will display the Calls against which the edits were run. These are the Calls that were selected by the user after clicking on **Ref Calls** located on the sidebar. The user can navigate through the **Ref Calls** by using the scroll bars at the bottom and to the right of the call.

The ratio report from the prior year is also available to view. This report will be displayed as a tab on the call. The user can use this report to compare the ratios reported on the current report to those reported on the prior year’s call.

7. Notes: This feature is provided so the user can address failed edits or data anomalies at the time of submission. The **Notes** section allows for a narrative of an unlimited number of characters.

The user must **Save** and **Validate** their call to view any triggered validation errors.

To create a **Note** (response) for an error, the user must go to that error and click the *chat box* icon located on the bottom right corner of the edit you are working on. A *chat box* will appear, the user can click on the box that says “Message” to write their notes. Once the user is done addressing the error click on the “Send” button.

All **Notes** provided to failed edits or data anomalies should be entered via the *chat box* icon within the Call as depicted below:

The screenshot shows the 'ERRORS' section of the Financial Data Manager application. A table lists various errors with columns for 'At ny', 'Net Premium', 'Total Paid (9)+(10)', 'Total Outstanding Excluding IBNR (11)+(12)', 'Total IBNR(13)+(14)', 'Total Incurred Losses Including IBNR (4)+(5)+(6)', and 'Incurred in Claim'. A warning message is displayed: 'Warning: If Net Earned Premium is reported, Section #3, Line (12), Standard at Company Level (Col 2) 8000528 then the amount reported on Section #3, Line (9), Standard at Bureau DSR Level (Col 1) should not equal zero. Please correct the data.' A chat box icon is highlighted with a yellow circle.

Users can then provide a **Note** through the following popup:

The screenshot shows a chat box popup with the text: 'If Net Earned Premium is reported, Section #3, Line (12), Standard at Company Level (Col 2) 8000528 then the amount reported on Section #3, Line (9), Standard at Bureau DSR Level (Col 1) should not equal zero. Please correct the data.' Below the text is a text input field and a 'Send' button. The background shows the same error table as the previous screenshot.

Notes must be provided for each particular error. Previous **Notes** can be viewed (for both Saved or Submitted Calls) by clicking on the “Errors” on the sidebar of each Call. They can be viewed, and additional comments can be added in the message bar of the edit.

Note that if you need to revise a Call, you must make the revisions in the Call template and then import the Call into FDM. As a result, any **Notes** pertaining to that Call will have to be re-entered.

More specific information regarding responding to failed edits is discussed in *Section Three, Item X. Responding to Failed Edits or Run Report Anomalies.*

3. Navigation in an Excel Call Template

In order to report Call data, users must begin by downloading the Excel template provided in FDM. (This is generally referred to as the **Get Template** function of FDM.) The user can access the required Excel template from the **Get Template** link under the call. Provided that the call is required to be reported, the user should click on the **Get Template** button. FDM will then give the user the option of either opening the template in Excel or saving it to their local hard drive or network. Users can rename a template if they desire.

Once the template is saved on the user's local hard drive or network, carriers can log off the FDM and work directly in Excel. However, users must return to FDM when they are ready to import the created Call back into the application.

1. Layout: Users will find that the Call layout within the templates is similar to the versions of the Calls within FDM. This includes reconciliation pages where applicable.

2. Navigation: Saved on the user's local hard drive or network, carriers can log off FDM and work directly in Excel.

3. Data Entry: The template is a protected Excel workbook that includes calculated fields. Users should only enter data into those cells formatted white in the Pennsylvania and Delaware call templates. Cells that are formatted grey are calculated cells. Excel will automatically populate these calculated cells once the user enters data into the dependent cells. The user will need to manually add the values on Section 3 of the call, into the cells that are not grey. Users should not attempt to alter calculated fields. If any fields are altered, the template may not import into FDM correctly.

Note If the user chooses to paste data from another Excel file into the Excel template, they must use the Edit, Paste Special, Values function. If the user chooses the general Paste function the formatting on the template will be lost.

Note Line Y is not automatically populated within FDM, the user will need to add these values to their template.

Once the template is imported into FDM, all formulas within FDM remain intact. Any changes made within FDM to the imported data will be calculated accordingly.

4. Importing the template into FDM: Once the user has entered data into the template, the user must save the file to their local hard drive or network.

When the file is saved, the user must choose **Call List**, then **New Call** under the Call to which you want to import the template. Be sure that the template is closed before beginning. Once the New Call screen has been opened, click on the **Import** button shown on the sidebar.

Click on **Choose File** and find the appropriate excel template file containing the call data. Once the file is highlighted in the **Choose File** window, click “open.” This will select the file and return you to the website. Confirm that the file name displayed is the correct file. If the filename is incorrect, repeat the process. If the filename is correct, click the **Import** button.

Once the file has been imported, the user should save the data by clicking on the **Save** button on the sidebar. After saving the template, it will then be saved in FDM as a **Saved Call**. The user can then begin the process of validating the call and responding to triggered errors within the application.

5. Draft: Only one **Draft** is available to be submitted and will be shown under each Call listed in the *Call Submissions* List. The user can view the drafted Calls by clicking on the edit link of a particular Call. If there are no **Saved Calls** the word “NONE” will be shown beneath the call.

The user can access the previously **Saved Call** by clicking the **Edit** button.

The **Save** button will save the data without officially submitting the Call to the Bureaus. Once the Call is saved, a message will appear indicating the Call was successfully saved. The user should not exit the screen until they receive such message. The user may import a Call template and save data as many times as they wish without incurring any resubmission fees under the FDIP. The purpose of this option is to allow a user to save Calls in progress and run edits and/or add their explanations at a later time.

Remember, only ONE version of a **Saved Call** can exist at any given time for each Call and Schedule W.

If the user imports a Call template containing revised data and clicks on the **Save** button, this will overwrite the previously saved version of the Call. Keep in mind that the edits can run against **Saved Calls** or Submitted Calls. So, if the user has imported a Call template containing revised data and does not save the Call, the edits will resort back to the last saved version of the Call. A Call will remain saved until it has been submitted.

The user can also delete a Saved Call by clicking on the delete button then responding, 'Yes' to the question "Are you sure?" on the pop-up box. Once a user deletes a Saved Call, it will no longer be available to the user.

6. Submitted Calls: All previously **Submitted Calls** will be shown under each Call listed in the *Call List*. If a particular Call has been submitted more than once, the user will be able to view all previous versions of the Call submissions.

The user can view the list of **Submitted Calls** by clicking on the **View** button of a particular Call. The information given for Submitted is as follows:

Submission #: The Submission # will display If the Call was submitted for the first time. Only that submission will be shown. If a call has been resubmitted the newest call will show at the bottom of that list in dated order.

Username: The Username field will display the name of the user that submitted the Call based on information provided by the contact person.

Status: The status will show that the Call is a Draft (saved) or Submitted.

Last Updated: The Last Updated Date will display the date the submission was last saved or the date the submission was received by the Bureaus.

The user can gain access to previously Submitted Calls by clicking **View** of the call they would like to retrieve. The application will then open the Submitted Call.

7. Change Call Year: The FDM is designed to manage multiple Call Years. For all Calls and Schedule W the FDM will allow users to view, modify and submit the Calls for reporting years 2010 and subsequent. If the user needs to submit corrections and/or new calls for Call Years prior to 2019 they would need to refer to the previous version of the FDRA application. For submissions for Call Years 2019 and forward you would use the FDM.

Each time a user logs in, the Call Year will default to the current year. If, during any session, the carrier wishes to see another Call Year, they can change the Call Year via the dropdown option and choose the year.

The user can toggle among the available Call years. This change will be reflected for any portion of the website but will only be in effect for that login session. If the user logs out and immediately back in, the Call Year defaults back to the current year.

D. FAQ Section

FAQ is an option on the menu bar where the user can see answers to questions that are most frequently asked. This list will be a continually growing list and will be displayed as the Bureaus update it.

Frequently Asked Questions

Reset ↺

Need help?

View ↗

Section Two – General Information on Entering Call Data

I. State Specification

The FDM supports all Calls for both the state of Delaware and the state of Pennsylvania. The user does not have to do anything extraordinary within the application to be in either state's version of the application. State specification is assigned to the Call name, e.g., *Delaware Call #1* or *Pennsylvania Call #1*.

Abbreviations

1 DE
1 PA
2 DE
4 DE
4 PA
8 DE
8 PA
9 DE
9 PA
12 DE

14 PA
15 DE
15 PA
PG. 14 DE
PG. 14 PA
Schedule W PA C
Schedule W PA S

Full Name of Call

Delaware Call #1
Pennsylvania Call #1
Delaware Call #2
Delaware Call #4
Pennsylvania Call #4
Delaware Call #8
Pennsylvania Call #8
Delaware Call #9
Pennsylvania Call #9
Delaware Call #12

Pennsylvania Call #14
Delaware Call #15
Pennsylvania Call #15
Pennsylvania Statutory Page 14
Pennsylvania Statutory Page 14
Pennsylvania Schedule W – Coal
Pennsylvania Schedule W

II. Group Reporting

Carriers may choose to report data as an individual company or group basis, or for separate subsets of carriers within a group. Carriers accomplish this with their submission of a carrier Contact Form which is then used in setting up the FDM. Statutory Page 14 information should be entered on an individual carrier basis for each company within the reporting entity. *(For specific Statutory Page 14 Information please refer to Section Three, Item VIII.)* If a carrier group elects to submit separate Calls for individual carriers within their group or to submit separate Calls for subsets of the carriers comprising their entire group, each separate Call submission will be treated separately for all purposes of the FDM and FDIP.

Carriers are required to report all Calls and Schedule W on a consistent basis and as defined in the carrier Contact Form. If a carrier feels that the FDM does not properly reflect a carrier or group's reporting preference, the carrier should contact the Bureaus immediately. Once the Call Acknowledgment is submitted, the Bureaus will prepare the application to process the data

accordingly. Carriers are encouraged to consider potential ramification of the FDIP and FDM in deciding on the basis (carrier, group, or subgroup) to be used in reporting their data.

III. Entering Data

The user must download the template of the Call for which they want to enter data. Once the data has been entered into the template, the user must then import the template into the corresponding Call on the FDM by using the *New Call* button and then selecting Import. The application accepts only whole numbers and rejects any decimals. Negative values should be entered with a negative sign preceding the numeric value. The application does NOT accept non-numerical entries in numerical data fields.

If at any time the application does not return the intended result the user should click on the *Refresh* browser button. When reporting data for multiple reporting entities, you must NOT use the *Back* button on your browser to move among the Calls. Instead, users should log in and out of the FDM to ensure that the FDM registers the identification information.

IV. Calculated Fields

For the user's convenience, some Call fields in the application are calculated or are automatically populated by the application. The user must not alter or try to alter calculated fields. Altering calculated fields may result in failed edits and the potential to incur large fines.

Fields that the application automatically populates will constantly be refreshed when the Call is Saved. Once a Call is submitted the fields are frozen.

V. No Experience

Calls should not be submitted for any state in which the carrier(s) has (have) never had experience. In this case, the Call Acknowledgements should be completed with *No Experience* checked off.

If a carrier has no Statutory Page 14, Line 16, Workers Compensation experience, the user should enter zeroes directly into the Statutory Page 14 fields. This will allow the Bureau to distinguish between carriers who incorrectly submit a blank Statutory Page 14 versus those with true zeros.

In instances where for one or more, but not all, of the Policy Year lines on the call, the carrier failed to have experience in a given state, input zeros across the appropriate Policy Year Line(s) for that state, or simply leave those fields blank.

Section Three – Specific Information on Entering Call Data

I. Call Acknowledgments

Prior to selecting a new Call year, the user must first select the **Acknowledgement** in the header menu. In the next step, the user will select the year that they wish to create a new call for and the carrier group as well as provide the contact email address. When completed, select the Save button.

The screenshot shows the 'Call Acknowledgements' form. At the top, there is a navigation bar with 'Home', 'Search', 'Acknowledgement', 'Call List', and 'FAQ'. Below this, the form title 'Call Acknowledgements' is centered. The form is divided into two main sections. The left section, titled 'Select a year and carrier group:', contains two dropdown menus: 'Year' with '2022' selected and 'Group' with 'AIG' selected. The right section, titled 'Confirm the contact email for AIG:', contains a text input field for 'Contact Email' with 'contact@email.com' entered. A 'Save' button with a green lock icon is located at the bottom right of the form.

The user will then be presented with the various call assignments that will apply to the selected carrier (group).

The screenshot shows the 'Call Acknowledgements' form with the 'Assignments for AIG:' section expanded. The form has the same navigation bar and title as the previous screenshot. The 'Select a year and carrier group:' section remains the same. The 'Assignments for AIG:' section contains a table with the following data:

Call	Will Submit	No Experience
1 DE	Will Submit	No Experience
1 PA	Will Submit	No Experience
2 DE	Will Submit	No Experience
4 DE	Will Submit	No Experience
4 PA	Will Submit	No Experience

The user will select the “*Will Submit*” option for the Calls that will be submitted for the selected carrier (group) and year. The user will select the “*No Experience*” option for the Calls that do not

have any data to report for the selected carrier (group) and year. When done acknowledging all Calls as either *“Will Submit”* or *“No Experience”*, the user will select the **Save** button.

Please be sure to click the **Save** button at the bottom of the screen to save the selections made for the Acknowledgement Form.

The screenshot shows a dark-themed interface with three rows of call data. Each row has a label on the left and two buttons on the right. The first row is labeled '15 PA' and has 'Will Submit' and 'No Experience' buttons. The second row is labeled 'PG. 14 DE' and has 'Will Submit' and 'No Experience' buttons. The third row is labeled 'PG. 14 PA' and has 'Will Submit' and 'No Experience' buttons. Below the rows, there is a text label 'Unassigned calls: Schedule W PA C, Schedule W PA S'. At the bottom, there is a blue 'Save' button with a green checkmark icon and a grey 'Cancel' button with a circular arrow icon.

15 PA	Will Submit	No Experience
PG. 14 DE	Will Submit	No Experience
PG. 14 PA	Will Submit	No Experience

Unassigned calls: Schedule W PA C, Schedule W PA S

Save Cancel

The user can change their applicability by selecting the appropriate year and then change the *“No Experience”* option to *“Will Submit”* or vice versa then select the **Save** button.

Once a user is prepared to work on the Calls they should click on the Call List located on the menu bar. The desired Call year and Carrier Group should be selected and a list of the Calls to be submitted will be displayed. The user should download and save the template for the Calls to be completed.

II. Policy Year Calls (#1, #8, #9 and #12)

Policy Year Calls #1, #8, #9 and #12 must be submitted using FDM. The layout of all the Policy Year Calls Collected within FDM are generally the same. The Calls differ only in the types of coverage collected, the amount of policy years collected and the additional reconciliation page required on Call #1.

The Policy Year Call layout requires 26 Columns to be completed for Delaware, and 22 Columns to be completed for Pennsylvania.

A. Premiums (Columns 1, 2, and 3)

All data is to be entered on an accumulated basis. The proper entering of premium field is essential to successfully passing the Call edits.

Once the premium data is entered into the template, imported and saved, the user can view the Ratio Report tab. This tab contains a report that displays the ratio of Column 2 (Standard Earned Premium at Company Level) to Column 1 (Standard Earned Premium at Bureau Level). The user can also view the Ratio Report – Info tab. This tab contains the ratio of calendar year premium reported for Terrorism and or Catastrophe premium compared to the calendar year net earned premium.

B. Losses (Column 4 through 7, Columns 9 through 18, Columns 21 through 26)

Since Columns 4 through 7 are calculated columns the user **must begin entering loss information on the Call template starting with Columns 9 through 14.**

C. The template will automatically calculate Columns 4 through 7 and Column 26 as you complete Columns 8 through 25. Claim Counts (Columns 8, 19 and 20)

Column 8 is not a calculated field. The user must enter claim count information into Column 8 as well as in Columns 19 and 20. The sum of Columns 19 and 20 will be verified against Column 8 during the edit process.

D. Line X (all Columns)

Line X is a calculated field that cannot be altered. Line X is the sum of all the individually reported policy year lines plus the “Prior to” line.

E. Line Y (all Columns)

Based on the Call instructions, the prior year’s Call Line X should equal the current Call’s Line Y. The values entered on Line Y will be checked against the Line X values reported on the prior year Call that was submitted to the Bureau when the user validates the Call.

If the user chooses to report Line Y values that do not match the prior years’ Line X, they are required to explain why they made these changes at the time of submission either in the Create Notes to Bureau section or in a letter via electronic or regular mail.

F. Line Z (all Columns)

Line Z is a calculated field that cannot be altered. Line Z represents the current years’ Calendar Year contribution by subtracting Line Y from Line X.

Once the template is completed, the carrier should import it using the **Import** function located on the sidebar.

The user should then click on the **Questions** section located on the sidebar which contains a series of questions. All carriers are required to respond to all questions. The answers to Questions #1 through #3 currently default to “Yes”. The user must review and change this answer as needed.

The user’s response to Question #1: Does your company currently report all bulk reserves for indemnity and medical under the IBNR columns 13 and 14? will determine if a carrier needs to complete Columns 15 through 18 on Section 1. If the user answers “YES” to Question #1, the user must leave Columns 15 through 18 blank. The template will allow the user to enter data into Columns 15 through 18 even if the response to Question #1 is “YES”, however, an error message will be generated when the edits are run alerting the user of this issue.

If the user answers “NO” to Question #1, and the company currently reports any bulk reserves for indemnity and medical under the outstanding excluding IBNR columns 11 and 12, the user must enter data into Columns 15 through 18. Then columns 15+16 on Section #1 must equal Column 11 and Columns 17+18 on Section #1 must equal Column 12. If the user does not enter data into Columns 15 through 18 when the response to Question #1 is “NO”, an error message will be generated when the Call is validated alerting the user of this issue.

(The user should refer to the specific Call instructions and consult with the appropriate people within their organization to determine the proper response to these questions.)

Columns 23 through 26 are required on Delaware Calls only.

G. Reconciliation Page

Section 3 of Call #1 is a Reconciliation Page. This page reconciles Call #1 data, various other Call data and other direct coverage data with the Statutory Page 14. The user must enter data on Lines 2, 3, 5, 6, 7, 8, 9, 10 and 13, if applicable. The application will automatically calculate and populate the remaining cells. If a difference greater than \$1,000 or less than -\$1,000 exist between the Calls and the Statutory Page 14, a validation will be generated for which the user must enter an explanation in the chat box provided.

Instructions for the Policy Year Calls – Calls #1, #8, #9, and #12 can be found on the Financial Call Package section of our Pennsylvania and Delaware websites—just go to www.pcrb.com, click on **Data Reporting**, then click on **Financial Data Reporting**, now select the **Financial Call Package** and the instructions are listed.

III. Delaware Calendar Year Expense Data – Call #2

The Calendar Year Expense Data Call #2 must be submitted using FDM. Data must be submitted on the same basis as reported on Call #1, i.e., individual versus group basis.

A. Layout

The Call consists of two sections, some of which contain calculated fields. Section 1 is to be filled in by the carrier. Section 2 is the Reconciliation Page. Once the user has uploaded their Call #2 template into FDM, the application will complete the Section 2 data fields for the user by pulling value from other Call data fields within the program. If no imbalance exist between the Call data and Statutory Page 14 the user will not be required to enter any additional information on this section.

However, if a difference exists greater than \$1,000 or less than -\$1,000 between the Call #2 and the Call #1 or the Call #2 and the Statutory Page 14, a validation error will be generated and the user will be required to enter an explanation in the chat box provided with the error message.

Instructions for the Delaware Calendar Year Expense Data – Call #2 can be found on the Financial Call Package section of our Delaware website—just go to www.pcrb.com, select DCRB and then click on **Data Reporting**, then click on **Financial Data Reporting**, now select the **Financial Call Package** and the instructions are listed.

IV. Large Claim Experience by Policy Year Call #4

The Large Claim Experience by Policy Year Call #4 must be submitted using FDM. When the user uploads the template into FDM, the application will automatically sum each Policy Year within each particular coverage code to allow the user to make immediate comparisons to data reported in other Policy Year Calls once the Call is validated.

A. Layout

Below is an excerpt of the Large Claim Experience by Policy Year Call #4 included within the application.

Note the user must use the Call #4 template and import it into FDM, but, the layout of the Call #4 in the application and the template are very similar:

	Policy Year	Claim Number	Indemnity Paid as of 12/31/2019	Indemnity Case Reserve as of 12/31/2019	Medical Paid as of 12/31/2019	Medical Case Reserve as of 12/31/2019	Indemnity Paid as of 12/31/2020	Indemnity Case Reserve as of 12/31/2020	Medical Paid as of 12/31/2020	Medical Case Reserve as of 12/31/2020	Deductible Amount
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
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22											
23											
24											
25											
26											
27											
28											
29											
30											
31											
32											
33											
34											
35											

The user should enter the claim information into the twelve columns provided. The carrier must enter both the current and prior year claim values on the template.

Home Search Acknowledgement Call List FAQ

2020 4 DE - DRAFT

	Policy Year	Claim Number	Indemnity Paid as of 12/31/2019	Indemnity Case Reserve as of 12/31/2019	Medical Paid as of 12/31/2019	Medical Case Reserve as of 12/31/2019	Indemnity Paid as of 12/31/2020	Indemnity Case Reserve as of 12/31/2020	Medical Paid as of 12/31/2020	Medical Case Reserve as of 12/31/2020	Deductible Amount
1	1975	DE200900001	7001	80001	91001	100001	6902	82001	90902	102001	
2	1975	DE200900002	7002	80002	91002	100002	7202	82002	92002	102002	
3	1987	DE200900003	7103	80003	90003	100003	7203	82003	92003	102003	
4	1987	DE200900004	7004	80004	90004	100004	6905	82004	89995	102004	
5	2002	DE200900005	7005	81005	90005	100005	7205	82005	92005	102005	
6	2002	DE200900006	7006	80006	90006	100006	7206	82006	92006	102006	
7	2012	DE200900007	7007	80007	90007	110007	7207	82007	92007	102007	100000
8	2012	DE200900008	7008	80008	90008	100008	7208	82008	92008	102008	
9	2015	DE200900009	7009	81009	90009	100009	7209	82009	92009	102009	
10	2015	DE200900010	7010	80010	90010	100010	7210	82010	92010	102010	
11	1981	DE200900011	7011	80011	90011	100011	7211	82011	92011	102011	
12	1982	DE200900012	7012	80012	90012	100012	7212	82012	92012	102012	200000
13	1989	DE200900013	7013	80013	90013	100013	7213	82013	92013	102013	50000
14	1990	DE200900014	7014	80014	90014	100014	7214	82014	92014	102014	350000
15	2000	DE200900015	7015	80015	90015	100015	7215	82015	92015	102015	
16	2001	DE200900016	7016	80016	90016	100016	7216	82016	92016	102016	100000
17	2009	DE200900017	7017	80017	90017	100017	7217	82017	92017	102017	
18	2010	DE200900018	7018	80018	90018	100018	7218	82018	92018	102018	110000
19	2016	DE200900019	7019	80019	90019	110019	7219	82019	92019	102019	
20	2013	DE200900020	7020	80020	90020	100020	7220	82020	92020	102020	
21	2013	DE200900021	7021	80021	90021	100021	7221	82021	92021	102021	
22	2013	DE200900022	7022	80022	90022	100022	7222	82022	92022	102022	370000
23	2014	DE200900023	7023	80023	90023	100023	7223	82023	92023	102023	
24	2014	DE200900024	7024	80024	90024	100024	7224	82024	92024	102024	500000
25	2015	DE200900025	7025	80025	90025	100025	7225	82025	92025	102025	
26	2051	DE200900026	7026	80026	90026	100026	7226	82026	92026	102026	630000
27	2017	DE200900027	7027	81027	90027	100027	7227	82027	92027	102027	
28	2016	DE200900028	7028	80028	90028	100028	7228	82028	92028	102028	
29	2016	DE200900029	7029	80029	90029	100029	7229	82029	92029	102029	
30	2018	DE200900030	7030	79363	90030	100030	7230	82030	92030	102030	
31	2018	DE200900031	7031	78864	90031	100031	7231	82031	92031	102031	
32	2019	DE200900032	7032	78365	90032	100032	7232	82032	92032	102032	150000
33	2019	DE200900033	7033	77866	90033	100033	7233	82033	92033	102033	

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Your temporary deployment key expires in 144 day(s).

Instructions for the Large Claim Experience by Policy Year - Call #4 of this application can be found on the Financial Call Package section of our Pennsylvania and Delaware website— www.pcrb.com, click on **Data Reporting**, then click on **Financial Data Reporting**, now select the **Financial Call Package** and the instructions are listed.

V. Pennsylvania Calendar Year Expense Data Call #14

The Pennsylvania Calendar Year Expense Data Call #14 must be submitted using FDM

A. Layout

For Section 1, simply enter the data in the fields provided on the template and proceed to the next section. Here is an excerpt of Section 1 of the Pennsylvania Calendar Year Expense Data, Call #14 included within the application and on the template:

Home Search Acknowledgement Call List FAQ

2020 14 PA - DRAFT

EXPORT	
IMPORT	
REF CALLS	2
ERRORS	

1. Loss Adjustment Expenses	
(a) Allocated Loss Adjustment Expenses – PAID	
(b) Allocated Loss Adjustment Expenses – INCURRED	
(c) Unallocated Loss Adjustment Expenses – PAID	
(d) Unallocated Loss Adjustment Expenses – INCURRED	
2. Acquisition	
(a) Commissions and Brokerage – INCURRED	
(b) Other Acquisition – INCURRED	
3. General Expenses – INCURRED	
4. Taxes, Licenses and Fees – INCURRED	

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Your temporary deployment key expires in 144 day(s).

Section 1 - PA Call #14 Section 2 - RECONCILIATION PAGE

Section 2 of the Call #14 is a reconciliation report that automatically pulls data from Section 1 once the template has been uploaded into FDM and compares it with data pulled from the Statutory Page 14. Any differences are calculated from this comparison. A *reason for differences* field is provided where any imbalance must be explained. Below is an excerpt of Section 2 of the Call #14 included within the FDM and is shown similarly on the template:

	Direct Allocated Loss Adjustment Expenses - PAID	Direct Allocated Loss Adjustment Expenses - INCURRED	Commissions & Brokerage Expenses	Taxes, Licenses & Fees
I. Calendar Year Call #14				
Section I, Line (1a)				
Section I, Line (1b)				
Section I, Line (2a)				
Section I, Line (4)				
II. Statutory Page 14 *				
III. Difference (explain in Q&A)* (II) - (I)	0	0	Powered by GrapeCity SpreadJS Your temporary deployment key expires in 144 day(s).	

Section 1 - PA Call #14 **Section 2 - RECONCILIATION PAGE**

Instructions for the Pennsylvania Calendar Year Expense Data – Call #14 can be found on the Financial Call Package section of our Pennsylvania and Delaware website—www.pcrb.com, click on **Data Reporting**, then click on **Financial Data Reporting**, now select the **Financial Call Package** and the instructions are listed.

VI. Policy Year Call for Catastrophe Experience #15

A. Layout

The Policy Year Call for Catastrophe Experience #15 must be submitted using FDM. Please review the Call #15 instructions to obtain a list of specific catastrophe codes included in Call #15 Layout.

The Call #15 requires the selection of “YES” or “NO” for question #1 and entry of the appropriate catastrophe code loss information. Keep in mind, however, that the Delaware Call #15—in contrast to the PA Call #15—also collects catastrophe code loss information on residual market business consistent with Delaware Call #12.

Below is an excerpt of the Policy Year Call for Catastrophe Experience #15 included within FDM and is shown similarly on the template:

2020 15 DE - SUBMITTED						
	Claims Closed with Payment	Open Claims	Total Claims	Indemnity Paid	Medical Paid	Indemnity Case O/S
	1	2	3	4	5	6
2000	100					
2001	100					
2002	100					
2003	100					
2004	100					
2005	100					
2006	100					
2007	100					
2008	100					
2009	100					
2010	100					
2011	100					
2012	100					
2013	100					
2014	100					
2015	100					
2016	100					
2017	100					

Instructions for the Policy Year Call for Catastrophe Experience – Call #15 can be found on the Financial Call Package section of our Pennsylvania and Delaware websites—just go to www.pcrb.com, click on **Data Reporting**, then click on **Financial Data Reporting**, now select the **Financial Call Package** and the instructions are listed.

VII. Pennsylvania Schedule W

Beginning with Call Year 2010, the FDRA (for calls valued as of December 31, 2018 and prior) and FDM (for calls valued as of December 1, 2019 and subsequent) will include the Pennsylvania Schedule W and Schedule W – Coal. The submissions provided must be consistent with prior year reports. For Pennsylvania Schedule W, the application includes the following parts:

- Part A-1, Part A-9740, Part A-9741, and Part A-5
- Part B-1 and Part B-5
- Part C-1 and Part C-5
- Part D-1 and Part D-2
- Part E-1 and Part E-2

Schedule W, Part A-Statistical Code 9740 and Part A-Statistical Code 9741 collect premium information with respect to the coverage provided by those statistical codes.

Schedule W – Coal includes the following parts:

- Part A-2, Part A-3, and Part A-4
- Part B-2, Part B-3, and Part B-4
- Part C-2, Part C-3, and Part C-4

Once the above pages are submitted, the application will automatically make all reported data pages available to the Bureau and the Pennsylvania Insurance Department hence, eliminating the need for two separate submissions of these parts.

Instructions for the Pennsylvania Schedule W Constraints affecting Unpaid Claims Estimates Submissions, Schedule W and Schedule W – Coal can be found on the Financial Call Package

section of our Pennsylvania website— www.pcrb.com, click on **Data Reporting**, then click on **Financial Data Reporting**, now select the **Financial Call Package** and the instructions are listed.

A. Pennsylvania Schedule W Constraints affecting Unpaid Claims Estimates Submissions

Pennsylvania Schedule W Constraints affecting Unpaid Claims Estimates Submissions (Constraints) should discuss any constraints that may have had a substantive impact on any unpaid claims estimate presented in your Schedule W.

Note please provide this information in a PDF document named “constraints.pdf”. Include in the document the Company or Group Name, NAIC Number and the Name and Company Title of the Person who completed the document.

This document must be submitted using FDM. To submit this document, click on the Attachments button that the top of the Call list, click on **Choose File**, select and **Upload** your document file.

Carriers who have written business for no more than one policy year (from 2010 and subsequent) and have not written any deductible policies during that period are exempt from submitting a completed Constraints document.

FDM will automatically make the provided document available to the Bureau, Pennsylvania Insurance Department and the Coal Mine Compensation Rating Bureau of Pennsylvania.

B. Part A-1, Part A-Statistical Code 9740, Part A-9741, and Part A-5

Parts A-1, Part A-9740, Part A-9741, and Part A-5 collect calendar year data. Although Parts A-1 and A-5 are identical in layout, each part collects different coverages on a calendar year basis. This requires the user to input data into Parts A-1 and A-5 of Schedule W. . Carriers should complete these sections in accordance to the Schedule W instructions.

C. Parts B-1 and B-5

Parts B-1 and B-5 collect indemnity policy year data. Parts B-1 and B-5 are similar in layout except for the type of coverages and the fact that B-5 does not have a Line 17 and 18 where B-1 does. Carriers should complete these sections based on the Schedule W instructions.

D. Parts C-1 and C-5

Parts C-1 and C-5 collect medical policy year data. Parts C-1 and C-5 are similar in layout except for the type of coverages and the fact that B-5 does not have a Line 17 and 18 as does C-1. Carriers should complete these sections based on the Schedule W instructions.

E. Parts D-1 and D-2

Parts D-1 and D-2 collect indemnity and medical data for large deductible business on a Net, as written, basis. These parts are identical in layout with the exception that D-1 is indemnity and D-2 is medical. Carriers should complete these sections based on the Schedule W instructions.

F. Parts E-1 and E-2

Parts E-1 and E-2 collect indemnity and medical data for large deductible business on a Gross, first dollar, basis. These parts are identical in layout with the exception that E-1 is indemnity and E-2 is medical. Carriers should complete these sections based on the Schedule W instructions.

G. Schedule W Review

Schedule W is subject to review by the Pennsylvania Insurance Department and the Bureau. For the user's convenience, the application contains one set of Schedule W edits that will be viewed by both entities. Carriers will only need to respond to one set of failed edits within the application for each submission. However, both entities may generate separate, additional edits based on the reasonableness of the data that are not contained within the application. This may require an additional response by the carrier to that single entity.

Various data fields contained within Schedule W reconcile to their counterparts on the Bureau Calls. Comparison edits will run when editing Schedule W and the Bureau Calls to ensure all Schedule W fields reconcile with their counterparts. The edits are contained within both sections so that if a change is made to Schedule W, it will alert the user to carry over the changes to the Bureau Calls and vice versa. Accordingly, the user may address the Schedule W and Call comparison edit failures when submitting the Calls and/or when submitting the Schedule W. Keep in mind, responses provided to the comparison edit failures of these submissions are viewable by the Pennsylvania Insurance Department

For additional information regarding responding to failed edits please refer to Section Three, Item X.

H. Schedule W – Coal

As noted above in Section Three, item VII, Schedule W – Coal includes Part A-2, A-3, A-4, B-2, B-3, B-4, C-2, C-3, and C-4. The data collection forms for these parts are similar to the forms used for Schedule W. As such, data entry for the parts included in Schedule W – Coal should be carried out in the same manner as it is for Schedule W.

I. Schedule W – Coal Review

Although any review of the Schedule W – Coal data will be the responsibility of the Pennsylvania Insurance Department and/or the Coal Mine Compensation Rating Bureau

of Pennsylvania, edits for the Schedule W – Coal edits will be akin to the Schedule W edits for comparable parts.

VIII. Statutory Page 14

A Statutory Page 14 entry is required for a carrier or each carrier in a carrier group. The Carrier group The template will automatically calculate a carrier group grand total that will be used for reconciliation purposes throughout the application.

A. Layout

The Statutory Page 14 layout resembles the hard copy version contained within the Statutory Page 14. Here is an excerpt of the Statutory Page 14 included with the application and shown similarly on the template:

2020 PG. 14 DE - SUBMITTED ^															
	NAIC Carrier Number	Carrier Name	Carrier Number	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policy Holders on Direct Business	Direct Unearned Premiums Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1	979	AIC2 TEST CARR979IER	979	10000	12000	13000	14000	15000	16000	17000	18000	19000	20000	21000	22000
2	980	aic2a test carrier	980	20000	21000	22000	23000	24000	25000	26000	27000	28000	29000	30000	31000
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															

The user should enter the values that appear on the company's Statutory Page 14 Line 16, Workers Compensation. When reporting on a group basis the user should enter the Statutory Page 14 data for all of the individual companies associated with your group, regardless of state. If a carrier has no experience for one particular carrier the user should enter zeros for that carrier.

Note since a hardcopy of Statutory Page 14 is no longer required with the Call submissions, Statutory Page 14 values will be verified against the Bureau Premium Call and A.M. Best Publications.

IX. Running the Edits Contained within FDM

(Refer to Section One – General Application Instruction, VIII. Menu Items, A. Call Submissions, 1. Navigation in a Call on FDM, d. Run Edits, for additional detail.)

One of the features of FDM is that it allows the user to run all edits on the Calls and the Schedule W prior to submission. The user is provided an opportunity to resolve errors and/or explain any data discrepancies or anomalies that exist in a given submission.

Note all calls are subject to additional editing by the Bureau and Pennsylvania Insurance Department staff. The additional Actuarial edits do NOT conform to rigid criteria and therefore

cannot be included within FDM. Generally, these edits identify unusual data reporting patterns and will require further investigation or verification by the carrier.

Edits can be run on **Saved** and **Submitted** Calls as many times as necessary. The user can also run edits on any combination of the Calls. Once the user clicks on the *Validate* button, the edits are ran through the system and any errors will populate the *Errors tab*.

By default, the application will choose the most recent Submitted Call over a Saved Call. If no Submitted Call exists, FDM will default to the Saved Call. If the user wishes to change the default Calls they must click on the *Ref Calls* button on the lefthand side. There they can change the reference call as necessary. See the example below:

The screenshot shows the Financial Data Manager application interface. At the top, there is a navigation bar with links: Home, Admin, Search, Acknowledgement, Call List, and FAQ. Below this is a header for '2020 4 PA - DRAFT'. The main area contains a table with columns: Policy Year, Claim Number, Indemnity Paid as of 12/31/2019, Indemnity Case Reserve as of 12/31/2019, Medical Paid as of 12/31/2019, Medical Case Reserve as of 12/31/2019, and Indemnity Paid as of 12/31/2020. A yellow arrow points to the 'REF CALLS' button on the left sidebar. A dialog box titled 'Reference Calls for 4 PA 2020' is open, showing options to select a reference call for different policy years. The dialog box has three sections: 'Select a Call 4 PA 2019 to use as a reference call:', 'Select a Call 1 PA 2020 to use as a reference call:', and 'Select a Call 9 PA 2020 to use as a reference call:'. Each section has radio buttons for 'Draft' and 'Submitted' calls. The 'OK' button is highlighted in green.

	Policy Year	Claim Number	Indemnity Paid as of 12/31/2019	Indemnity Case Reserve as of 12/31/2019	Medical Paid as of 12/31/2019	Medical Case Reserve as of 12/31/2019	Indemnity Paid as of 12/31/2020
1	1975	PA200900001	3101				
2	1975	PA200900002	3102				
3	1980	PA200900003	3103				
4	1985	PA200900004	3104				
5	1986	PA200900005	3105				
6	1987	PA200900006	3106				
7	1988	PA200900007	3107				
8	1989	PA200900008	3108				
9	1990	PA200900009	3109				
10	1991	PA200900010	3110				
11	1992	PA200900011	3111				
12	1993	PA200900012	3112				
13	1994	PA200900013	3113				
14	1995	PA200900014	3114				
15	1996	PA200900015	3115				
16	1997	PA200900016	3116				
17	1998	PA200900017	3117				
18	1999	PA200900018	3118				
19	2000	PA200900019	3119				
20	2001	PA200900020	3120				
21	2002	PA200900021	3121				
22	2002	PA200900022	3122				

The user can click on the radio button next to the version of the Call they wish to use for the comparative edits. Once the user has made their choices, the user can click on the Ok button as shown above.

Before running the edits, users should complete and save all of their required Calls because many of the Call edits are a function of another Call's entries.

If the user runs the edits prior to having all the Calls saved, the application will indicate that the Call is not available instead of displaying the version it is using for comparative purposes.

If the user wishes to proceed editing without the other Calls being available, they can click on the **OK** button. If the user decides not to proceed they should close the window by clicking the **Cancel** button.

Once the application performs all of the edits, the user must click on the Errors link on the left of the Call for the edit results. If the Call does not pass all FDM edits the application will return a Failed Edit List. The listing is segregated by type of edit. (Refer to Section One – General Application Instruction, VIII. Menu Items, A. Call Submissions, 1. Navigation in a Call on the FDM, d. Run Edits, for more detail.) The user should page down to review the entire list of failed edits.

In order to print out the edits, navigate to the search tab at top of the application and select failed edits. From that window, fill out the necessary information to see a list of the edits. After this list is selected, the export button will allow you to save the failed edits. See the example below:

To close the edits, simply click the Errors button on the left of the failed edit list. The Notes button allows the user to attach a note to a Call that can be viewed by the Bureaus or Department. This feature is discussed below in Section X, Items A and B.

This *Failed Edit List*, combined with the ability to immediately correct the items on the *Failed Edit List*, is an important attribute of this application. The ability to edit the data prior to submitting will provide carriers with an effective and efficient method of improving the quality of data submissions. For some carriers, reviewing the Failed Edit List may initially be time-consuming, but the benefit will quickly outweigh the time spent if additional resubmissions and interactions between the carriers and the Bureaus were necessary.

X . Responding to Failed Edits

The user should respond to failed edits through FDM only. This can be done through the **sidebar Notes** section of FDM.

The sidebar Notes section responses should be made during the following periods:

- At the time of submission
- After submissions but before official Bureau criticism
- After Bureau criticism

Please review the **Sidebar Notes** section for additional instruction.

A. Sidebar Notes Method of Explaining Errors (at the Time of Submission)

The sidebar Notes method provides the user with an opportunity to explain failed edits and data anomalies at the time of the electronic submission. Using this feature may eliminate the need for additional communication among the Department, the Bureau and the Carriers.

The **Notes** section allows for a limit of 5000 characters. If your notes require more space than that, you should respond to failed edits through one of the two other methods listed above.

To begin creating notes for the first time, the user must click on the **Notes** button located on the sidebar while viewing a Call. When the user clicks the button, a window will open where the user can begin typing. After entering the notes the user should click on the Send button if the user wishes to save the **Notes**. **Notes** have been saved when the message is sent in the window.

If the user is responding to a particular failed edit, they should reference the edit number followed by the explanation. However, responses to particular edits should be made via the *chat box* icon of the failed edit.

All sidebar Notes are attached to a particular Call. The notes can be viewed by clicking on the **Notes** button. The notes can be viewed and modified when the call status is **Saved**. If the user would like to add more notes after they have already **Created Notes to Bureau**, they must click the Notes button and continue typing. This new application has the ability for staff to answer your notes directly.

Note that if you revise a Call, you must make the revisions in the Call template and then import the Call into FDM. As a result, any **Notes** pertaining to that Call will have to be re-entered if they are still applicable.

B. Carrier Notes sent via Email, After Call Submission

If a carrier wishes to address edit features at a time other than at the time of submission. The user must notify the Bureau by typing a message in the sidebar **Notes** section that state when and by what method they plan to discuss their edit failures. Please be advised that the Bureau encourages the use of responding to all failed edits or data anomalies through the validation chat boxes or the sidebar **Notes** section of the application.

XI. Bureau Criticisms

After receipt of a carrier's submission, the Bureau will edit the carrier's data. The Bureau will review all notes sent in the Error Response section accompanying each error during the edit process. If the submitted **Notes** do not address all failed edits or anomalies discovered when running edits, the Bureau will notify the carrier by email to the carrier appointed contact person.

The results will also be posted in the FDM application. The **Errors** feature allows the user to immediately see if a criticism has been issued. If a criticism exists (or ever existed) it will be listed under the Errors tab.

Below is an example of how to view the criticism submitted from the Bureaus.

The screenshot displays the FDM application's 'ERRORS' interface. On the left sidebar, the 'ERRORS' icon is highlighted with a yellow arrow and a '651' badge. The main content area features a search bar containing the text 'crit'. Below the search bar, there are filter options for 'Severity' (Warning, Requires Response, Fatal, Criticism, Requires Admin) and 'Status' (Unresolved, Accepted, Rejected). To the right, a table titled '2020 1 DE - SUBMITTED' is partially visible, showing columns for 'At Level', 'Net Premium', 'Total Paid (9)+(10)', 'Total Outstanding Excluding IBNR (11)+(12)', and 'Total IBNR(13)'. The table contains multiple rows of data, all showing '0' in the 'Total Outstanding' and 'Total IBNR' columns.

The user should review all Criticisms received from the Bureau. The user should then make the necessary changes to the data and resubmit the Call and/or send an explanation to the Bureau through either the application when resubmitting, or by electronic mail when not resubmitting.

Please note that the provisions of the FDIP are applicable and are specific regarding responses that are found to be incomplete. Copies of all Criticisms will continue to be emailed to the carrier's Designated Contact Person.

XII. Troubleshooting

If at any time the application does not return the intended result the user should click on the Refresh button located on the internet browser toolbar.

If the user experiences any problems with the application that they cannot resolve, please contact the Bureaus at (215) 568-2371.

Section Four – Edit Listing

I. Calls Subject to the FDIP

With FDM, all Calls and forms are subject to the provisions of the Financial Data Incentive Program (FDIP) except for Schedule W – Coal. For Calls subject to the FDIP, a complete list of edit descriptions by Call and state is available within the FDIP.

II. Schedule W – Coal

A complete listing of Schedule W – Coal edits are available in FDM. While edits will be available within FDM for the Schedule W – Coal document, review of that data will be the responsibility of the Pennsylvania Insurance Department and/or the Coal Mine Compensation Rating Bureau of Pennsylvania (CMCRB). Carriers should contact the Bureau and/or the CMCRB for any additional information regarding edits or the editing process of this document.