

REVISED
FILING INSTRUCTIONS FOR THE
VIRGINIA ASSESSMENTS PACKET
FOR YEAR ENDED DECEMBER 31, 2013

YOU ARE NOW REQUIRED TO FILE THE ASSESSMENTS PAYMENT VOUCHER AND SUBMIT A SINGLE CHECK IN PAYMENT OF ALL ASSESSMENTS DUE. Any assessment packet containing a payment and submitted without the ASSESSMENTS PAYMENT VOUCHER will be sent back to the insurer with instructions to file the Voucher. Penalty and interest WILL be applied to all payments received after the due date. The ASSESSMENTS PAYMENT VOUCHER can only be obtained from our website. See additional details under ASSESSMENTS PAYMENT VOUCHER section below.

FORMS

The specific forms required to be filed by your company are listed by NAIC Number on this website only. After reading these instructions, you will enter your company's NAIC Number on the **Annual Assessment Packet Download Acknowledgement** screen and click on **Look Up**. The forms will appear in link format. Click on the link and the actual form will appear. Forms may still be completed on-line, but must be printed out and mailed to the Bureau along with the Payment Voucher and one check for the total amount owed. The Assessment for the Maintenance of the Bureau of Insurance is subject to a \$300 minimum.

DO NOT FILE ANY FORM THAT IS NOT REQUIRED OF YOUR COMPANY. Any form and payment filed that is not required will NOT be returned.

All assessment forms have been revised for 2013. **IT IS THE COMPANY'S RESPONSIBILITY TO MAKE SURE ALL FORMS ARE FILED.** If a form has not been listed on the assessment packet link, it *usually* means the form is not required of your company. However, if the form has been required in the past, contact Joyce Jones, (804) 371-9096, to ascertain whether the form is still required. All forms are due on or before March 1, 2014. If March 1st falls on a Saturday, Sunday or holiday, the next business day is used as the due date. Virginia accepts the postmark date as timely filed.

ALLASSESSMENT CALCULATIONS MUST BE CARRIED OUT TO THE CENTS.
PREMIUMS MUST BE SHOWN IN WHOLE DOLLARS.

MERGERS DURING 2013

Mergers are NOT recognized in Virginia the same date as in the home states of the merging companies. The merger is recognized and effective in Virginia on the date the appropriate paperwork has been accepted by the Clerk's Office of the State Corporation Commission, which then notifies the Bureau of Insurance of the merger.

IF THE MERGER IS EFFECTIVE IN VIRGINIA ANY TIME DURING 2013, ONLY THE SURVIVING COMPANY SHOULD FILE THE 2013 ASSESSMENT PACKET. The surviving company must file combined assessment forms that include the merging company's premium.

ASSESSMENTS PAYMENT VOUCHER – must be completed on-line via our website

A SINGLE check for the total of all amounts due is required. The AMOUNT DUE from each form must be entered on the Assessments Payment Voucher. The check should be made payable to the TREASURER OF VIRGINIA and must exactly match the total amount due per the Voucher.

The Assessments Payment Voucher should not be filed if no payment is being made.

DO NOT SEND A COVER LETTER.

The letter is separated from the forms and provides no proof that all forms were filed.

DO NOT SEND ASSESSMENT FORMS INSIDE THE ANNUAL STATEMENT/ANNUAL LICENSE RENEWAL PACKET.

DO NOT FILE THE ASSESSMENT FORMS WITH THE ANNUAL STATEMENT OR ANNUAL LICENSE RENEWAL PACKET. The assessment forms are NOT part of the Annual Renewal (Annual Statement) Packet. **Forms included with the Annual Statement/Annual License Renewal Packet and received in the Administrative Assessment Unit after March 1 will be considered late.** The Maintenance Assessment Report is subject to a \$50 per day Late Form Filing Fine. All payments made subsequent to March 1 are also subject to penalty and interest. Any filing extensions granted for the Annual Statement **DO NOT APPLY** to the Assessment forms.

MAILING ADDRESS FOR ALL ASSESSMENT PACKET FORMS AND PAYMENT

(DO NOT SEND ANNUAL STATEMENTS TO THESE ADDRESSES)

Assessment reports and payments stamped by an individual metering machine that does not reflect a postmark date will be recorded on the date received. You will be subject to penalties and interest if received after the due date.

REGULAR MAIL

State Corporation Commission
TAA Insurance 2
P. O. Box 759064
Baltimore, MD 21275-9064

OVERNIGHT OR EXPRESS MAIL

State Corporation Commission
TAA Insurance 2
Lockbox 759064
7175 Columbia Gateway Drive
Columbia, MD 21046

If you are sending forms/checks via CERTIFIED MAIL or OVERNIGHT OR EXPRESS MAIL, you **MUST** write the Certified Article Number or the Tracking Number in the space provided in the "Preparer's Name" box. The Article/Tracking Number must appear on all forms submitted in that packet. This information will be used, when necessary, to verify receipt of forms.

COMPUTER GENERATED FORMS

Computer generated forms must be approved **ANNUALLY** by the Bureau of Insurance prior to use. The software packages used to complete the assessment packet must be updated each time the software company updates the program. If any form within the packet displays the incorrect Form ID number, the entire packet of forms will be returned to the company. Re-mailed assessment packets postmarked after the due date will be considered filed late. The Maintenance Assessment Report **WILL BE SUBJECT TO THE LATE FORM FILING FINE OF \$50 PER DAY AND IT WILL NOT BE WAIVED.** The Assessments Payment Voucher is **NOT INCLUDED** in the software packages and must be obtained from our website; however, it is considered a part of the assessment packet. THE BUREAU OF INSURANCE WILL NOT BE HELD RESPONSIBLE FOR ANY ERRORS THAT OCCUR DUE TO FILING COMPUTER GENERATED FORMS.

The Bureau has approved forms generated by the following companies.

TriTech Software Development Corp.
1205 S. Greenville Ave.
Allen, TX 75002

Eagle Technology Management, Inc.
1425 60th Street NE, Suite 400
Cedar Rapids, IA 52402

Corptax LLC
1751 Lake Cook Road, Suite 200
Deerfield, IL 60015

DIRECT GROSS PREMIUM INCOME

Includes:

all premiums, assessments, dues and fees collected, received or derived, or obligations taken therefore, from business in the Commonwealth of Virginia during the calendar year 2013. Reciprocal or inter-insurance exchanges shall include in this report the gross premium or deposit income collected, received or derived from and credited to the accounts of subscribers from business in Virginia during 2013, decreased by all returns for cancellation and all amounts returned to subscribers or credited to their accounts as savings.

Finance and Service Charges shown on Schedule T that are not included in direct written premium.

Uninsured Motorist Fund distribution as shown in the Annual Statement as automobile liability premium. It will be necessary to manually adjust the Annual Statement if this distribution was received after December 31st. The UM Fund premium is to be shown in the box on Line 1 of the Maintenance Assessment Report. Penalty and interest **will be due** if this amount is not shown and has to be added as additional premium during the audit.

Fair Plan Premium as reported to you by the Virginia Property Insurance Association. This premium must be shown in the space provided under Line 1 of certain forms. It will be necessary to manually adjust the Annual Statement if this distribution was received after December 31st. Penalty and interest **will be due** if this amount is not shown and has to be added as additional premium during the audit.

Excess Workers' Compensation Insurance premiums shown on Line 17.3 of Page 19 of the Annual Statement. In the absence of such proper segregation of premiums, a reconciliation is required to be shown on each report it affects, accounting for excess liability premiums.

Cash Surrender Values used to purchase replacement policies are included as direct gross premium income. In the absence of proper reporting of such premiums, a reconciliation is required to be shown on each report it affects, accounting for cash surrender values.

A Total Assessable Premium that is negative should be treated as zero. Negative premiums do not result in a refund.

DIRECT GROSS PREMIUM INCOME (cont.)

Excludes:

premiums received for reinsurance assumed from licensed insurance companies; premiums that provide life, accident and sickness insurance issued on a group basis insuring your employees, agents and representatives; Federal Employee Health Benefit Plan premiums; federally reinsured crop insurance premiums; federal flood insurance premiums; Medicare Part D premium and Medicare Advantage premium.

Deductions:

cannot be taken for dividends paid nor on any other account except for premiums returned on canceled policies or on account of a reduction in rates or a reduction in the amount insured. Mutual insurers, other than life companies, may deduct refunds or returns made to policyholders otherwise than for losses.

RECONCILIATION OF PREMIUMS TO ANNUAL STATEMENT INFORMATION

DO NOT SUBMIT A COPY OF THE STATE PAGE NOR SCHEDULE T FROM THE ANNUAL STATEMENT.

Reconciliations **MUST BE SHOWN IN THE SPACE PROVIDED ON THE FORM** in any instance where reported assessable premium differs from the total premium shown on the State Page and/or Schedule T of the Annual Statement. The reconciliation must be provided on each form.

ASSESSMENT ADDRESS AND CONTACT INFORMATION

The CONTACT INFORMATION must now be updated on-line. Click on the [Update Assessment Address and Contact Information](#) link in the "Insurance Company: Assessment Filing Information" area of the website. Enter your company's Login Code (which has been provided to you in the letter sent earlier). The CONTACT INFORMATION currently on file will appear. If you wish to change the current information, click YES to the question at the bottom of the screen. Enter the revised information and click UPDATE CONTACT INFORMATION. **A one (1) line street address of no more than 40 characters is now required.** An e-mail confirming the change, displaying both the old and new information, will be sent to the e-mail address entered.

The contact should be the person responsible for answering questions regarding information stated on the assessment forms. The Assessment Contact Information must be kept current. **Failure to change this information, as necessary, could result in the misdirection of critical information, which may cause penalties and/or interest to be assessed.**

FRAUD ASSESSMENT REPORT

The Fraud Assessment is equal to 0.05 of 1% of **written premium, including finance & service charges**, for all property and casualty lines, except title. For Workers Compensation Group Self-Insurance Associations, this assessment is calculated on Manual Premium.

MCHIP (MANAGED CARE HEALTH INSURANCE PLAN) ASSESSMENT REPORT

The MCHIP Assessment IS NOT being collected for assessable year 2013.

ADDITIONAL INFORMATION

The check submitted **MUST** match the total amount shown on the Assessments Payment Voucher. At the present time, the Bureau of Insurance does not have the capability to accept any Electronic Funds Transfer (EFT) assessment payment transactions. Notification will be sent to all companies if this capability becomes available.

If you have questions regarding any of the above information or any of the forms provided, please contact Joyce Jones at (804) 371-9096, or via e-mail, Joyce.Jones@scc.virginia.gov, prior to filing the forms.

Links are provided for relative statutes of the Code of Virginia and an assessment rate chart. Forms can be filled out on-line, but must be printed and mailed. We DO NOT accept electronic filings of any assessment report.

YOU MUST OBTAIN THE ASSESSMENTS PAYMENT VOUCHER FROM OUR WEBSITE. SOFTWARE COMPANIES DO NOT HAVE THIS FORM IN THEIR SOFTWARE. COMPANIES USING SOFTWARE TO PREPARE THE ASSESSMENT FORMS SHOULD VERIFY THE FORMS REQUIRED OF YOUR COMPANY WHILE IN OUR WEBSITE.

[I have read these instructions in their entirety and wish to proceed to download the appropriate annual assessment forms.](#)