

## 2 - Policy Year Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (4)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (5)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.4	Actuarial	For Lines (A) through (U), Indemnity Paid Losses (Column (4)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 10,000 from the prior call.
2.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (5)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decrease more than 10,000 from the prior call.
2.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
2.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (5) + Column (7)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.01 6th & prior .98 to 1.05 5th .98 to 1.05 4th .94 to 1.20 3rd .90 to 1.30 2nd	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
2.9	Actuarial	Line (V) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be <= to Line (V) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses are greater than accident year losses.
2.10	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be less than or equal to the corresponding Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) + the Prior Policy Year Losses. (Threshold of 10)	Accident year losses are greater than the sum of two policy year losses.
2.11	Actuarial	Line (A) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be greater than Line (A) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses on the prior to line (line a) are less than the accident year losses on the prior to line (line a).

## 2 - Policy Year Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.12	Basic	For Policy Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) must be > 0	Losses are reported without claim counts.
2.13	Basic	For Policy Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) must be > 0.	Claim counts are reported without losses.
2.14	Actuarial	For Policy Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) are greater than \$100,000, then the sum of DCC expenses (Column (13) through Column (14)) should be greater than 0.	Losses are reported without DCC expenses.
2.15	Actuarial	For Lines (X) and (Z) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) must equal Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year loss totals do not equal accident year loss totals.
2.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1)) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) should be greater than 0.	Premium is reported without losses.
2.17	Basic	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1)) must not be 0.	Losses are reported without premium.
2.18	Actuarial	For Lines (X) and (Z) Policy Year Accumulated Closed (With Payment) and Open Outstanding (Column (11), Column (12)) must equal Accident Year Accumulated Closed (With Payment) and Open Outstanding (Column (8), Column (9)).	Policy year claims counts do not equal accident year claim counts.
2.19	Basic	Line (V) Line (V) Policy Year Accumulated Closed (With Payment), Open Outstanding (Column (11), Column (12)) should be <= to Accident Year Accumulated Closed (With Payment), Open Outstanding (Column (8), Column (9)).	Claim counts on the policy year call line v are greater than claim counts on the accident year line v.
2.20	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Accumulated Closed (With Payment) , Open Outstanding (Column (8), Column (9)) should be less than or equal to the corresponding Policy Year Accumulated Closed (With Payment) , Open Outstanding (Column (11), Column (12)) + the Prior Policy Year Losses.	Accident year claim counts are greater than the sum of two policy year claim counts.
2.21	Actuarial	Line (X) (Columns (1) through (18)) on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
2.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 4) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.

## 2 - Policy Year Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.23	Actuarial	<p>For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 5) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).</p> <p>.975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.03 10th .95 to 1.04 8th &amp; 9th .95 to 1.05 6th &amp; 7th .95 to 1.05 5th .95 to 1.08 4th .95 to 1.20 3rd .95 to 1.50 2nd</p>	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.30	Actuarial	For Lines (A) through (V), Standard at Bureau Designated Statistical Reporting Level (Column (1)) should not equal Net Premium (Column (3)), unless the value equals 0.	Standard at Bureau Designated Statistical Reporting Level is equal to Net Premium.
2.31	Actuarial	For Lines (A) through (V), Standard at Company Level (Column (2)) should not equal Net Premium (Column (3)) unless the value equals 0.	Standard at Company Level is equal to Net Premium
2.32	Actuarial	For Lines (B) through (V), the ratio of the Standard at Company Level (Column (2)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Company Level to Net is outside of listed range.
2.34	Actuarial	For Lines (B) through (V), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Designated Statistical Reporting Level to Net is outside of listed range.
2.36	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Designated Statistical Reporting Level from prior year to current call is outside of listed ranges.
2.37	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Company Level (Column (2)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Company Level Company from prior year call to current call is outside of listed ranges.
2.38	Actuarial	<p>For Lines (A) through (U), the ratio of the Net Premium (Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th - prior)</p> <p>.99 to 1.01 5th - prior .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of Net from prior year call to current call is outside of listed ranges.

## 2 - Policy Year Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.39	Basic	For Lines (A) through (V), Standard at Company Level (Column (2)) must be less than or equal to Standard at Bureau Designated Statistical Reporting Level (Column (1)).	Standard at Company Level is greater than Standard at Designated Statistical Reporting Level.
2.40	Basic	Premium Adjustments Due to ARAP Surcharge (Column (15)) should not be reported prior to 1990.	ARAP is reported prior to 1990.
2.41	Actuarial	For Lines (F) through (V), if Standard at Bureau Designated Stat Reporting Level (Column (1)) is $\geq 2,500,000$ , then Premium Adjustments Due to ARAP Surcharge (Column (15)) should be reported.	ARAP is reported for large premiums.
2.42	Basic	Premium Adjustments Due to Construction Credit Program (Column (16)) should not be reported prior to 1991.	Construction credit is reported prior to 1991.
2.43	Basic	Premium Adjustments Due to QLMP Credit (Column (17)) should not be reported prior to 1990.	QLMP is reported prior to 1990.
4.14	Actuarial	<p>Page 1, Lines 1, 2 and 3 should equal Call #2 Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 4 and 5 should equal Call #2C Columns 3 and 15, Line Z respectively.</p> <p>Page 1, Lines 6, 7 and 8 should equal Call #2D Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 9, 10 and 11 should equal Call #2E Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 2, Line 1, Column 1 should equal Call #2 Column 10, Line Z.</p> <p>Page 2, Line 1, Column 2 should equal Call #3 Column 7, Line Z.</p> <p>Page 2, Line 2, Column 1 should equal Call #2C Column 10, Line Z.</p> <p>Page 2, Line 2, Column 2 should equal Call #3C Column 7, Line Z.</p> <p>Page 2, Line 3 should equal Call #2D Column 10, Line Z.</p> <p>Page 2, Line 4 should equal Call #2E Column 10, Line Z.</p>	A revision is made to Call # 2, 2C, 2D, 2E, 3, and 3C that changes Line Z totals, but the revised totals do not equal the totals reported on Call # 4.

## 2A - Policy Year Residual Market Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (4)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (5)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.4	Actuarial	For Lines (A) through (U), Indemnity Paid Losses (Column (4)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 10,000 from the prior call.
2.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (5)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decrease more than 10,000 from the prior call.
2.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,00 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
2.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (5) + Column (7)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.01 6th & prior .98 to 1.05 5th .98 to 1.05 4th .94 to 1.20 3rd .90 to 1.30 2nd	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
2.9	Actuarial	Line (V) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be <= to Line (V) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses are greater than accident year losses.
2.10	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be less than or equal to the corresponding Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) + the Prior Policy Year Losses. (Threshold of 10)	Accident year losses are greater than the sum of two policy year losses.
2.11	Actuarial	Line (A) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be greater than Line (A) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses on the prior to line (line a) are less than the accident year losses on the prior to line (line a).

## 2A - Policy Year Residual Market Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.12	Basic	For Policy Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) must be > 0	Losses are reported without claim counts.
2.13	Basic	For Policy Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) must be > 0.	Claim counts are reported without losses.
2.14	Actuarial	For Policy Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) are greater than \$100,000, then the sum of DCC expenses (Column (13) through Column (14)) should be greater than 0.	Losses are reported without DCC expenses.
2.15	Actuarial	For Lines (X) and (Z) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) must equal Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year loss totals do not equal accident year loss totals.
2.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1)) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) should be greater than 0.	Premium is reported without losses.
2.17	Basic	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1)) must not be 0.	Losses are reported without premium.
2.18	Actuarial	For Lines (X) and (Z) Policy Year Accumulated Closed (With Payment) and Open Outstanding (Column (11), Column (12)) must equal Accident Year Accumulated Closed (With Payment) and Open Outstanding (Column (8), Column (9)).	Policy year claims counts do not equal accident year claim counts.
2.19	Basic	Line (V) Line (V) Policy Year Accumulated Closed (With Payment), Open Outstanding (Column (11), Column (12)) should be <= to Accident Year Accumulated Closed (With Payment), Open Outstanding (Column (8), Column (9)).	Claim counts on the policy year call line v are greater than claim counts on the accident year line v.
2.20	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Accumulated Closed (With Payment) , Open Outstanding (Column (8), Column (9)) should be less than or equal to the corresponding Policy Year Accumulated Closed (With Payment) , Open Outstanding (Column (11), Column (12)) + the Prior Policy Year Losses.	Accident year claim counts are greater than the sum of two policy year claim counts.
2.21	Actuarial	Line (X)(Columns (1) through (18) )on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
2.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 4) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.

## 2A - Policy Year Residual Market Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.23	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 5) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.03 10th .95 to 1.04 8th & 9th .95 to 1.05 6th & 7th .95 to 1.05 5th .95 to 1.08 4th .95 to 1.20 3rd .95 to 1.50 2nd	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.32	Actuarial	For Lines (B) through (V), the ratio of the Standard at Company Level (Column (2)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Company Level to Net is outside of listed range.
2.34	Actuarial	For Lines (B) through (V), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Designated Statistical Reporting Level to Net is outside of listed range.
2.36	Actuarial	For Lines (A) through (U), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th & 6th) , and 0 (7th-prior)  1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st	Change of current Standard at Designated Statistical Reporting Level from prior year to current call is outside of listed ranges.
2.37	Actuarial	For Lines (A) through (U), the ratio of the Standard at Company Level (Column (2)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th & 6th) , and 0 (7th-prior)  1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st	Change of current Standard at Company Level Company from prior year call to current call is outside of listed ranges.
2.38	Actuarial	For Lines (A) through (U), the ratio of the Net Premium (Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th - prior)  .99 to 1.01 5th - prior .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st	Change of Net from prior year call to current call is outside of listed ranges.
2.40	Basic	Premium Adjustments Due to ARAP Surcharge (Column (15)) should not be reported prior to 1990.	ARAP is reported prior to 1990.
2.41	Actuarial	For Lines (F) through (V), if Standard at Bureau Designated Stat Reporting Level (Column (1)) is $\geq 2,500,000$ , then Premium Adjustments Due to ARAP Surcharge (Column (15)) should be reported.	ARAP is reported for large premiums.
2.42	Basic	Premium Adjustments Due to Construction Credit Program (Column (16)) should not be reported prior to 1991.	Construction credit is reported prior to 1991.

## 2A - Policy Year Residual Market Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.43	Basic	Premium Adjustments Due to QLMP Credit (Column (17)) should not be reported prior to 1990.	QLMP is reported prior to 1990.
2.44	Actuarial	For policy year 2006 and forward, Standard at Bureau Designated Statistical Reporting Level (Column (1)) should equal Net Premium (Column (3)), unless the value equals 0.	Standard at Designated Statistical Reporting Level is not equal to Net Premium.
2.45	Actuarial	For policy year 2006 and forward, Standard at Company Level (Column (2)) should equal Net Premium (Column (3)) unless the value equals 0.	Standard at Designated Statistical Reporting Level is not equal to Net Premium
2.46	Basic	For policy year 2006 and forward, Standard at Company Level (Column (2)) must be equal to Standard at Bureau Designated Statistical Reporting Level (Column (1)).	Standard at Designated Statistical Reporting Level is not equal to Standard at Company Level
5.3	Actuarial	For Line (G), If RM Written (Column 1) <> 0 Call # 2A Net Premium, Column 3, Line Z should not = 0.	Residual Market is reported on Call # 5 but Net Premium is not reported on Call # 2A.
5.4	Actuarial	For Line (G), If RM Written (Column 1) = 0, Call # 2A Net Premium, Column 3, Line Z should = 0.	Residual Market is not reported on Call # 5 but Net Premium is reported on Call # 2A.



## 2C - Policy Year Large Deductible Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (4)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (5)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.4	Actuarial	For Lines (A) through (U), Indemnity Paid Losses (Column (4)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 10,000 from the prior call.
2.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (5)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decrease more than 10,000 from the prior call.
2.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
2.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (5) + Column (7)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.01 6th & prior .98 to 1.05 5th .98 to 1.05 4th .94 to 1.20 3rd .90 to 1.30 2nd	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
2.9	Actuarial	Line (V) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be <= to Line (V) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses are greater than accident year losses.
2.10	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be less than or equal to the corresponding Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) + the Prior Policy Year Losses. (Threshold of 10)	Accident year losses are greater than the sum of two policy year losses.
2.11	Actuarial	Line (A) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be greater than Line (A) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses on the prior to line (line a) are less than the accident year losses on the prior to line (line a).

## 2C - Policy Year Large Deductible Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.12	Basic	For Policy Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) must be > 0	Losses are reported without claim counts.
2.13	Basic	For Policy Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) must be > 0.	Claim counts are reported without losses.
2.14	Actuarial	For Policy Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) are greater than \$100,000, then the sum of DCC expenses (Column (13) through Column (14)) should be greater than 0.	Losses are reported without DCC expenses.
2.15	Actuarial	For Lines (X) and (Z) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) must equal Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year loss totals do not equal accident year loss totals.
2.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1)) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) should be greater than 0.	Premium is reported without losses.
2.17	Basic	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1)) must not be 0.	Losses are reported without premium.
2.18	Actuarial	For Lines (X) and (Z) Policy Year Accumulated Closed (With Payment) and Open Outstanding (Column (11), Column (12)) must equal Accident Year Accumulated Closed (With Payment) and Open Outstanding (Column (8), Column (9)).	Policy year claims counts do not equal accident year claim counts.
2.19	Basic	Line (V) Line (V) Policy Year Accumulated Closed (With Payment), Open Outstanding (Column (11), Column (12)) should be <= to Accident Year Accumulated Closed (With Payment), Open Outstanding (Column (8), Column (9)).	Claim counts on the policy year call line v are greater than claim counts on the accident year line v.
2.20	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Accumulated Closed (With Payment) , Open Outstanding (Column (8), Column (9)) should be less than or equal to the corresponding Policy Year Accumulated Closed (With Payment) , Open Outstanding (Column (11), Column (12)) + the Prior Policy Year Losses.	Accident year claim counts are greater than the sum of two policy year claim counts.
2.21	Actuarial	Line (X) (Columns (1) through (18)) on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
2.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 4) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.

## 2C - Policy Year Large Deductible Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.23	Actuarial	<p>For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 5) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).</p> <p>.975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.03 10th .95 to 1.04 8th &amp; 9th .95 to 1.05 6th &amp; 7th .95 to 1.05 5th .95 to 1.08 4th .95 to 1.20 3rd .95 to 1.50 2nd</p>	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.30	Actuarial	For Lines (A) through (V), Standard at Bureau Designated Statistical Reporting Level (Column (1)) should not equal Net Premium (Column (3)), unless the value equals 0.	Standard at Bureau Designated Statistical Reporting Level is equal to Net Premium.
2.31	Actuarial	For Lines (A) through (V), Standard at Company Level (Column (2)) should not equal Net Premium (Column (3)) unless the value equals 0.	Standard at Company Level is equal to Net Premium
2.33	Actuarial	For Policy Year 1990 through Line (V), the ratio of the Standard at Company Level (Column (2)) to Net Premium (Column (3)) should be greater than 1.25.	Change from Standard at Company Level to Net is outside of listed range.
2.35	Actuarial	For Policy Year 1990 through Line (V), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) to Net Premium (Column (3)) should be greater than 1.25.	Change from Standard at Designated Statistical Reporting Level to Net is outside of listed range.
2.36	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Designated Statistical Reporting Level from prior year to current call is outside of listed ranges.
2.37	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Company Level (Column (2)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Company Level Company from prior year call to current call is outside of listed ranges.
2.38	Actuarial	<p>For Lines (A) through (U), the ratio of the Net Premium (Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th - prior)</p> <p>.99 to 1.01 5th - prior .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of Net from prior year call to current call is outside of listed ranges.

## 2C - Policy Year Large Deductible Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.39	Basic	For Lines (A) through (V), Standard at Company Level (Column (2)) must be less than or equal to Standard at Bureau Designated Statistical Reporting Level (Column (1)).	Standard at Company Level is greater than Standard at Designated Statistical Reporting Level.
2.41	Actuarial	For Lines (F) through (V), if Standard at Bureau Designated Stat Reporting Level (Column (1)) is $\geq 2,500,000$ , then Premium Adjustments Due to ARAP Surcharge (Column (15)) should be reported.	ARAP is reported for large premiums.
2.42	Basic	Premium Adjustments Due to Construction Credit Program (Column (16)) should not be reported prior to 1991.	Construction credit is reported prior to 1991.
2.47	Basic	For Lines (A) through (V), Net Premium (Column (3) + Premium Adjustments Due to ARAP Surcharge (Column (15)) should not be less than zero.	Net premium plus ARAP is a negative number.
2.48	Actuarial	For Lines (A) through (V), Net Premium (Column (3)) should not be less than zero.	Net premium is a negative number.
4.9	Actuarial	Page 2, line 8. Deductible Reimbursements (Large) = 0 but Standard @ DSR Column 1, Line Z reported on Call # 2c $> 0$ .	Standard at Designated Statistical Reporting Level is reported on Call # 2c but Deductible Reimbursements are not reported on Call # 4.
4.10	Actuarial	Page 2, line 8. Deductible Reimbursements (Large) $< 0$ , but Call # 2c Standard @ DSR Column 1, Line Z = 0.	Deductible Reimbursements are reported on Call # 4 but Standard at Designated Statistical Reporting Level is not reported on Call # 2c.
4.14	Actuarial	<p>Page 1, Lines 1, 2 and 3 should equal Call #2 Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 4 and 5 should equal Call #2C Columns 3 and 15, Line Z respectively.</p> <p>Page 1, Lines 6, 7 and 8 should equal Call #2D Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 9, 10 and 11 should equal Call #2E Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 2, Line 1, Column 1 should equal Call #2 Column 10, Line Z.</p> <p>Page 2, Line 1, Column 2 should equal Call #3 Column 7, Line Z.</p> <p>Page 2, Line 2, Column 1 should equal Call #2C Column 10, Line Z.</p> <p>Page 2, Line 2, Column 2 should equal Call #3C Column 7, Line Z.</p> <p>Page 2, Line 3 should equal Call #2D Column 10, Line Z.</p> <p>Page 2, Line 4 should equal Call #2E Column 10, Line Z.</p>	A revision is made to Call # 2, 2C, 2D, 2E, 3, and 3C that changes Line Z totals, but the revised totals do not equal the totals reported on Call # 4.
5A.1	Actuarial	Standard Written at Company Level = 0 but Standard Earned at Company Level reported on Call 2C is non zero.	Standard Premium is not reported on Call # 5A but Standard at Company Level is reported on Call # 2C.
5A.2	Actuarial	Standard Written ARAP = 0 but Standard Earned ARAP Premium reported on Call 2C is non zero.	ARAP Premium is not reported on Call # 5A but ARAP is reported on Call # 2C.
5A.3	Actuarial	Standard Written at Company Level $< 0$ but Standard Earned at Company Level reported on Call # 2C = 0.	Standard Premium is reported on Call # 5A but Standard at Company Level is not reported on Call # 2C.
5A.4	Actuarial	Standard Written ARAP $< 0$ but Standard Earned ARAP Premium reported on Call # 2C = 0.	ARAP Premium is reported on Call # 5A but ARAP is not reported on Call # 2C.
5B.2	Actuarial	If LD Written (Column 5) $< 0$ Call # 2C Net Premium, Column 3, Line Z should not = 0.	Large Deductible Direct Written Premium is reported on Call # 5B but Net Premium is not reported on Call # 2C.
5B.3	Actuarial	If LD Written = 0 Call # 2C Net Premium, Column 3, Line Z should = 0.	Large Deductible Direct Written Premium is not reported on Call # 5B but Net Premium is reported on Call # 2C.

## 2D - Policy Year "F" Classification Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (4)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (5)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.4	Actuarial	For Lines (A) through (U), Indemnity Paid Losses (Column (4)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 10,000 from the prior call.
2.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (5)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decrease more than 10,000 from the prior call.
2.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
2.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (5) + Column (7)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.01 6th & prior .98 to 1.05 5th .98 to 1.05 4th .94 to 1.20 3rd .90 to 1.30 2nd	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
2.12	Basic	For Policy Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) must be > 0	Losses are reported without claim counts.
2.13	Basic	For Policy Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) must be > 0.	Claim counts are reported without losses.

## 2D - Policy Year "F" Classification Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.14	Actuarial	For Policy Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) are greater than \$100,000, then the sum of DCC expenses (Column (13) through Column (14)) should be greater than 0.	Losses are reported without DCC expenses.
2.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1)) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) should be greater than 0.	Premium is reported without losses.
2.17	Basic	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1)) must not be 0.	Losses are reported without premium.
2.21	Actuarial	Line (X) - (Columns (1) through (18) on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
2.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 4) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
2.23	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 5) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.03 10th .95 to 1.04 8th & 9th .95 to 1.05 6th & 7th .95 to 1.05 5th .95 to 1.08 4th .95 to 1.20 3rd .95 to 1.50 2nd	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.30	Actuarial	For Lines (A) through (V), Standard at Bureau Designated Statistical Reporting Level (Column (1)) should not equal Net Premium (Column (3)), unless the value equals 0.	Standard at Bureau Designated Statistical Reporting Level is equal to Net Premium.
2.31	Actuarial	For Lines (A) through (V), Standard at Company Level (Column (2)) should not equal Net Premium (Column (3)) unless the value equals 0.	Standard at Company Level is equal to Net Premium
2.32	Actuarial	For Lines (B) through (V), the ratio of the Standard at Company Level (Column (2)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Company Level to Net is outside of listed range.
2.34	Actuarial	For Lines (B) through (V), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Designated Statistical Reporting Level to Net is outside of listed range.

## 2D - Policy Year "F" Classification Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.36	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Designated Statistical Reporting Level from prior year to current call is outside of listed ranges.
2.37	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Company Level (Column (2)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Company Level Company from prior year call to current call is outside of listed ranges.
2.38	Actuarial	<p>For Lines (A) through (U), the ratio of the Net Premium (Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th - prior)</p> <p>.99 to 1.01 5th - prior .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of Net from prior year call to current call is outside of listed ranges.
2.39	Basic	For Lines (A) through (V), Standard at Company Level (Column (2)) must be less than or equal to Standard at Bureau Designated Statistical Reporting Level (Column (1)).	Standard at Company Level is greater than Standard at Designated Statistical Reporting Level.
2.40	Basic	Premium Adjustments Due to ARAP Surcharge (Column (15)) should not be reported prior to 1990.	ARAP is reported prior to 1990.
2.41	Actuarial	For Lines (F) through (V), if Standard at Bureau Designated Stat Reporting Level (Column (1)) is $\geq 2,500,000$ , then Premium Adjustments Due to ARAP Surcharge (Column (15)) should be reported.	ARAP is reported for large premiums.
2.42	Basic	Premium Adjustments Due to Construction Credit Program (Column (16)) should not be reported prior to 1991.	Construction credit is reported prior to 1991.
2.43	Basic	Premium Adjustments Due to QLMP Credit (Column (17)) should not be reported prior to 1990.	QLMP if reported prior to 1990.

## 2D - Policy Year "F" Classification Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
4.14	Actuarial	<p>Page 1, Lines 1, 2 and 3 should equal Call #2 Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 4 and 5 should equal Call #2C Columns 3 and 15, Line Z respectively.</p> <p>Page 1, Lines 6, 7 and 8 should equal Call #2D Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 9, 10 and 11 should equal Call #2E Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 2, Line 1, Column 1 should equal Call #2 Column 10, Line Z.</p> <p>Page 2, Line 1, Column 2 should equal Call #3 Column 7, Line Z.</p> <p>Page 2, Line 2, Column 1 should equal Call #2C Column 10, Line Z.</p> <p>Page 2, Line 2, Column 2 should equal Call #3C Column 7, Line Z.</p> <p>Page 2, Line 3 should equal Call #2D Column 10, Line Z.</p> <p>Page 2, Line 4 should equal Call #2E Column 10, Line Z.</p>	<p>A revision is made to Call # 2, 2C, 2D, 2E, 3, and 3C that changes Line Z totals, but the revised totals do not equal the totals reported on Call # 4.</p>



**2E - Policy Year Maritime Call**

<b>Edit ID</b>	<b>Edit Type</b>	<b>Edit Description</b>	<b>Edit Fails When...</b>
2.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (4)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (5)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
2.4	Actuarial	For Lines (A) through (U), Indemnity Paid Losses (Column (4)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 10,000 from the prior call.
2.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (5)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decrease more than 10,000 from the prior call.
2.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
2.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (5) + Column (7)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.01 6th & prior .98 to 1.05 5th .98 to 1.05 4th .94 to 1.20 3rd .90 to 1.30 2nd	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
2.12	Basic	For Policy Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) must be > 0	Losses are reported without claim counts.
2.13	Basic	For Policy Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (11) + Column (12)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (4) + Column (6)) must be > 0.	Claim counts are reported without losses.

## 2E - Policy Year Maritime Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.14	Actuarial	For Policy Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) are greater than \$100,000, then the sum of DCC expenses (Column (13) through Column (14)) should be greater than 0.	Losses are reported without DCC expenses.
2.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1)) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) should be greater than 0.	Premium is reported without losses.
2.17	Basic	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (4) + Column (5) + Column (6) + Column (7)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1)) must not be 0.	Losses are reported without premium.
2.21	Actuarial	Line (X) - (Columns (1) through (18) on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
2.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 4) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
2.23	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 5) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.03 10th .95 to 1.04 8th & 9th .95 to 1.05 6th & 7th .95 to 1.05 5th .95 to 1.08 4th .95 to 1.20 3rd .95 to 1.50 2nd	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
2.30	Actuarial	For Lines (A) through (V), Standard at Bureau Designated Statistical Reporting Level (Column (1)) should not equal Net Premium (Column (3)), unless the value equals 0.	Standard at Bureau Designated Statistical Reporting Level is equal to Net Premium.
2.31	Actuarial	For Lines (A) through (V), Standard at Company Level (Column (2)) should not equal Net Premium (Column (3)) unless the value equals 0.	Standard at Company Level is equal to Net Premium
2.32	Actuarial	For Lines (B) through (V), the ratio of the Standard at Company Level (Column (2)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Company Level to Net is outside of listed range.
2.34	Actuarial	For Lines (B) through (V), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) to Net Premium (Column (3)) should fall between .500 and 2.00.	Change from Standard at Designated Statistical Reporting Level to Net is outside of listed range.

## 2E - Policy Year Maritime Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
2.36	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Bureau Designated Statistical Reporting Level (Column (1)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Designated Statistical Reporting Level from prior year to current call is outside of listed ranges.
2.37	Actuarial	<p>For Lines (A) through (U), the ratio of the Standard at Company Level (Column (2)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th &amp; 6th) , and 0 (7th-prior)</p> <p>1.00 to 1.00 6th-prior .99 to 1.01 5th .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of current Standard at Company Level Company from prior year call to current call is outside of listed ranges.
2.38	Actuarial	<p>For Lines (A) through (U), the ratio of the Net Premium (Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20,000 (1st), 15,000 (2nd), 10,000 (3rd), 7,500 (4th), 5,000 (5th - prior)</p> <p>.99 to 1.01 5th - prior .95 to 1.05 4th .85 to 1.15 3rd .75 to 1.33 2nd 1.00 to 4.00 1st</p>	Change of Net from prior year call to current call is outside of listed ranges.
2.39	Basic	For Lines (A) through (V), Standard at Company Level (Column (2)) must be less than or equal to Standard at Bureau Designated Statistical Reporting Level (Column (1)).	Standard at Company Level is greater than Standard at Designated Statistical Reporting Level.
2.41	Actuarial	For Lines (F) through (V), if Standard at Bureau Designated Stat Reporting Level (Column (1)) is $\geq 2,500,000$ , then Premium Adjustments Due to ARAP Surcharge (Column (15)) should be reported.	ARAP is reported for large premiums.

## 2E - Policy Year Maritime Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
4.14	Actuarial	<p>Page 1, Lines 1, 2 and 3 should equal Call #2 Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 4 and 5 should equal Call #2C Columns 3 and 15, Line Z respectively.</p> <p>Page 1, Lines 6, 7 and 8 should equal Call #2D Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 9, 10 and 11 should equal Call #2E Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 2, Line 1, Column 1 should equal Call #2 Column 10, Line Z.</p> <p>Page 2, Line 1, Column 2 should equal Call #3 Column 7, Line Z.</p> <p>Page 2, Line 2, Column 1 should equal Call #2C Column 10, Line Z.</p> <p>Page 2, Line 2, Column 2 should equal Call #3C Column 7, Line Z.</p> <p>Page 2, Line 3 should equal Call #2D Column 10, Line Z.</p> <p>Page 2, Line 4 should equal Call #2E Column 10, Line Z.</p>	<p>A revision is made to Call # 2, 2C, 2D, 2E, 3, and 3C that changes Line Z totals, but the revised totals do not equal the totals reported on Call # 4.</p>

### 3 – Accident Year Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (1)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
3.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (2)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
3.4	Actuarial	For Accident Year Lines (A) through (U), Indemnity Paid Losses (Column (1)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 100,000 from the prior call.
3.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (2)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 100,000 from the prior call.
3.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
3.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (2) + Column (4)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
3.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.02 5th & prior .98 to 1.05 4th .94 to 1.20 3rd .88 to 1.40 2nd .88 to 2.50 1st	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
3.9	Actuarial	Line (V) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be >= to Line (V) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)). (Threshold of 10)	Policy year losses are greater than accident year losses.
3.10	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be less than or equal to the corresponding Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) + the Prior Policy Year Losses. (Threshold of 10)	Accident year losses are greater than the sum of two policy year losses.
3.11	Actuarial	Line (A) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be greater than Line (A) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses on the prior to line (line A) are less than the accident year losses on the prior to line (line A).

### 3 – Accident Year Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.12	Basic	For Accident Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) must be > 0.	Losses are reported without claim counts.
3.13	Basic	For Accident Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) must be > 0.	Claim counts are reported without losses.
3.14	Actuarial	For Accident Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) are greater than \$100,000, then the sum of DCC expenses (Column (10) through Column (11)) should be greater than 0.	Losses are reported without DCC expenses.
3.15	Actuarial	For Lines (X) and (Z) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) must equal Policy Year Losses (Columns (4) through (7), Columns (13) through (14)). (Threshold of 10)	Policy year loss totals do not equal accident year loss totals.
3.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1) of Policy Year Call) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) should be greater than 0.	Premium is reported without losses.
3.17	Actuarial	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1) - Policy Year Call must not be 0.	Losses are reported without premium.
3.18	Actuarial	For Lines (X) and (Z) Accident Year Accumulated Closed (With Payment) and Open Outstanding (Column (8), Column (9)) must equal Policy Year Accumulated Closed (With Payment) and Open Outstanding (Column (11), Column (12)).	Policy year claims counts do not equal accident year claim counts.
3.19	Basic	Line (V) Accident Year Accumulated Closed (With Payment), Open Outstanding (Column (8), Column (9)) should be >= to Line (V) Policy Year Accumulated Closed (With Payment), Open Outstanding (Column (11), Column (12)).	Claim counts on the policy year call line v are greater than claim counts on the accident year line V.
3.20	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Accumulated Closed (With Payment) , Open Outstanding (Column (8), Column (9)) should be less than or equal to the corresponding Policy Year Accumulated Closed (With Payment) , Open Outstanding (Column (11), Column (12)) + the Prior Policy Year Losses.	Accident year claim counts are greater than the sum of two policy year claim counts.
3.21	Actuarial	Line (X) - (Columns (1) through (18) on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
3.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 1) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.

### 3 – Accident Year Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.23	Actuarial	<p>For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 2) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).</p> <p>.975 to 1.01 17th-prior            .975 to 1.02 11th-16th            .975 to 1.03 10th            .95 to 1.04 8th &amp; 9th            .95 to 1.05 6th &amp; 7th            .95 to 1.05 5th            .95 to 1.08 4th            .95 to 1.20 3rd            .95 to 1.50 2nd</p>	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
4.14	Actuarial	<p>Page 1, Lines 1, 2 and 3 should equal Call #2 Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 4 and 5 should equal Call #2C Columns 3 and 15, Line Z respectively.</p> <p>Page 1, Lines 6, 7 and 8 should equal Call #2D Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 9, 10 and 11 should equal Call #2E Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 2, Line 1, Column 1 should equal Call #2 Column 10, Line Z.</p> <p>Page 2, Line 1, Column 2 should equal Call #3 Column 7, Line Z.</p> <p>Page 2, Line 2, Column 1 should equal Call #2C Column 10, Line Z.</p> <p>Page 2, Line 2, Column 2 should equal Call #3C Column 7, Line Z.</p> <p>Page 2, Line 3 should equal Call #2D Column 10, Line Z.</p> <p>Page 2, Line 4 should equal Call #2E Column 10, Line Z.</p>	A revision is made to Call # 2, 2C, 2D, 2E, 3, and 3C that changes Line Z totals, but the revised totals do not equal the totals reported on Call # 4.

### 3A - Accident Year Residual Market Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (1)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
3.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (2)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
3.4	Actuarial	For Accident Year Lines (A) through (U), Indemnity Paid Losses (Column (1)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 100,000 from the prior call.
3.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (2)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 100,000 from the prior call.
3.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
3.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (2) + Column (4)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
3.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.02 5th & prior .98 to 1.05 4th .94 to 1.20 3rd .88 to 1.40 2nd .88 to 2.50 1st	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
3.9	Actuarial	Line (V) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be $\geq$ to Line (V) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)). (Threshold of 10)	Policy year losses are greater than accident year losses.
3.10	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be less than or equal to the corresponding Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) + the Prior Policy Year Losses. (Threshold of 10)	Accident year losses are greater than the sum of two policy year losses.
3.11	Actuarial	Line (A) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be greater than Line (A) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses on the prior to line (line A) are less than the accident year losses on the prior to line (line A).



### 3A - Accident Year Residual Market Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.12	Basic	For Accident Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) must be > 0.	Losses are reported without claim counts.
3.13	Basic	For Accident Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) must be > 0.	Claim counts are reported without losses.
3.14	Actuarial	For Accident Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) are greater than \$100,000, then the sum of DCC expenses (Column (10) through Column (11)) should be greater than 0.	Losses are reported without DCC expenses.
3.15	Actuarial	For Lines (X) and (Z) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) must equal Policy Year Losses (Columns (4) through (7), Columns (13) through (14)). (Threshold of 10)	Policy year loss totals do not equal accident year loss totals.
3.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1) of Policy Year Call) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) should be greater than 0.	Premium is reported without losses.
3.17	Actuarial	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1) - Policy Year Call) must not be 0.	Losses are reported without premium.
3.18	Actuarial	For Lines (X) and (Z) Accident Year Accumulated Closed (With Payment) and Open Outstanding (Column (8), Column (9)) must equal Policy Year Accumulated Closed (With Payment) and Open Outstanding (Column (11), Column (12)).	Policy year claims counts do not equal accident year claim counts.
3.19	Basic	Line (V) Accident Year Accumulated Closed (With Payment), Open Outstanding (Column (8), Column (9)) should be >= to Line (V) Policy Year Accumulated Closed (With Payment), Open Outstanding (Column (11), Column (12)).	Claim counts on the policy year call line v are greater than claim counts on the accident year line V.
3.20	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Accumulated Closed (With Payment) , Open Outstanding (Column (8), Column (9)) should be less than or equal to the corresponding Policy Year Accumulated Closed (With Payment) , Open Outstanding (Column (11), Column (12)) + the Prior Policy Year Losses.	Accident year claim counts are greater than the sum of two policy year claim counts.
3.21	Actuarial	Line (X) (Columns (1) through (18)) on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
3.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 1) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd), and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.

### 3A - Accident Year Residual Market Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.23	Actuarial	<p>For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 2) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).</p> <p>.975 to 1.01 17th-prior            .975 to 1.02 11th-16th            .975 to 1.03 10th            .95 to 1.04 8th &amp; 9th            .95 to 1.05 6th &amp; 7th            .95 to 1.05 5th            .95 to 1.08 4th            .95 to 1.20 3rd            .95 to 1.50 2nd</p>	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.

### 3C - Accident Year Large Deductible Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.1	Actuarial	Total (Line (X)) Indemnity Paid Losses (Column (1)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
3.2	Actuarial	Total (Line (X)) Medical Paid Losses (Column (2)) on the Current call decreased more than 200,000 from the Prior call.	Total paid losses on the current call decreased more than 200,000 from the prior call.
3.4	Actuarial	For Accident Year Lines (A) through (U), Indemnity Paid Losses (Column (1)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 100,000 from the prior call.
3.5	Actuarial	For Lines (A) through (U), Medical Paid Losses (Column (2)) on the Current call decreased more than 10,000 from the Prior call.	Losses (by year) on the current call decreased more than 100,000 from the prior call.
3.6	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.05 10th .95 to 1.04 8th & 9th .95 to 1.06 6th & 7th .95 to 1.10 5th .95 to 1.15 4th .95 to 1.25 3rd .95 to 1.60 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.
3.7	Actuarial	For Lines (A) through (U), the ratio of the Medical Paid Losses + Medical Case Reserves (Column (2) + Column (4)) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (1st & 2nd) 300,000 (3rd), and 200,000 (4th through prior).  .975 to 1.01 17th-prior .975 to 1.01 11th-16th .975 to 1.02 10th .95 to 1.03 8th & 9th .95 to 1.04 6th & 7th .95 to 1.05 5th .95 to 1.05 4th .95 to 1.08 3rd .95 to 1.20 2nd 1.00 to 5.00 1st	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
3.8	Actuarial	For Lines (A) through (T), the ratio of the sum of Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 20. .99 to 1.02 5th & prior .98 to 1.05 4th .94 to 1.20 3rd .88 to 1.40 2nd .88 to 2.50 1st	Changes in the claims counts from the prior call to the current call falls outside listed ranges.
3.9	Actuarial	Line (V) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be $\geq$ to Line (V) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)). (Threshold of 10)	Policy year losses are greater than accident year losses.
3.10	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) should be less than or equal to the corresponding Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) + the Prior Policy Year Losses. (Threshold of 10)	Accident year losses are greater than the sum of two policy year losses.
3.11	Actuarial	Line (A) Policy Year Losses (Columns (4) through (7), Columns (13) through (14)) should be greater than Line (A) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)). (Threshold of 10)	Policy year losses on the prior to line (line A) are less than the accident year losses on the prior to line (line A).

### 3C - Accident Year Large Deductible Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.12	Basic	For Accident Year 1994 through Line (V), if Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) are > 0 then Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) must be > 0.	Losses are reported without claim counts.
3.13	Basic	For Accident Year 1994 through Line (V), if Accumulated Closed (With Payment) + Open Outstanding (Column (8) + Column (9)) is > 0, then Indemnity Paid Losses + Indemnity Case Reserves (Column (1) + Column (3)) must be > 0.	Claim counts are reported without losses.
3.14	Actuarial	For Accident Year 1994 through Line (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) are greater than \$100,000, then the sum of DCC expenses (Column (10) through Column (11)) should be greater than 0.	Losses are reported without DCC expenses.
3.15	Actuarial	For Lines (X) and (Z) Accident Year Losses (Columns (1) through (4), Columns (10) through (11)) must equal Policy Year Losses (Columns (4) through (7), Columns (13) through (14)). (Threshold of 10)	Policy year loss totals do not equal accident year loss totals.
3.16	Actuarial	For Lines (A) through (V), if Standard at Bureau Designated Statistical Reporting Level (Column (1) of Policy Year Call) is greater than \$250,000, then the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) should be greater than 0.	Premium is reported without losses.
3.17	Actuarial	For Lines (A) through (V), if the sum of Indemnity Paid, Medical Paid, Indemnity Case Reserves and Medical Case Reserves (Column (1) + Column (2) + Column (3) + Column (4)) is greater than 0, then Standard at Bureau Designated Statistical Reporting Level (Column (1) - Policy Year Call must not be 0.	Losses are reported without premium.
3.18	Actuarial	For Lines (X) and (Z) Accident Year Accumulated Closed (With Payment) and Open Outstanding (Column (8), Column (9)) must equal Policy Year Accumulated Closed (With Payment) and Open Outstanding (Column (11), Column (12)).	Policy year claims counts do not equal accident year claim counts.
3.19	Basic	Line (V) Accident Year Accumulated Closed (With Payment), Open Outstanding (Column (8), Column (9)) should be >= to Line (V) Policy Year Accumulated Closed (With Payment), Open Outstanding (Column (11), Column (12)).	Claim counts on the policy year call Line V are greater than claim counts on the accident year Line V
3.20	Actuarial	Within the same calendar year, for Lines (A) through (V), Accident Year Accumulated Closed (With Payment) , Open Outstanding (Column (8), Column (9)) should be less than or equal to the corresponding Policy Year Accumulated Closed (With Payment) , Open Outstanding (Column (11), Column (12)) + the Prior Policy Year Losses.	Accident year claim counts are greater than the sum of two policy year claim counts.
3.21	Actuarial	Line (X) (Columns (1) through (18)) on the subsequent call should be equal to the corresponding columns on this call.	A revision, that changes totals on a prior year call, is made.
3.22	Actuarial	For Lines (A) through (U), the ratio of the Indemnity Paid Losses (Column 1) on the Current call to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).  .975 to 1.01 17th-prior .975 to 1.02 11th-16th .975 to 1.04 10th .95 to 1.06 8th & 9th .95 to 1.10 6th & 7th .95 to 1.15 5th .95 to 1.25 4th .95 to 1.50 3rd .95 to 1.95 2nd	Changes in the paid + case losses from the prior call to the current call falls outside of listed ranges.

### 3C - Accident Year Large Deductible Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
3.23	Actuarial	<p>For Lines (A) through (U), the ratio of the Medical Paid Losses (Column 2) on the Current to the Prior call should fall within the ranges listed if the change exceeds 500,000 (2nd), 300,000 (3rd) , and 200,000 (4th - prior).</p> <p>.975 to 1.01 17th-prior            .975 to 1.02 11th-16th            .975 to 1.03 10th            .95 to 1.04 8th &amp; 9th            .95 to 1.05 6th &amp; 7th            .95 to 1.05 5th            .95 to 1.08 4th            .95 to 1.20 3rd            .95 to 1.50 2nd</p>	Changes in the paid + case losses from the prior call to the current call falls outside listed ranges.
4.14	Actuarial	<p>Page 1, Lines 1, 2 and 3 should equal Call #2 Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 4 and 5 should equal Call #2C Columns 3 and 15, Line Z respectively.</p> <p>Page 1, Lines 6, 7 and 8 should equal Call #2D Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 9, 10 and 11 should equal Call #2E Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 2, Line 1, Column 1 should equal Call #2 Column 10, Line Z.</p> <p>Page 2, Line 1, Column 2 should equal Call #3 Column 7, Line Z.</p> <p>Page 2, Line 2, Column 1 should equal Call #2C Column 10, Line Z.</p> <p>Page 2, Line 2, Column 2 should equal Call #3C Column 7, Line Z.</p> <p>Page 2, Line 3 should equal Call #2D Column 10, Line Z.</p> <p>Page 2, Line 4 should equal Call #2E Column 10, Line Z.</p>	A revision is made to Call # 2, 2C, 2D, 2E, 3, and 3C that changes Line Z totals, but the revised totals do not equal the totals reported on Call # 4.

#### 4 - Reconciliation Report

Edit ID	Edit Type	Edit Description	Edit Fails When...
4.1	Basic	Page 1. If a Write-in value is entered on Lines 18, 19, 20, 21, 22 there should be a note added on the same line.	An explanation for a write-in is not reported on Page 1.
4.2	Actuarial	Page 1. The Imbalance on Line 24 should not be greater than or less than zero.	An imbalance is reported on Page 1, line 24.
4.3	Basic	Page 2. If a Write-in value is entered on Lines 15, 16, 17, 18, 19 there should be a note added on the same line.	An explanation for a write-in is not reported on Page 2.
4.4	Actuarial	Page 2. The Imbalance on Line 21 should not be greater than or less than zero.	An imbalance is reported on Page 2, line 21.
4.5	Actuarial	Page 2. (Line 1) Total Market Policy Year Incurred Losses must equal (Line 1) Total Market Accident Year Incurred Losses.	An imbalance between Call # 2 and Call # 3 exist.
4.6	Actuarial	Page 2. (Line 2) Large Deductible Policy Year Incurred Losses must equal (Line 2) Large Deductible Accident Year Incurred Losses.	An imbalance between Call # 2c and Call # 3c exist.
4.7	Basic	Page 3. If a Write-in value is entered on Lines 21, 22, 23, 24, 25 there should be a note added on the same line.	An explanation for a write-in is not reported on Page 3.
4.8	Actuarial	Page 3. If the Imbalance reported on Line 27 is > the absolute value of 500, then an adequate explanation must be included within the Edit Notes.	An imbalance is reported on Page 3, line 27
4.9	Actuarial	Page 2, line 8. Deductible Reimbursements (Large) = 0 but Standard @ DSR Column 1, Line Z reported on Call # 2c <>0.	Standard at Designated Statistical Reporting Level is reported on Call # 2c but Deductible Reimbursements are not reported on Call # 4.
4.10	Actuarial	Page 2, line 8. Deductible Reimbursements (Large) <> 0, but Call # 2c Standard @ DSR Column 1, Line Z = 0.	Deductible Reimbursements are reported on Call # 4 but Standard at Designated Statistical Reporting Level is not reported on Call # 2c.
4.11	Actuarial	Page 2, line 8. Deductible recoveries <> 0, but Call # 2c is NIL.	Deductible Reimbursements are reported on Call # 4 but Call # 2c is NIL.
4.12	Actuarial	Page 3, line 6. Rate Deviations should not be positive.	Rate deviations are reported as a positive number.
4.13	Actuarial	Page 3, line 12. Scheduled Rating Adjustments should not be positive.	Scheduled rating adjustments are reported as a positive number.
4.14	Actuarial	<p>Page 1, Lines 1, 2 and 3 should equal Call #2 Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 4 and 5 should equal Call #2C Columns 3 and 15, Line Z respectively.</p> <p>Page 1, Lines 6, 7 and 8 should equal Call #2D Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 1, Lines 9, 10 and 11 should equal Call #2E Columns 3, 15 and 17, Line Z respectively.</p> <p>Page 2, Line 1, Column 1 should equal Call #2 Column 10, Line Z.</p> <p>Page 2, Line 1, Column 2 should equal Call #3 Column 7, Line Z.</p> <p>Page 2, Line 2, Column 1 should equal Call #2C Column 10, Line Z.</p> <p>Page 2, Line 2, Column 2 should equal Call #3C Column 7, Line Z.</p> <p>Page 2, Line 3 should equal Call #2D Column 10, Line Z.</p> <p>Page 2, Line 4 should equal Call #2E Column 10, Line Z.</p>	A revision is made to Call # 2, 2C, 2D, 2E, 3, and 3C that changes Line Z totals, but the revised totals do not equal the totals reported on Call # 4.

### 5 - Residual Market Direct Written

Edit ID	Edit Type	Edit Description	Edit Fails When...
5.1	Actuarial	For Lines (A) through (G), If VDAR Written (Column 2) is reported it should be less than or equal to RM Written (Column 1).	VDAR is greater than Residual Market.
5.2	Basic	For Line (G), If RM Written (Column 1) is $\neq 0$ Call # 2A should not be NIL.	Residual Market is reported on Call # 5 but Call # 2A is NIL.
5.3	Actuarial	For Line (G), If RM Written (Column 1) $\neq 0$ Call # 2A Net Premium, Column 3, Line Z should not = 0.	Residual Market is reported on Call # 5 but Net Premium is not reported on Call # 2A.
5.4	Actuarial	For Line (G), If RM Written (Column 1) = 0, Call # 2A Net Premium, Column 3, Line Z should = 0.	Residual Market is not reported on Call # 5 but Net Premium is reported on Call # 2A.

### 5A - Large Deductible Company Level Written Premiums

Edit ID	Edit Type	Edit Description	Edit Fails When...
5A.1	Actuarial	Standard Written at Company Level = 0 but Standard Earned at Company Level reported on Call 2C is non zero.	Standard Premium is not reported on Call # 5A but Standard at Company Level is reported on Call # 2C.
5A.2	Actuarial	Standard Written ARAP = 0 but Standard Earned ARAP Premium reported on Call 2C is non zero.	ARAP Premium is not reported on Call # 5A but ARAP is reported on Call # 2C.
5A.3	Actuarial	Standard Written at Company Level <> 0 but Standard Earned at Company Level reported on Call # 2C = 0.	Standard Premium is reported on Call # 5A but Standard at Company Level is not reported on Call # 2C.
5A.4	Actuarial	Standard Written ARAP <> 0 but Standard Earned ARAP Premium reported on Call # 2C = 0.	ARAP Premium is reported on Call # 5A but ARAP is not reported on Call # 2C.
5A.5	Actuarial	Standard Written at Company Level + ARAP Written <> 0 but Large Deductible Written on Call # 5B = 0.	Standard Premium + ARAP Premium is reported on Call # 5A but Large Deductible Direct Written Premium is not reported on Call # 5B.
5A.6	Actuarial	Standard Written at Company Level + ARAP Written = 0 but Large Deductible Written on Call # 5B > 0.	Standard Premium + ARAP Premium is not reported on Call # 5A but Large Deductible Direct Written Premium is reported on Call # 5B.



### 5B - Direct Written Premium

Edit ID	Edit Type	Edit Description	Edit Fails When...
5A.5	Actuarial	Standard Written at Company Level + ARAP Written $\neq$ 0 but Large Deductible Written on Call # 5B = 0.	Standard Premium + ARAP Premium is reported on Call # 5A but Large Deductible Direct Written Premium is not reported on Call # 5B.
5A.6	Actuarial	Standard Written at Company Level + ARAP Written = 0 but Large Deductible Written on Call # 5B $>$ 0.	Standard Premium + ARAP Premium is not reported on Call # 5A but Large Deductible Direct Written Premium is reported on Call # 5B.
5B.1	Basic	If LD Written (Column 5) is $\neq$ 0 Call # 2C should not be NIL.	Large Deductible Direct Written Premium is reported on Call # 5B but Call # 2C is NIL.
5B.2	Actuarial	If LD Written (Column 5) $\neq$ 0 Call # 2C Net Premium, Column 3, Line Z should not = 0.	Large Deductible Direct Written Premium is reported on Call # 5B but Net Premium is not reported on Call # 2C.
5B.3	Actuarial	If LD Written = 0 Call # 2C Net Premium, Column 3, Line Z should = 0.	Large Deductible Direct Written Premium is not reported on Call # 5B but Net Premium is reported on Call # 2C.

**6 - Calendar Year Expense Call**

Edit ID	Edit Type	Edit Description	Edit Fails When...
6.2	Actuarial	Other Acquisitions, Field Supervision, and Collection Expenses Incurred (Line (1)) should not be zero if there is written premium reported on the exhibit of premium and losses	Other Acquisitions, Field Supervision, Collection is not reported.

### 7 - Large Loss & Catastrophe Call

Edit ID	Edit Type	Edit Description	Edit Fails When...
7.1	Data Validation	Duplicate records should not be reported.	A duplicate claim exist.
7.2	Basic	Extraordinary Loss Event claim (48 or 87) reported on previous call must be reported on current call.	A claim is reported on the prior year call with catastrophe code 48 or 87 are not reported on the current call.
7.3	Actuarial	Extraordinary Loss Event Claim (48 or 87) reported on current call but not reported on previous call.	Claims reported on the current call with cat code 48 or 87 were not reported on the prior call.
7.4	Data Validation	If a Policy is reported then a Claim Number must be reported.	A claim number is not reported.
7.5	Data Validation	If a Claim Number is reported then a Policy must be reported.	A policy number is not reported.
7.6	Data Validation	Incurred Losses must be $\geq$ 500,000 if the claim is not an Extraordinary Loss Event Claim (48 or 87).	A claim without cat code 48 or 87 has an incurred loss less than 500,000.
7.7	Data Validation	Catastrophe Number should be a number that has been classified as an Extraordinary Loss Event (48 or 87).	A catastrophe code other than 48 or 87 is reported.
7.9	Data Validation	Loss Condition Act Code (Column (7)) must be 01 or 02.	A loss condition act code other than 01 or 02 is reported.
7.12	Actuarial	For column (12), Column (13) and column (15) Indemnity Case, Medical Case and DCC Case should not be less than zero.	Indemnity Case and/or Medical Case is reported as a negative number.