

Washington state data call regarding 2023 Gray Fire and Oregon Road Fire

Submission of worksheets

To access the data collection software, all company contacts who plan to submit data on behalf of the company will need to send an email to help@naic.org requesting that they be assigned the two roles listed and highlighted below. To avoid unnecessary delays filing your first report, please send the email to NAIC help desk as soon as you know who will be submitting the data on your company's behalf.

The reports must be submitted using the prescribed template, available HERE.

The first template, "WA_2024_FIREALLLINES", includes all coverage types and should be submitted to the data call in RDC labeled WA_2024_FIREALLLINES. The role to request from the NAIC for this data call is RDC_WA2024FIREALLLINES_USER_PR

The second template, "WA_2024_RESIDENTIALFIRE", includes residential property only and should be submitted to the data call in RDC labeled WA_2024_RESIDENTIALFIRE. The role to request from the NAIC for this data call will be RDC_WA2024RESIDENTIALFIRE_USER_PR.

Once the permission is assigned, the report must be submitted by logging into the **NAIC reporting portal**, selecting "PAC" as the "datacall group," and select the correct file name you are submitting. Before attempting to submit a file, please review the "File Submission Guide."

Each company that has a loss associated with the wildfire event should submit the required information. Please do not submit one file for an entire group.

The first report is due by August 15, 2024, containing cumulative claims data as of July 31, 2024. Below is the reporting schedule:

Data Call Reporting Schedule:

Data Call Report Number	Cumulative Claims Data Reported As Of	Report Due Date
1st Report	July 31, 2024	August 15, 2024
2nd Report	August 31, 2024	September 15, 2024
3rd Report	December 31, 2024	January 15, 2025
4th Report	March 31, 2025	April 15, 2025
5th Report	May 31, 2025	June 15, 2025
6th Report	August 31, 2025	September 15, 2025

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WA 2024 FIREALLLINES

INTRO TAB

Please note the intro tab has yellow highlighted data fields that must be completed. NAIC Company Code is a required field. Your file will fail without it.

If you are an Excess & Surplus line company in Washington state, please enter 'YES' in the 'Excess & Surplus Lines' box. If your company is authorized in Washington state, leave BLANK.

RESIDENTIAL PROPERTY TAB

The intent of this tab is to collect cumulative losses on an aggregate level that should correspond with the WA_2024_RESIDENTIALFIRE worksheet. This tab and that worksheet should NOT include renter/tenant policies.

COMMERCIAL PROPERTY TAB

The intent of this tab is to collect cumulative losses on an aggregate level for all commercial property coverage.

PERSONAL AUTO TAB

The intent of this tab is to collect cumulative losses on an aggregate level for all private personal auto coverages.

COMMERCIAL AUTO TAB

The intent of this tab is to collect cumulative losses on an aggregate level for all commercial auto coverages.

BUSINESS INTERRUPTION TAB

The intent of this tab is to collect cumulative losses on an aggregate level only for the BI coverage found within commercial property policies.

ALL OTHER LINES OF BUSINESS TAB

The intent of this tab is to collect cumulative losses on an aggregate level for any line of business not identified in the previous tabs.

WA_2024_RESIDENTIALFIRE

INTRO TAB

Please note the intro tab has yellow highlighted data fields that must be completed. NAIC Company Code is a required field. Your file will fail without it.

If you are an Excess & Surplus line company in Washington state, please enter 'YES' in the 'Excess & Surplus Lines' box. If your company is authorized in Washington state, leave BLANK.

There is an additional question asking what methodology your company currently uses for establishing Structure coverage value. The intent of this question is to understand how your company calculates the appropriate structure coverage limit for your insured's policy. Please list how your company determines the policy limit for COV A. If no software is used, please say NONE.

RESIDENTIAL PROPERTY TAB

It should include all data for personal line policies that cover homeowners, mobile homes, manufactured homes, and condo/townhouses. The Residential spreadsheet should NOT include renter/tenant policies.

Column A: List the claim number as identified to your insured.

Column B: List the policy number as listed on the declaration page provided to your insured.

Column C: Answer yes if the property is your insured's primary residence.

Column D: Identify when your insured began uninterrupted coverage with your company prior to loss.

Column E: Identify the data of loss for the identified claim number.

Column F: Date your company closed this claim. If claim is still open, leave BLANK.

Columns G and H: If your company has chosen to issue a nonrenewal or cancelled the policy after the date of loss, provide the date the policy terminated.

Column I: This column relates to Column D. Please list the coverage amount of COV A when your insured first began uninterrupted coverage with your company prior to loss. Do NOT include endorsements or options that increased the base limit, like inflation guard and extended replacement cost.

Columns J, K, and L: List the coverage amount for Structure, Other Structure, and Contents/Personal Property.

Columns M and N: The intent of these columns is to collect Additional Living Expense coverage amounts. If the policy only offered a dollar amount of coverage, leave column M BLANK. If the policy only offered a time allotment of coverage, leave column N BLANK. If the policy had both a dollar amount and time allotment of coverage, then complete both columns M and N.

Column O: Please identify if the policy provided debris removal as an additional coverage that went beyond the policy limit of COV A.

Column P: List the policy's debris removal benefit as a percentage of COV A. Do NOT Include the percentage symbol % in your response.

Column Q: List the policy's ordinance and law benefit as a percentage of COV A. Include the endorsement amount as applicable. Do NOT Include the percentage symbol % in your response.

Column R: List the percentage amount of additional endorsements or policy options that extend coverage beyond the base COV A policy limit. If a policy has an extended replacement cost benefit and an inflation guard type of coverage, combine the total. Do NOT Include the percentage symbol % in your response.

Column S: Identify if the policy has guaranteed full replacement cost benefit.

Columns T - X: List the total dollar amount per coverage that has been issued to your insured, and/or their representatives, due to the wildfire loss.

Column Y: List the total dollar amount of paid loss for this claim.

Column Z: List the total dollar amount for the case incurred loss. This will include paid loss and any reserve identified for this claim.

Column AA: List the total dollar amount identified as defense and cost containment expenses for this claim.

Column AB: List the total square footage of the residential structure. Do NOT include any attached or unattached garage footage. You may list the square footage data from your underwriting file or claim investigation.

Column AC: List the dollar amount, per month of the policy term, for the premium charged for COV A at the date of loss.

Column AD: The intent of this column is to see the change in premium from date of loss to the current term of the policy. If no change, then the amount should equal column AC. IF the policy has been nonrenewed or cancelled, leave BLANK.

Column AE: Identify the base HO or DP policy form. If unable to attribute this policy to a base HO or DP form, list OTHER.

Columns AF-AJ: List the address of the insured's covered property loss location.

Column AK: Relates to dispute resolution. Identify if your company and/or your insured has initiated the appraisal clause within the policy. If the appraisal process was initiated by either party, answer YES. If the appraisal process was initiated by either party and has concluded, answer YES.

Column AL: Relates to dispute resolution. Identify if this claim is in active litigation.