I. Introduction

A. Background

TexasSure Vehicle Insurance Verification (TexasSure) is the financial responsibility verification program created as a result of Senate Bill 1670 passed during the 79th Texas Legislature, Regular Session. Senate Bill 1670 added Subchapter N, Chapter 601 of the Transportation Code. Section 601.452 of the Transportation Code provides that the Texas Department of Insurance (TDI), in consultation with the Texas Department of Public Safety (DPS), the Texas Department of Motor Vehicles (TxDMV) and the Texas Department of Information Resources (DIR) “shall establish a program for verification of whether owners of motor vehicles have established financial responsibility.” Note: effective November 1, 2009, the TxDMV assumed the Texas Department of Transportation’s (TxDOT) place in the implementation and operation of SB 1670 (79th Legislature). The TxDMV is composed, in part, of the Vehicle Titles and Registration Division previously under TxDOT.

Development of the TexasSure system was completed in June 2008. The system allows authorized users a tool to confirm whether a Texas registered passenger vehicle has a valid auto liability insurance policy. TexasSure is used by all 254 county Tax Assessor-Collectors, Tax Assessor-Collector subcontractors, such as grocery stores, that do registration renewals, and on the Internet for registration renewals, DPS Texas Highway Patrol, and is available to all Texas local law enforcement.

This Reporting Guide and User Manual (manual) specifies the insurers’ requirements and procedures for providing information under the verification program. The manual directs insurers with respect to specifications for compliance with the program, including the time and manner of reporting, the appropriate submission procedures, test plans, error correction procedures, programming languages, transmission protocols, encryption formats, submission formats, system reports, and other technical requirements. The manual is subject to change with respect to changes in technology and program experience.

The TexasSure program is mandated by 28 TAC §§5.601 – 5.611, Division 7, which specifies program requirements, procedures, duties and obligations for insurers writing personal automobile insurance policies in the State of Texas.

1. TexasSure Vendor

HDI Solutions, LLC (HDI) provides development and program administration services for a variety of state clients. In addition, HDI provides extensive data-matching, warehousing, and mining services for clients across the United States.

HDI has teamed with Insure-Rite, Inc. (Insure-Rite) to provide ONLINEIVS, a state-of-the-art insurance verification solution for the State of Texas. Insure-Rite created the nation’s first system to proactively identify uninsured motorists as well as the nation’s first real-time 24/7/365 provision of insurance verification services to law enforcement.

B. Goal & Purpose

According to SB 1670, the program established must be the program most likely to reduce the number of uninsured motorists in this state, operate reliably, be cost-effective, sufficiently protect the privacy of the motor vehicle owners, sufficiently safeguard the security and integrity of information provided by insurance companies, identify and employ a method of compliance that improves public convenience, provide information that is accurate and current, and be capable of being audited by an independent auditor.
With a goal to reduce the number of uninsured motorists in this state, the implementing agencies developed a program incorporating a combination of an event based verification process with an ongoing verification process to produce the most significant results.

**Event Based Process:** The event based process allows users to obtain accurate and timely insurance information on a given vehicle or driver promptly upon request. Current Users include Texas Law Enforcement through the Texas Law Enforcement Telecommunications System (TLETS) and TxDMV County Tax Assessor Collector Offices, and Tax Assessor-Collector subcontractors. The requirements of the event based process will be met primarily through the creation of an insurance verification database, which requires insurers to report insurance policy records directly to the vendor.

The vendor refreshes the database of matched information on a weekly basis. If TexasSure is not able to match an insured vehicle to a registered vehicle after at least sixty (60) calendar days, the customer is sent an Unmatched Notice letter and is asked to assist in identifying the reason for the non-match.

**Ongoing Verification Process:** The ongoing verification process identifies and contacts the owners of registered vehicles that appear to be uninsured. These customers receive an Uninsured Notice letter, which provides information on correcting any discrepancy which caused them to be identified incorrectly as uninsured, and reiterates Texas’ financial responsibility requirements for those customers that are not in compliance with the law.
II. Database Reporting

The verification program requires insurers to use a vendor maintained database program. Authorized state users access the database program through the vendor. The vendor maintains insurer submitted data.

Insurers are required to submit personal automobile insurance policy records to the vendor. The submissions are reported weekly and must be in compliance with the format and technical requirements set forth in this manual. The vendor will maintain the information in a database and perform matching functions for both the event based and ongoing verification processes. The vendor will work with carriers having less than 1,000 in-force policies to develop cost effective database reporting procedures as necessary.

A. Appointed Managing General Agents (MGAs)

1. Guidelines

A county mutual insurance company organized and operating under Texas Insurance Code Chapter 912, is one that as of September 1, 2001, and continuously after, appointed managing general agents (MGAs), created districts, or organized local chapters to manage a portion of the company's business, independent of all other business of the county mutual insurance company. A county mutual insurance company may continue to operate in this manner and may appoint and contract with one or more managing general agencies only if the company:

- cedes 85 percent or more of the company’s direct and assumed risks to one or more reinsurers and
- has a private passenger automobile insurance business with a market share of not greater than 5 percent or is predominantly nonstandard.

B. MGA Database Reporting

Appointed MGAs may report on behalf of the company to TexasSure through a delegation agreement. See Section VII Delegation for more information on the delegation of TexasSure reporting requirements. The MGA will be assigned a unique three-digit code from the Texas Insurance Checking Office (TICO). The MGA three-digit number must be obtained from TICO prior to enrollment with TexasSure.
III. Enrollment Guidelines

Each insurer must submit an Insurance Company Profile Form (see Attachments 1, 2 and 3) prior to testing with the vendor. To determine hardware and processing requirements, it is necessary for all insurers to declare the reporting format which will be used. The following information should be included on the Company Profile Form:

- Company Name
- Interface Option (Vendor Enhanced Format, Texas Interface, X12, Small Insurers)
- Technical and Business Contacts (name, email, and phone)
- Number of Policies (estimated)
- Fixed or Delimited Format
- Preferred Transmission Day and Time

A. Managing General Agents (MGAs)

A county mutual with an appointed MGA, as described in Texas Insurance Code §912.056, must submit an insurance company profile form (Attachment 1). Each appointed MGA must submit an MGA profile form (Attachment 2) if the county mutual insurance company has delegated the TexasSure reporting requirements to the MGA. See Section VII Delegation for more information on the delegation of TexasSure reporting requirements.

B. Third-Party Reporting Companies

Insurance companies using a third-party reporting service must submit an insurance company profile form (Attachment 1) and third party reporting form (Attachment 3). Contacts must be provided for both the company and the third-party reporting service.

In the event a company delegates to an MGA and the MGA has third-party reporting for them, an insurance company profile form (Attachment 1), MGA profile form (Attachment 2), and a third-party reporting form (Attachment 3) must be submitted.

C. Insurance Company / MGA Changes

a. Name Changes

Companies and MGAs must report name changes to TexasSure within 30 days of the change. This may be accomplished by submitting a new Attachment 1 – Insurance Company Profile form and Attachment 2 – MGA Profile form to the vendor.

MGAs will be required to submit an amended delegation agreement reflective of the name change. Please reference VII, page 41 for more information regarding delegation agreements.

b. Contact Information Changes

Companies should report any contact information changes as soon as possible by emailing TexasSure@tdi.texas.gov. Companies must indicate the company control code for each company with contact changes.
IV. Insurance Policies and Vehicles to Report

In accordance with SB 1670, this program is limited to those insurers providing motor vehicle liability insurance under a personal automobile insurance policy in this state. The program will be implemented for vehicles and drivers covered under commercial insurance policies in the future when the implementing agencies determine that it is feasible. However, vehicles and drivers covered under a commercial policy may be reported at the insurer’s option. Optional reporting of commercial vehicles and/or drivers must be done in the manner required in this manual.

Vehicles Included:
Transportation Code Section 502.153 requires financial responsibility on all vehicles, except trailers and semitrailers, registered for on-road use unless the vehicle qualifies for a special registration class. Special registration classes include “antique,” or “former military vehicle.” Insurers are not required to distinguish covered vehicles by registration class. All vehicles covered under a personal automobile insurance policy must be reported unless the insurer is able to determine that the vehicle is not subject to Texas registration for on-road use. The vendor will determine what vehicles may be excluded based on registration class.

Policies Included:
- Personal Automobile Policies
- Non-Owner Policies
- Mileage-Based Policies
- Vehicle Specific Commercial Automobile Policies (Optional to Insurer)
- Named Driver Policies

The following are not required to be reported:
- All-Terrain Vehicles (ATVs)
- Golf Carts
- Recreational Off-highway Vehicle (ROVs)
## V. Data Element Definitions

### Table 1: Data Element Definitions

Refer to Tables 2, 3, and 4 for specific data reporting formats, including whether a field is mandatory or optional.

<table>
<thead>
<tr>
<th>Data Field</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Control Code</td>
<td>Vendor Primary Key (assigned to Insurer by vendor).</td>
</tr>
<tr>
<td>Date of Birth (YYYYMMDD)</td>
<td>The date of birth of the driver.</td>
</tr>
<tr>
<td>Driver Coverage Effective Date (YYYYMMDD)</td>
<td>The earliest date at which uninterrupted, continuous coverage started for the driver specified in the record. If the driver was dropped and later reinstated, this date should be the reinstatement date of the driver.</td>
</tr>
<tr>
<td>Driver Indicator (&quot;I&quot; = Included, &quot;E&quot; = Excluded)</td>
<td>Indicates if driver is covered by the policy or excluded from all vehicles on the policy.</td>
</tr>
<tr>
<td>Driver License Number</td>
<td>The driver license number that the issuing state assigns for the driver named on the same record that is included or excluded from the policy specified on the same record.</td>
</tr>
<tr>
<td>Driver License State (Postal Abbreviation)</td>
<td>The 2-digit state abbreviation of the state which issued the driver license number specified in the &quot;Driver License Number&quot; element.</td>
</tr>
<tr>
<td>First Name</td>
<td>The first name of an individual or the remainder of a company name that would not fit in the Last Name element. The business names should start in the Last Name element and overflow into the First Name element. If there is no overflow of the Last Name element into the First Name element, leave the First Name element empty.</td>
</tr>
<tr>
<td>Garaged Address</td>
<td>The full street address in the primary address where the vehicle is garaged or based.</td>
</tr>
<tr>
<td>Garaged City</td>
<td>The city in the primary address where the vehicle is garaged or based.</td>
</tr>
<tr>
<td>Garaged State (Postal Abbreviation)</td>
<td>The 2-digit state abbreviation in the primary address where the vehicle is garaged or based.</td>
</tr>
<tr>
<td>Garaged Zip</td>
<td>The ZIP+4 in the primary address where the vehicle is garaged or based. If only the 5 digit ZIP is available, last 4 spaces should be filled with spaces or zeroes.</td>
</tr>
<tr>
<td>Last Name</td>
<td>The last name of an individual or the start of a company name.</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>The full street address in the mailing address on the policy.</td>
</tr>
<tr>
<td>Mailing City</td>
<td>The city in the mailing address on the policy.</td>
</tr>
<tr>
<td>Mailing State (Postal Abbreviation)</td>
<td>The 2-digit state abbreviation in the mailing address on the policy.</td>
</tr>
<tr>
<td>Mailing Zip</td>
<td>The ZIP+4 in the mailing address on the policy. If only 5 digit ZIP available, last 4 spaces should be filled with spaces or zeroes.</td>
</tr>
<tr>
<td>Data Field</td>
<td>Definition</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Middle Name</td>
<td>The middle name of an individual.</td>
</tr>
<tr>
<td>Name Suffix</td>
<td>The suffix of an individual (i.e. “Junior” or “Senior”).</td>
</tr>
<tr>
<td>Odometer Expiration</td>
<td>For mileage based policies, the odometer reading at which the policy expires.</td>
</tr>
<tr>
<td>Policy Effective Date (YYYYMMDD)</td>
<td>The earliest date at which uninterrupted, continuous coverage started for the policy specified on the record. If the policy lapsed and was later reinstated, this date should be the reinstatement date of the policy.</td>
</tr>
<tr>
<td>Policy Expiration Date (YYYYMMDD)</td>
<td>The date on which coverage expires.</td>
</tr>
<tr>
<td>Policy ID</td>
<td>An insurer provided key or ID that would allow records in one table to be related to records in another table.</td>
</tr>
<tr>
<td>Policy Number</td>
<td>The policy number that the insurer assigns.</td>
</tr>
<tr>
<td>Policy Type (“P” = Personal, “C” = Commercial, “N” = Non-Owner, “M” = Mileage Based)</td>
<td>Indicate Personal, Commercial, Non-Owner or Mileage Based policies.</td>
</tr>
<tr>
<td>User Defined Field</td>
<td>For insurer use on tracking or other purposes. The vendor does not use or alter this.</td>
</tr>
<tr>
<td>Vehicle Coverage Effective Date (YYYYMMDD)</td>
<td>The earliest date at which uninterrupted, continuous coverage started for the vehicle specified in the record. If the vehicle was dropped and later reinstated, this date should be the reinstatement date of the vehicle.</td>
</tr>
<tr>
<td>Vehicle Make</td>
<td>The name of the manufacturer (or an abbreviation of that name) of the vehicle (i.e. “Ford,” “Chevy,” “Mitsub”).</td>
</tr>
<tr>
<td>Vehicle Model</td>
<td>The name of the vehicle model (i.e. “Mustang,” “Impala,” “Eclipse”).</td>
</tr>
<tr>
<td>Vehicle Model Year (YYYY)</td>
<td>The manufacture year of the vehicle.</td>
</tr>
<tr>
<td>Vehicle/Non-Owner Effective Date (YYYYMMDD)</td>
<td>The earliest date at which uninterrupted, continuous coverage started for the vehicle/non-owner specified in the record. If the vehicle/non-owner was dropped and later reinstated, this date should be the reinstatement date of the vehicle/non-owner.</td>
</tr>
<tr>
<td>Vehicle VIN Number</td>
<td>The Vehicle Identification Number the manufacturer assigns to the vehicle that is covered by the policy and represented by the same record.</td>
</tr>
</tbody>
</table>
VI. Database Program

A. Reporting and Transmission Guidelines

1. Frequency
New insurers are required to begin compliance within 30 days of writing personal
automobile insurance in Texas. See Section VIII for further details.

Weekly, each database insurer will submit data on all of the insurer’s personal
automobile insurance policies in force in Texas.

The weekly submission date and time is specified by the vendor and is approximately
seven calendar days apart.

2. Reporting Period
The reporting period runs Monday to Sunday. Regardless of what day within that
reporting period a company submits the weekly report, the date on the file should always
be the Monday of the reporting period. This allows the vendor to ensure that a file is
submitted from each company for each reporting period.

If the Monday date is a State or Federal holiday, it does not change the date required to
be used on the submission. The date should always be the Monday of the reporting
period.

3. Submission Policy
Each file submitted must contain records for only one company control code. A company
may submit one or more files.

In order for all file submissions to be properly processed for each reporting period, the
following data submission procedure must be observed:

- For each reporting period, the submission window opens at 9 a.m. MST on Thursday
  and closes at 5 p.m. MST on the following Thursday.

- All files submitted with proper file naming conventions will be either received or
  rejected beginning Friday afternoon. Generally, the receipt or rejection notification
  will be sent as soon as possible. Submission staff will follow up directly with
  companies that submit files not conforming to the requirements (i.e., companies
  receiving a rejection notice).

- Companies that have not submitted a useable file by Wednesday afternoon will be
  notified that a useable file must be received by 5 p.m., MST on Thursday, in order for
  their data to be included in the current processing period matching process.

- On the Sunday following the reporting period, the match process closes. The
  updated insurance verification file is generated on Monday, after completion of the
  match process. In addition, reports are generated for TDI detailing match rates and
  indicating any companies that failed to submit for the processing period.
Example for Reporting Period Monday, the 9th

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9 a.m. MST Submission Window Opens</td>
<td></td>
<td>7</td>
</tr>
</tbody>
</table>

|        | 8      | 9       | 10        | 11       | 12     | 13       |
|        |        |         | Matching Process Begins | Notification Sent to Delinquent Companies | 5 p.m. MST Submission Window Closes |        |

|        |        | 14      | 15        | 16       | 17     | 18       |
|        |        |         | Matching Process Ends | Reports Generated |        |          |

4. Specifications
The encryption method will be File Transfer Protocol (FTP) with Pretty Good Privacy (PGP).

5. Small Insurers
The vendor has developed specific reporting procedures for insurers with less than 1,000 issued and outstanding personal automobile insurance policies. Additional information can be found in Section VI.B.2.d of this guide.

B. Data Element Specifications

1. Company Control Code
The Company Control Code is a numeric code supplied by the vendor to be used to distinguish the source of data, generally the company, MGA or County Mutual. The vendor will assign this number to each company following the submission of the Company Profile Form.

2. Reporting Format
Regardless of the reporting format selected, the insurer must coordinate development efforts with the vendor’s technical staff to ensure that data is correctly submitted and related.

Companies are encouraged to report all available data, including optional fields. Mandatory fields are required for matching purposes; however, those fields not available to the company should be left blank. Fillers or dummy data should not be submitted for fields where data is not collected by the company. Fillers or dummy data negatively affects the matching process, it is important that companies do not use fillers or dummy data.
a. Format 1 — Vendor Enhanced Format

Insurers will submit the full book of business weekly. Insurers will generate one record per driver, vehicle, and policy combination. For example, if policy number 12345 insured drivers Jane and John Doe on a 2004 Jeep and a 2005 GMC, then four records with the following combinations should be created:

- Jane Doe, 2004 Jeep, policy 12345
- Jane Doe, 2005 GMC, policy 12345
- John Doe, 2004 Jeep, policy 12345
- John Doe, 2005 GMC, policy 12345

Table 2: Data Element Reporting Specifications, Reporting Format 1

<table>
<thead>
<tr>
<th>Field Number</th>
<th>Description</th>
<th>Type</th>
<th>Mandatory or Optional</th>
<th>Position*</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Company Control Code</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>0-9</td>
<td>10</td>
</tr>
<tr>
<td>1</td>
<td>User Defined Field</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>10-29</td>
<td>20</td>
</tr>
<tr>
<td>2</td>
<td>Policy Number</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>30-59</td>
<td>30</td>
</tr>
<tr>
<td>3</td>
<td>Policy Type (&quot;P&quot; = Personal, &quot;C&quot; = Commercial, &quot;N&quot; = Non-Owner*, &quot;M&quot; = Mileage Based)</td>
<td>Alpha</td>
<td>M</td>
<td>60</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>Policy Effective Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>61-68</td>
<td>8</td>
</tr>
<tr>
<td>5</td>
<td>Policy Expiration Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>69-76</td>
<td>8</td>
</tr>
<tr>
<td>6</td>
<td>Vehicle/Non-owner Effective Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>77-84</td>
<td>8</td>
</tr>
<tr>
<td>7</td>
<td>Mailing Address</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>85-124</td>
<td>40</td>
</tr>
<tr>
<td>8</td>
<td>Mailing City</td>
<td>Alpha</td>
<td>M</td>
<td>125-149</td>
<td>25</td>
</tr>
<tr>
<td>9</td>
<td>Mailing State (Postal Abbreviation) (Use &quot;IT&quot; for International Mailing Address)</td>
<td>Alpha</td>
<td>M</td>
<td>150-151</td>
<td>2</td>
</tr>
<tr>
<td>10</td>
<td>Mailing Zip</td>
<td>Numeric</td>
<td>M</td>
<td>152-160</td>
<td>9</td>
</tr>
<tr>
<td>11</td>
<td>Vehicle VIN Number</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>161-190</td>
<td>30</td>
</tr>
<tr>
<td>12</td>
<td>Vehicle Make</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>191-196</td>
<td>6</td>
</tr>
<tr>
<td>13</td>
<td>Vehicle Model</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>197-211</td>
<td>15</td>
</tr>
<tr>
<td>14</td>
<td>Vehicle Model Year (YYYY)</td>
<td>Numeric</td>
<td>M</td>
<td>212-215</td>
<td>4</td>
</tr>
<tr>
<td>15</td>
<td>Odometer Expiration (Mandatory if Policy Type = &quot;M&quot;)</td>
<td>Numeric</td>
<td>M</td>
<td>216-222</td>
<td>7</td>
</tr>
<tr>
<td>16</td>
<td>Garaged Address</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>223-262</td>
<td>40</td>
</tr>
<tr>
<td>17</td>
<td>Garaged City</td>
<td>Alpha</td>
<td>O</td>
<td>263-287</td>
<td>25</td>
</tr>
<tr>
<td>18</td>
<td>Garaged State (Postal Abbreviation)</td>
<td>Alpha</td>
<td>O</td>
<td>288-289</td>
<td>2</td>
</tr>
<tr>
<td>19</td>
<td>Garaged Zip</td>
<td>Numeric</td>
<td>O</td>
<td>290-298</td>
<td>9</td>
</tr>
<tr>
<td>Field Number</td>
<td>Description</td>
<td>Type</td>
<td>Mandatory or Optional</td>
<td>Position*</td>
<td>Size</td>
</tr>
<tr>
<td>--------------</td>
<td>------------------------------------------------------------------------------</td>
<td>--------------</td>
<td>-----------------------</td>
<td>-----------</td>
<td>------</td>
</tr>
<tr>
<td>20</td>
<td>Driver Indicator (&quot;I&quot; = Included, &quot;E&quot; = Excluded)</td>
<td>Alpha</td>
<td>M</td>
<td>299</td>
<td>1</td>
</tr>
<tr>
<td>21</td>
<td>Last Name</td>
<td>Alpha</td>
<td>M</td>
<td>300-329</td>
<td>30</td>
</tr>
<tr>
<td>22</td>
<td>First Name</td>
<td>Alpha</td>
<td>M</td>
<td>330-359</td>
<td>30</td>
</tr>
<tr>
<td>23</td>
<td>Middle Name</td>
<td>Alpha</td>
<td>O</td>
<td>360-389</td>
<td>30</td>
</tr>
<tr>
<td>24</td>
<td>Driver License State (Postal Abbreviation) (Use &quot;IT&quot; for International Licenses)</td>
<td>Alpha</td>
<td>M</td>
<td>390-391</td>
<td>2</td>
</tr>
<tr>
<td>25</td>
<td>Driver License Number</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>392-412</td>
<td>21</td>
</tr>
<tr>
<td>26</td>
<td>Date of Birth (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>413-420</td>
<td>8</td>
</tr>
</tbody>
</table>

* The Position column in Table 2 is applicable to fixed length records only.
** When reporting non-owner policies, data fields associated with the vehicle are not required.

### i. File Naming Convention

Each file submitted must contain records for only one company control code. A company may submit one or more files. The file name must consist of the Company Control Code, Period Processing Date, File Number, Total Record Count, and reporting format delimited by underscores. The date format must be YYYYMMDD and the File Number must be unique among a set of files submitted for a single company and indicate the total number of files sent. The date included in the file name indicates the first day of the reporting period for the submission. For example, if the Company Control Code is ABCD, the next processing period begins November 6, 2006, and the company split one million records equally between two files, the file names should be:

```
ABCD_20061106_1of2_500000_E.pgp
ABCD_20061106_2of2_500000_E.pgp
```

The recommended file extension is pgp. The “E” distinguishes the reporting format as the Vendor Enhanced Format.

Upon the creation of a properly formed file, the file should be uploaded to an FTP site as defined by the vendor.

Additional Examples:

**Reporting Period: Monday, April 16, to Sunday, April 22, 2007**

1) Insurer compiles data on Friday, April 13, 2007, to be submitted for the forthcoming reporting period. The company submits this file to the vendor on Tuesday, April 17, 2007. Using Reporting Format 1, company ABCD sends 1 file of 500,000 records using the following filename:

```
ABCD_20070416_1of1_500000_E.pgp
```

2) Insurer compiles data on Friday, April 20, 2007, to be submitted for the current reporting period. The company submits the file to the vendor on Friday, April 20, 2007. Using Reporting Format 1, company ABCD sends 1 file of 500,000 records using the following filename:

```
ABCD_20070416_1of1_500000_E.pgp
```
3) Insurer compiles data on Friday, April 20, 2007, to be submitted for the forthcoming reporting period. The company submits this file to the vendor on Tuesday, April 24, 2007. Using Reporting Format 1, company ABCD sends 1 file of 500,000 records using the following filename: 
ABCD_20070423_1of1_500000_E.pgp

4) Insurer compiles data and submits as detailed in #2 above. But, the insurer gets a rejection file on Monday, April 23, 2007, because the submitted file could not be processed by the vendor. The insurer corrects the data file as necessary and resends this file to the vendor on Thursday, April 26, 2007. Using Reporting Format 1, company ABCD sends 1 file of 500,000 records using the following filename: 
ABCD_20070416_1of1_500000_E.pgp

Additionally, the insurer should be compiling and sending a file for the next reporting period, April 23 – 29, 2007. The insurer would need to send two files to the vendor in the same week, one a corrected file for the reporting period April 16 – April 22, 2007, and one a current file for the reporting period April 23 – April 29, 2007.

ii. File Compression and Encryption

Encryption of the data files via PGP is required. The vendor will make a public PGP key available to insurers. The expected file extension is 'pgp' (or any other appropriate extension for encrypted files such as 'asc' agreed upon by the vendor). PGP encryption also compresses. If additional compression is required, the vendor will address this with the insurer on an individual basis.

iii. Field Format Specification

Records can be created with either delimited or fixed length fields. In both cases, each record should be followed by a carriage return character followed by a line feed character. The carriage return is an ASCII character that, when combined with the ASCII character for a new line or line feed, represent a new line within a file. The ASCII character values for the carriage return and line feed are:

Carriage Return (CR): decimal value: 13, hex value = 0D
Line Feed (LF): decimal value: 10, hex value = 0A

A link to an ASCII character code chart:

It is highly recommended that delimiters are used as opposed to fixed length. Delimited records are more flexible, easier to process, and less problematic when it comes to interpreting padding characters that must be used with fixed length records. In the case of uncompressed files, the volume of raw data is generally less with delimited records since most fields don’t require the full length that fixed fields must fill. Less volume results in reduced file transfer time.

The '|' pipe character should be used as the delimiter.

If the insurer is unable to generate delimited records, they may submit fixed length records using spaces to pad field values that are shorter than the required field length. The total length of a fixed length record is 421 characters plus a carriage return followed by a line feed character (423 total).

If there is no information available or applicable for a particular element, including for optional elements, it should NOT be filled with comments or notes like "UNKNOWN," "N/A," "FLEET," etc. In the case of delimited records, there should
be no data between the delimiter and the field. In the case of fixed records, the field should be padded with spaces.

iv. Delimited Record Sample
ABCD|UserDefinedField|12345|P|20060601|20080601|20060801|Anystreet|Anytown|TX|11111|ZJ123456789|Jeep|Cherokee|2004|76543|Anystreet|Anytown|TX|11111|I|Doe|Jane|Ann|TX|5555566666|19651201

v. Fixed Record Sample
ABCD******UserDefinedField****12345*****************************************************************************P 200606012008060120060801Anystreet***************************************************************************** ***Anytown*****************************************************************************ZJ123456789***************************************************************************** ******Jeep**Cherokee******200476543**Anystreet************ ****************************Anytown*****************************TX11111****IDoe** ******************************************************************Jane*****************************************************************************Ann** ****************************TX5555566666*****************************19651201
b. **Format 2 – Texas Interface**
   Insurer will submit full book of business weekly in normalized form.

### Table 3: Data Element Reporting Specifications, Reporting Format 2

**Vehicle Record**

<table>
<thead>
<tr>
<th>Field Number</th>
<th>Description</th>
<th>Type</th>
<th>Mandatory or Optional</th>
<th>Position*</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Company Control Code</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>0-9</td>
<td>10</td>
</tr>
<tr>
<td>1</td>
<td>User Defined Field</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>10-29</td>
<td>20</td>
</tr>
<tr>
<td>2</td>
<td>Policy Type (&quot;P&quot; = Personal, &quot;C&quot; = Commercial, &quot;N&quot; = Non-Owner**, &quot;M&quot; = Mileage Based)</td>
<td>Alpha</td>
<td>M</td>
<td>30</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>Policy Number</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>31-60</td>
<td>30</td>
</tr>
<tr>
<td>4</td>
<td>Policy ID (Use if policy number is not unique; otherwise repeat policy number)</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>61-90</td>
<td>30</td>
</tr>
<tr>
<td>5</td>
<td>Policy Effective Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>91-98</td>
<td>8</td>
</tr>
<tr>
<td>6</td>
<td>Policy Expiration Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>99-106</td>
<td>8</td>
</tr>
<tr>
<td>7</td>
<td>Vehicle Coverage Effective Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>107-114</td>
<td>8</td>
</tr>
<tr>
<td>8</td>
<td>Vehicle VIN Number</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>115-144</td>
<td>30</td>
</tr>
<tr>
<td>9</td>
<td>Vehicle Make</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>145-150</td>
<td>6</td>
</tr>
<tr>
<td>10</td>
<td>Vehicle Model</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>151-165</td>
<td>15</td>
</tr>
<tr>
<td>11</td>
<td>Vehicle Model Year (YYYY)</td>
<td>Numeric</td>
<td>M</td>
<td>166-169</td>
<td>4</td>
</tr>
<tr>
<td>12</td>
<td>Odometer Expiration (Mandatory if Policy Type = &quot;M&quot;)</td>
<td>Numeric</td>
<td>M</td>
<td>170-176</td>
<td>7</td>
</tr>
<tr>
<td>13</td>
<td>Garaged Address</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>177-216</td>
<td>40</td>
</tr>
<tr>
<td>14</td>
<td>Garaged City</td>
<td>Alpha</td>
<td>O</td>
<td>217-241</td>
<td>25</td>
</tr>
<tr>
<td>15</td>
<td>Garaged State (Postal Abbreviation)</td>
<td>Alpha</td>
<td>O</td>
<td>242-243</td>
<td>2</td>
</tr>
<tr>
<td>16</td>
<td>Garaged Zip</td>
<td>Numeric</td>
<td>O</td>
<td>244-252</td>
<td>9</td>
</tr>
</tbody>
</table>
**Driver Record**

<table>
<thead>
<tr>
<th>Field Number</th>
<th>Description</th>
<th>Type</th>
<th>Mandatory or Optional</th>
<th>Position*</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Company Control Code</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>0-9</td>
<td>10</td>
</tr>
<tr>
<td>1</td>
<td>User Defined Field</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>10-29</td>
<td>20</td>
</tr>
<tr>
<td>2</td>
<td>Policy Type (&quot;P&quot; = Personal, &quot;C&quot; = Commercial, &quot;N&quot; = Non-Owner**, &quot;M&quot; = Mileage Based)</td>
<td>Alpha</td>
<td>M</td>
<td>30</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>Policy Number</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>31-60</td>
<td>30</td>
</tr>
<tr>
<td>4</td>
<td>Policy ID (Use if policy number is not unique; otherwise repeat policy number)</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>61-90</td>
<td>30</td>
</tr>
<tr>
<td>5</td>
<td>Policy Effective Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>91-98</td>
<td>8</td>
</tr>
<tr>
<td>6</td>
<td>Policy Expiration Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>99-106</td>
<td>8</td>
</tr>
<tr>
<td>7</td>
<td>Driver Coverage Effective Date (YYYYMMDD)</td>
<td>Numeric</td>
<td>O</td>
<td>107-114</td>
<td>8</td>
</tr>
<tr>
<td>8</td>
<td>Driver Indicator (&quot;I&quot; = Included, &quot;E&quot; = Excluded)</td>
<td>Alpha</td>
<td>M</td>
<td>115</td>
<td>1</td>
</tr>
<tr>
<td>9</td>
<td>Last Name</td>
<td>Alpha</td>
<td>M</td>
<td>116-145</td>
<td>30</td>
</tr>
<tr>
<td>10</td>
<td>First Name</td>
<td>Alpha</td>
<td>M</td>
<td>146-175</td>
<td>30</td>
</tr>
<tr>
<td>11</td>
<td>Middle Name</td>
<td>Alpha</td>
<td>O</td>
<td>176-205</td>
<td>30</td>
</tr>
<tr>
<td>12</td>
<td>Name Suffix</td>
<td>Alpha-Numeric</td>
<td>O</td>
<td>206-210</td>
<td>5</td>
</tr>
<tr>
<td>13</td>
<td>Mailing Address</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>211-250</td>
<td>40</td>
</tr>
<tr>
<td>14</td>
<td>Mailing City</td>
<td>Alpha</td>
<td>M</td>
<td>251-275</td>
<td>25</td>
</tr>
<tr>
<td>15</td>
<td>Mailing State (Postal Abbreviation) (Use &quot;IT&quot; for international mailing address)</td>
<td>Alpha</td>
<td>M</td>
<td>276-277</td>
<td>2</td>
</tr>
<tr>
<td>16</td>
<td>Mailing Zip</td>
<td>Numeric</td>
<td>M</td>
<td>278-286</td>
<td>9</td>
</tr>
<tr>
<td>17</td>
<td>Driver License State (Postal Abbreviation) (Use &quot;IT&quot; for international licenses)</td>
<td>Alpha</td>
<td>M</td>
<td>287-288</td>
<td>2</td>
</tr>
<tr>
<td>18</td>
<td>Driver License Number</td>
<td>Alpha-Numeric</td>
<td>M</td>
<td>289-309</td>
<td>21</td>
</tr>
<tr>
<td>19</td>
<td>Date of Birth (YYYYMMDD)</td>
<td>Numeric</td>
<td>M</td>
<td>310-317</td>
<td>8</td>
</tr>
</tbody>
</table>

* The Position column in Table 3 is applicable to fixed length records only.

** When reporting non-owner policies, data fields associated with the vehicle are not required.
i. **File Naming Convention**

Each file submitted must contain records for only one company. A company may submit one or more files. The file name must consist of the Company Control Code, Period Processing Date, File Number, Total Record Count and Record Type (Vehicle (V), Driver (D)) delimited by underscores. The date format must be YYYYMMDD and the File Number must be unique among a set of files submitted for a single company and indicate the total number of files sent. The date included in the file name indicates the first day of the reporting period for the submission. For example, if the Company Control Code is ABCD, the next processing period begins November 6, 2006, and the company split one million Vehicle records equally between two files, the file names should be:

```
ABCD_20061106_1of2_500000_V.pgp
ABCD_20061106_2of2_500000_V.pgp
```

Similarly, if the company split one million Driver records equally between two files, the file names would be:

```
ABCD_20061106_1of2_500000_D.pgp
ABCD_20061106_2of2_500000_D.pgp
```

The recommended file extension is pgp. The “V” and “D” distinguish the reporting format as the Texas Interface Format.

Upon the creation of a properly formed file, the file should be uploaded to an FTP site as defined by the vendor.

**Additional Examples:**

**Reporting Period: Monday, April 16, to Sunday, April 22, 2007**

1) Insurer compiles data on Friday, April 13, 2007, to be submitted for the forthcoming reporting period. The company submits this file to the vendor on Tuesday, April 17, 2007. Using Reporting Format 2, company ABCD sends one file of 500,000 Vehicle Records and one file of 750,000 Driver Records, using the following filenames:

```
ABCD_20070416_1of1_500000_V.pgp
ABCD_20070416_1of1_750000_D.pgp
```

2) Insurer compiles data on Friday, April 20, 2007, to be submitted for the current reporting period. The company submits the file to the vendor on Friday, April 20, 2007. Using Reporting Format 2, company ABCD sends one file of 500,000 Vehicle Records and one file of 750,000 Driver Records, using the following filename:

```
ABCD_20070416_1of1_500000_V.pgp
ABCD_20070416_1of1_750000_D.pgp
```

3) Insurer compiles data on Friday, April 20, 2007, to be submitted for the forthcoming reporting period. The company submits this file to the vendor on Tuesday, April 24, 2007. Using Reporting Format 2, company ABCD sends one file of 500,000 Vehicle Records and one file of 750,000 Driver Records, using the following filename:

```
ABCD_20070423_1of1_500000_V.pgp
ABCD_20070423_1of1_750000_D.pgp
```

4) Insurer compiles data and submits as detailed in #2 above, but the insurer gets a rejection file on Monday, April 23, 2007, because the
submitted file could not be processed by the vendor. The insurer corrects the data file as necessary and resends this file to vendor on Thursday, April 26, 2007. Using Reporting Format 2, company ABCD sends one file of 500,000 Vehicle Records and one file of 750,000 Driver Records, using the following filename:

ABCD_20070416_1of1_500000_V.pgp
ABCD_20070416_1of1_750000_D.pgp

In addition, the insurer should be compiling and sending a file for the next reporting period, April 23 – 29, 2007. The insurer would need to send two files to the vendor in the same week, one with a corrected file for the reporting period 4/16 to 4/22/2007, and one with a current file for the reporting period April 23 – 29, 2007.

ii. File Compression and Encryption

Encryption of the data files via PGP is required. The vendor will make a public PGP key available to insurers. The expected file extension is ‘.pgp’ (or any other appropriate extension for encrypted files such as ‘.asc’ agreed upon by the vendor). PGP encryption also compresses. If additional compression is required, the vendor will address this with the insurer on an individual basis.

iii. Field Format Specification

Records can be created with either delimited or fixed length fields. In both cases, each record should be followed by a carriage return character followed by a line feed character. The carriage return is an ASCII character that, when combined with the ASCII character for a new line or line feed, represents a new line within a file. The ASCII character values for the carriage return and line feed are:

Carriage Return (CR): decimal value: 13, hex value = 0D Line Feed (LF): decimal value: 10, hex value = 0A

A link to an ASCII character code chart:

It is highly recommended that delimiters are used as opposed to fixed length. Delimited records are more flexible, easier to process, and less problematic when it comes to interpreting padding characters that must be used with fixed length records. In the case of uncompressed files, the volume of raw data is generally less with delimited records, since most fields don’t require the full length that fixed fields must fill. Less volume results in reduced file transfer time.

The ‘|’ pipe character should be used as the delimiter.

If the insurer is unable to generate delimited records, they may submit fixed length records using spaces to pad field values that are shorter than the required field length. For the vehicle records, the total length of a fixed length record is 253 characters plus a carriage return followed by a line feed character (255 total). For the driver records, the total length of a fixed length record is 318 characters plus a carriage return followed by a line feed character (320 total).

If there is no information available or applicable for a particular element, including for optional elements, it should NOT be filled with comments or notes like "UNKNOWN," "N/A," "FLEET," etc. In the case of delimited records, there should be no data between the delimiter and the field. In the case of fixed records, the field should be padded with spaces.
iv. Vehicle Record Samples
Delimited Record Sample
ABCD|UserDefinedField|P|12345|12345|20060601|20080601|20060801|ZJ123456789|Jeep|Cherokee|2004|76543|Anystreet|Anytown|TX|1
1111

Fixed Record Sample
ABCD******UserDefinedField****P12345*************************
12345*************************200606012008060120060801ZJ12345
6789*************************Jeep**Cherokee********200476543**Anystre
eet*************************Anytown************************TX
11111****

v. Driver Record Samples
Delimited Record Sample
ABCD|UserDefinedField|P|12345|12345|20060601|20080601|20060801|I|Doe|John|A|III|Anystreet|Anytown|TX|11111|TX|5555566666|1
9651201

Fixed Record Sample
ABCD******UserDefinedField****P12345*************************
12345*************************200606012008060120060801IDoe***
*************************************************************************A********
*************************************************************************III**Anystre
eet*************************
***********************************************************************Anytown************************TX11111****TX5555566666******
*****19651201

c. Format 3 – X12
X12 Format via FTP with PGP. This interface is based on EDI X12 811 V4010 x134. The exact specification can be obtained at www.wpc-edi.com.
<table>
<thead>
<tr>
<th>Field</th>
<th>Definition (Deviations from WPC EDI Guide are in Italics.)</th>
<th>Type*</th>
<th>Mandatory or Optional</th>
<th>Max Size</th>
<th>Data Elements in EDI (wpc-edi.com 811 v4010) (Deviations from WPC EDI Guide are in Italics.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Control Code</td>
<td>Insure-Rite Primary Key (assigned to insurer by Insure-Rite)</td>
<td>AN</td>
<td>M</td>
<td>9</td>
<td>ST Transaction Set Header: ST02</td>
</tr>
<tr>
<td>HL4 Insured</td>
<td>One HL4 loop required per insured on policy</td>
<td></td>
<td>M</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last Name</td>
<td>The last name of the insured individual or the company name</td>
<td>A</td>
<td>M</td>
<td>30</td>
<td>HL4 Insured Name; NM1: NM103 when NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>First Name</td>
<td>The first name of the insured individual</td>
<td>A</td>
<td>M</td>
<td>25</td>
<td>HL4 Insured Name; NM1: NM104 when NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>Middle Name</td>
<td>The middle name of the insured individual</td>
<td>A</td>
<td>O</td>
<td>25</td>
<td>HL4 Insured Name; NM1: NM105 when NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>Driver License Number (XX12345678)</td>
<td>Use 2 character state abbreviation followed by DL number (Ex: TX12345678)</td>
<td>AN</td>
<td>M</td>
<td>21</td>
<td>HL4 Insured Name; NM109 when NM108=&quot;N&quot; &amp; NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>The full street address in the mailing address on the policy</td>
<td>AN</td>
<td>M</td>
<td>40</td>
<td>HL4 Insured Name; NM1: N301, when NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>Mailing City</td>
<td>The city in the mailing address on the policy</td>
<td>A</td>
<td>M</td>
<td>25</td>
<td>HL4 Insured Name; NM1: N401, when NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>Mailing State (Postal Abbreviation)</td>
<td>The 2-digit state abbreviation in the mailing address on the policy</td>
<td>A</td>
<td>M</td>
<td>2</td>
<td>HL4 Insured Name; NM1: N402, when NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>Mailing Zip</td>
<td>The ZIP+4 in the mailing address on the policy. If only 5 digit ZIP available, last 4 spaces should be zero filled.</td>
<td>N</td>
<td>M</td>
<td>9</td>
<td>HL4 Insured Name; NM1: N403, when NM101 = &quot;IL&quot;</td>
</tr>
<tr>
<td>Policy Number</td>
<td>The policy number assigned by the insurer</td>
<td>AN</td>
<td>M</td>
<td>30</td>
<td>HL4 Policy; IT1: REF03 when REF02 = &quot;IG&quot;</td>
</tr>
<tr>
<td>Policy Type</td>
<td>&quot;P&quot; = Personal, &quot;C&quot; = Commercial, &quot;N&quot; = Non-Owner, &quot;M&quot; = Mileage Based</td>
<td>A</td>
<td>M</td>
<td>1</td>
<td>HL4 Policy; IT1: REF03 when REF02 = &quot;TY&quot;</td>
</tr>
<tr>
<td>Odometer Expiration (** Mandatory if Policy Type= &quot;M&quot;)</td>
<td>For mileage based policies, the odometer reading at which the policy expires.</td>
<td>N</td>
<td>M**</td>
<td>7</td>
<td>HL4 Policy; IT1: REF03 when REF02 = &quot;MG&quot;</td>
</tr>
<tr>
<td>Field</td>
<td>Definition (Deviations from WPC EDI Guide are in Italics.)</td>
<td>Type*</td>
<td>Mandatory or Optional</td>
<td>Max Size</td>
<td>Data Elements in EDI (wpc-edi.com 811 v4010) (Deviations from WPC EDI Guide are in Italics.)</td>
</tr>
<tr>
<td>-------</td>
<td>---------------------------------------------------</td>
<td>-------</td>
<td>-----------------------</td>
<td>----------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Policy Effective Date (YYYYMMDD)</td>
<td>The earliest date at which uninterrupted, continuous, coverage started for the vehicle/driver combination specified on the record. If the policy lapsed or a vehicle was dropped from it and was later reinstated, this date should be the reinstatement date of the policy or vehicle, respectively.</td>
<td>N</td>
<td>M</td>
<td>8</td>
<td>HL4 Policy; IT1: DTM02 when DTM01 = &quot;007&quot;</td>
</tr>
<tr>
<td>Policy Expiration Date (YYYYMMDD)</td>
<td>The date on which coverage expires</td>
<td>N</td>
<td>M</td>
<td>8</td>
<td>HL4 Policy; IT1: DTM02 when DTM01 = &quot;036&quot;</td>
</tr>
<tr>
<td>Date of Birth (YYYYMMDD)</td>
<td>The date of birth of the driver</td>
<td>N</td>
<td>M</td>
<td>8</td>
<td>HL4 Policy; IT1: DTM02 when DTM01 = &quot;222&quot;</td>
</tr>
<tr>
<td>HL5 Vehicle</td>
<td>HL5 loop can be repeated per HL4</td>
<td></td>
<td></td>
<td>M</td>
<td></td>
</tr>
<tr>
<td>Vehicle VIN Number</td>
<td>The Vehicle Identification Number assigned to the vehicle by the manufacturer that is covered by the policy</td>
<td>AN</td>
<td>M</td>
<td>25</td>
<td>HL5 Vehicle; LX: VEH02</td>
</tr>
<tr>
<td>Vehicle Model Year (YYYY)</td>
<td>The year the vehicle was manufactured</td>
<td>N</td>
<td>M</td>
<td>4</td>
<td>HL5 Vehicle; LX: VEH03</td>
</tr>
<tr>
<td>Garaged State (Postal Abbreviation)</td>
<td>The 2-digit state abbreviation where the vehicle is garaged or based</td>
<td>A</td>
<td>O</td>
<td>2</td>
<td>HL5 Vehicle; LX: VEH10</td>
</tr>
<tr>
<td>Garaged Zip Code</td>
<td>The Zip code where the vehicle is garaged or based</td>
<td>AN</td>
<td>O</td>
<td>9</td>
<td>HL5 Vehicle; LX: VEH11</td>
</tr>
<tr>
<td>Vehicle Make</td>
<td>The name of the manufacturer (or an abbreviation of it) of the vehicle (i.e. “Ford,” “Chevy,” “Mitsub”)</td>
<td>AN</td>
<td>M</td>
<td>6</td>
<td>HL 5 Vehicle; PID: PID5 when PID4=&quot;VEHMK&quot; and PID1=&quot;X&quot; OR first 6 characters from PID5 when PID4=&quot;VEHDS&quot; and PID1=&quot;F&quot;</td>
</tr>
<tr>
<td>Vehicle Model</td>
<td>The name of the vehicle model (i.e. “Mustang,” “Impala,” “Eclipse”)</td>
<td>AN</td>
<td>O</td>
<td>12</td>
<td>HL 5 Vehicle; PID: PID5 when PID4=&quot;VEHMD&quot; and PID1=&quot;X&quot; (Empty when PID1=&quot;F&quot;)</td>
</tr>
<tr>
<td>Field</td>
<td>Definition (Deviations from WPC EDI Guide are in Italics.)</td>
<td>Type</td>
<td>Mandatory or Optional</td>
<td>Max Size</td>
<td>Data Elements in EDI (wpc-edi.com 811 v4010) (Deviations from WPC EDI Guide are in Italics.)</td>
</tr>
<tr>
<td>-------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------</td>
<td>------</td>
<td>-----------------------</td>
<td>----------</td>
<td>-----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Vehicle/Non-Owner Effective Date (YYYYMMDD)</td>
<td>The earliest date at which uninterrupted, continuous, coverage started for the vehicle specified in the record. If the vehicle was dropped and later reinstated, this date should be the reinstatement date of the vehicle.</td>
<td>N</td>
<td>M</td>
<td>8</td>
<td>HL5 Vehicle; LX: DTM02 when DTM01 = &quot;007&quot;</td>
</tr>
<tr>
<td>HL8 Charge Detail †</td>
<td>HL8 loop: optional; can be repeated per HL5.</td>
<td>O</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excluded Driver Last Name</td>
<td>Last name of an excluded driver on the policy.</td>
<td>A</td>
<td>O***</td>
<td>30</td>
<td>HL8 Charge Detail; NM1: NM103 when NM101 = &quot;ED&quot;</td>
</tr>
<tr>
<td>Excluded Driver First Name</td>
<td>First name of an excluded driver on the policy.</td>
<td>A</td>
<td>O***</td>
<td>25</td>
<td>HL8 Charge Detail; NM1: NM104 when NM101 = &quot;ED&quot;</td>
</tr>
<tr>
<td>Excluded Driver Middle Name</td>
<td>Middle name of an excluded driver on the policy.</td>
<td>A</td>
<td>O</td>
<td>25</td>
<td>HL8 Charge Detail; NM1: NM105 when NM101 = &quot;ED&quot;</td>
</tr>
<tr>
<td>Excluded Driver DL (XX12345678) and DOB (YYYYMMDD)</td>
<td>Drivers License Number (Use 2 character state abbreviation followed by DL number) and Date of Birth for Excluded Driver</td>
<td>AN</td>
<td>O***</td>
<td></td>
<td>HL8 Charge Detail; NM1: NM109 when NM108=&quot;N&quot;; Submit with semi-colon (&quot;,&quot;) separator. Example: &quot;TX12345678;19670116&quot;</td>
</tr>
</tbody>
</table>

* Type A=Alpha, N=Numeric, AN=Alpha-Numeric
** All mandatory segments to comply with EDI X12 811 v4010 must also be submitted. (i.e. ISA, GS, ST, BIG)
*** Excluded Driver fields are mandatory for reported policies with named driver exclusions.
† Texas insurance policies typically exclude drivers at a policy level rather than at a vehicle level. If an insurer stores excluded drivers at a vehicle level (as this is consistent with the X12 standard interface), they may report the excluded driver at the vehicle level in this X12 interface. The TexasSure system will address the driver record as though it was excluded from all vehicles contained on the same policy.

The following formatting rules must be observed:
- SegmentTerminator = ~ (+ Carriage Return and Line Feed)
- ElementTerminator = *
- CompositeTerminator = : 

i. **File Naming Convention**
Each file submitted must contain records for only one company control code. A company may submit one or more files. The file name must consist of the Company Control Code, Period Processing Date, File Number, Total Record Count, and Reporting Format delimited by underscores. The date format must be YYYYMMMDDD and the File Number must be unique among a set of files submitted for a single company and indicate the total number of files sent. The date included in the file name indicates the first day of the reporting period for the submission. For example, if the Company Control Code is ABCD, the next processing period...
begins November 6, 2006, and the company split one million records equally between two files, the file names should be:

ABCD_20061106_1of2_500000_X.pgp
ABCD_20061106_2of2_500000_X.pgp

The recommended file extension is pgp. The “X” distinguishes the reporting format as the X12 Format.

Upon the creation of a properly formed file, the file should be uploaded to an FTP site as defined by the vendor.

Additional Examples:

Reporting Period: Monday, April 16, to Sunday, April 22, 2007

1) Insurer compiles data on Friday, April 13, 2007, to be submitted for the forthcoming reporting period. The company submits this file to the vendor on Tuesday, April 17, 2007. Using Reporting Format 3, company ABCD sends one file of 500,000 records, using the following filename:

   ABCD_20070416_1of1_500000_X.pgp

2) Insurer compiles data on Friday, April 20, 2007, to be submitted for the current reporting period. The company submits the file to the vendor on Friday, April 20, 2007. Using Reporting Format 3, company ABCD sends one file of 500,000 records, using the following filename:

   ABCD_20070416_1of1_500000_X.pgp

3) Insurer compiles data on Friday, April 20, 2007, to be submitted for the forthcoming reporting period. The company submits this file to the vendor on Tuesday, April 24, 2007. Using Reporting Format 3, company ABCD sends one file of 500,000 records, using the following filename:

   ABCD_20070423_1of1_500000_X.pgp

4) Insurer compiles data and submits as detailed in #2 above, but the insurer gets a rejection file on Monday, April 23, 2007, because the submitted file could not be processed by the vendor. The insurer corrects the data file as necessary and resends this file to vendor on Thursday, April 26, 2007. Using Reporting Format 3, company ABCD sends one file of 500,000 records, using the following filename:

   ABCD_20070416_1of1_500000_X.pgp

In addition, the insurer should be compiling and sending a file for the next reporting period, April 23 – 29, 2007. The insurer would need to send two files to the vendor in the same week, one a corrected file for the reporting period April 16, to April 22, 2007, and one a current file for the reporting period April 23 – 29, 2007.

ii. File Compression and Encryption

Encryption of the data files via PGP is required. The vendor will make a public PGP key available to insurers. The expected file extension is ‘pgp’ (or any other appropriate extension for encrypted files, such as ‘asc,’ agreed upon by the vendor). PGP encryption also compresses. If additional compression is required, the vendor will address this with the insurer on an individual basis.
iii. Reporting Specifications

Even though more data can be submitted, Table 4 with the data field mappings shows all required and optional data for the purposes of this application. It is important to adhere to the looping structures and sequences as explained in the following examples. A full Level 4 loop is required for every insured on a policy. Multiple Level 5 (Vehicle) loops can be iterated under one Level 4. Likewise, multiple Level 8 (Excluded Driver) loops can be iterated under one Level 5. The HL4/NM1*IL* sequence always indicates the beginning of a ‘set’.

iv. Policy Set Layout

1) Scenario 1

   Insurer wishes to submit two Policy Sets:
   • Policy 12345 with Insured 1, Vehicles 1 and 2, Excluded Drivers 1 and 2
   • Policy 67890 with Insured 2 and 3, Vehicle 3, Excluded Driver 3

   a) Scenario 1 – Layout Example

   The following is an overview of the X12 loop structure for this scenario:

   • Level 4: Policy 12345 for Insured 1
     o Level 5: Vehicle 1
       ▪ Level 8: Excluded Driver 1
       ▪ Level 8: Excluded Driver 2
     o Level 5: Vehicle 2
       ▪ Level 8: Excluded Driver 1
       ▪ Level 8: Excluded Driver 2
     Results: 6 output records

   • Level 4: Policy 67890 Insured 2
     o Level 5: Vehicle 3
       ▪ Level 8: Excluded Driver 3
     Results: 2 output records

   • Level 4: Policy 67890 Insured 3
     o Level 5: Vehicle 3
       ▪ Level 8: Excluded Driver 3
     Results: 2 output records

   b) Scenario 1 – Record Sample

   Note: This file contains the minimum set of required records.

   ISA*00*          *00*          *30*22- 2222222
   *ZZ*987659575
   *070208*1041*U*00401*000098775*0*P*:
   GS*CI*22-
   2222222*33333333*20070426*1041*98775*X*004010-
   ST*811*98775~
   BIG*20070426*1*****IC~
   HL*1***4*1~
   NM1*IL*1*INS1 Last Name*INS1 First Name
   ****N*TX43587654-
   N3*INS1 Address~
   N4*INS1 City*TX*75001~
   IT1***IP*~
   REF*IG*INS1-12345~
   REF*TY*M~
   REF*MG*75000~
   DTM*007*20070401~
2) Scenario 2
Insurer wishes to submit three Policy Sets:

- Policy WAFC200058769 for John Doe with Ford Focus, Jane Doe with Mitsubishi Outlander and Excluded Driver on Mitsubishi only
- Policy UTAW207458111 Chris Smith with two different Mitsubishi Outlanders
- Policy QWAW234054567 for Sarah Smith with one Mitsubishi Outlander and 2 Excluded Drivers

a) Scenario 2 – Layout Example
The following is an overview of the X12 loop structure for this scenario:

- Level 4: Policy WAFC200058769 John Doe
  - Level 5: Ford Focus
    - Result: one output record
- Level 4: Policy WAFC200058769 Jane Doe
  - Level 5: Mitsubishi Outlander
    - Level 8: Excluded Driver
    - Results: two output records - one Included Driver, one Excluded Driver
- Level 4: Policy UTAW207458111 Chris Smith
  - Level 5: Mitsubishi Outlander
    - Level 5: Mitsubishi Outlander
    - Results: two output records - one for each vehicle
- Level 4: Policy QWAW234054567 Sarah Smith
  - Level 5: Mitsubishi Outlander
    - Level 8: Excluded First
    - Level 8: Excluded Second
    - Results: three output records - one Included Driver, two Excluded Drivers

b) Scenario 2 – Record Sample
Note: This file contains more than the minimum set of required records. The extra records will be ignored.

ISA*00*          *00*          *30*11-111111
*ZZ*581529575
*070208*1041*U*00401*000098774*0*P*:~
GS*CI*11-
1111111*222222222*20070412*1041*98774*X*004010~
ST*811*98774~
d. **Format 4 – Small Insurers**

Two options have been evaluated and determined to be acceptable for handling the smallest and least technical insurers (i.e., insurers with less than 1,000 issued and outstanding personal automobile insurance policies). These options will require the ability to use Microsoft Office Excel or a text editor, such as Notepad.

If an insurer does not have the ability to perform one of the two options described below, their data can be forwarded to the vendor, who will perform data entry procedures in preparing the data for reporting.

i. **Small Insurer Option 1**

Excel spreadsheet templates that contain all of the columns for the record specifications for Reporting Format 1 and Format 2 above have been created.
- These templates will be distributed to small insurers upon request, and can be used to populate on a weekly basis for reporting in Texas.
- The templates will be accompanied by a procedure manual that explains the templates and describes how to export the data from the populated template into a pipe ('|') delimited file.
- The procedure manual will also provide instructions on how to upload the file to the FTP site and fulfill the requirement for PGP encryption.

ii. **Small Insurer Option 2**

For insurers who don’t have Excel, records can be created manually as a pipe ('|') delimited file or fixed format file using Notepad. The vendor has created some simple Notepad templates to help users populate records via this method for Reporting Format 1 and Format 2 above.
- Templates will be distributed to small insurers upon request.

Since Format 4 actually encompasses Formats 1 and 2, insurers should use the appropriate naming convention for the way they choose to implement the spreadsheet. File naming conventions for Formats 1 and 2 can be found in their respective sections within this manual.

Upon the creation of a properly formed file, the file should be uploaded to an FTP site as defined by the vendor. If an insurer is not using either of the options described above they should forward their data to the vendor via email.

C. **Data Reports/Files**

1. **Receipt File**

Upon the vendor’s receipt of a file and verification that the file can be successfully processed, a ‘receipt’ file will be sent to the insurer via email and/or the receipt of a file in the insurer’s ‘output’ FTP directory.

The file naming convention for the receipt of the file in the FTP directory is:

**Reporting Format 1:**

ABCD_20061106_1of1_500000_E_REC.txt

**Reporting Format 2:**

ABCD_20061106_1of1_500000_V_REC.txt

ABCD_20061106_1of1_500000_D_REC.txt

**Reporting Format 3:**

ABCD_20061106_1of1_500000_X_REC.txt
Reporting Format 4:
Since Format 4 actually encompasses Formats 1 and 2, insurers should use the appropriate naming convention for the way they choose to implement the spreadsheet.

Where REC signifies that this file represents a successful FTP transmission of the file indicated by all text preceding REC. This file will not contain any content. Its existence will signify that the vendor has received the file and that is has been put in the queue for processing.

2. Rejection File
In the event that a file cannot be successfully processed due to decryption, decompression, field format, or poor overall data quality, a 'rejection' file will be sent to the insurer via email and/or the receipt of a file in the insurer’s 'output' FTP directory.

The file naming convention for the rejection file is

**Reporting Format 1:**
ABCD_20061106_1of1_500000_E_REJ.txt

**Reporting Format 2:**
ABCD_20061106_1of1_500000_V_REJ.txt
ABCD_20061106_1of1_500000_D_REJ.txt

**Reporting Format 3:**
ABCD_20061106_1of1_500000_X_REJ.txt

**Reporting Format 4:**
Since Format 4 actually encompasses Formats 1 and 2, insurers should use the appropriate naming convention for the way they choose to implement the spreadsheet.

Where REJ signifies the type of records contained in a file (file error conditions). The format of the data will be name-value pairs delimited by the '=' character.

Example:
DecryptionError=true
CompressionError=true

3. Acceptance File
Once all data has been successfully processed in a file, an 'acceptance' file will be sent to the insurer. It will include unmatched data, data compliance summaries, and will be reported to the insurer via email and/or the receipt of a file in the insurer’s 'output' FTP directory.

The file naming convention for the acceptance file is

**Reporting Format 1:**
ABCD_20061106_1of1_500000_E_ACC.txt

**Reporting Format 2:**
ABCD_20061106_1of1_500000_V_ACC.txt
ABCD_20061106_1of1_500000_D_ACC.txt

**Reporting Format 3:**
ABCD_20061106_1of1_500000_X_ACC.txt
**Reporting Format 4:**
Since Format 4 actually encompasses Formats 1 and 2, insurers should use the appropriate naming convention for the way they choose to implement the spreadsheet.

Companies submitting multiple files using reporting Format 1 or 2 will receive an acceptance file for each file submitted. TexasSure recommends companies review the 'acceptance' files to ensure that Insure-Rite receives the number of records per file.

The Acceptance File will provide the total number of records processed, the total number of unmatched records, the match rate for each individual file submitted, and the total number of fields with missing data. Insurers may reference the data compliance file to determine at the policy level which records contain missing fields.

The ACC within the file name signifies the type of records contained in a file (unmatched data and data compliance error summary records). The format of the data will be name-value pairs delimited by the ‘=’ character.

**Example:**
- RecordsProcessed=75129
- UnmatchedRecords=322
- MatchRate%=99.57
- CompanyControlCodeMissing=0
- PolicyNumberMissing=0
- PolicyTypeMissing=0
- PolicyEffectiveDateMissing=0
- PolicyExpirationDateMissing=0
- Vehicle/Non-ownerEffectiveDateMissing=0
- MailingAddressMissing=0
- MailingCityMissing=0
- MailingStateMissing=2
- MailingZIPMissing=0
- VehicleVINMissing=0
- VehicleMakeMissing=0
- VehicleYearMissing=0
- OdometerExpirationMissing=0
- LastNameMissing=0
- FirstNameMissing=2
- DriverLicenseStateMissing=0
- DriverLicenseNumberMissing=2
- DateOfBirthMissing=0

4. **Unmatched Data File**
**NOTE:** Receipt of this file is optional. TDI recommends insurers review these files. The files contain the records of policyholders who may receive an unmatched notice. To request receipt, please send an email to txsubmissions@insure-rite.com.

After Insure-Rite processes an insurer's submission, they will identify records that could not be matched. Insure-Rite will determine a match rate from this data for each reporting insurer. An 'unmatched data summary report' will be made available in the Acceptance file and will show match rate statistics. See above example for the Acceptance File.

In order to accommodate new and changed vehicle registrations, the vendor will attempt to match records for 60 days. Upon request, each individual record that remains unmatched for 60 days (0-day file) will be sent to the insurer to allow an opportunity to review the data. The insurer will receive a second notification for records that remain unmatched for a second 60 day (60-day file) period. There will be no additional notices to insurers regarding these unmatched records. Insurers are not required to take any action...
upon receipt of these files. See Section VI.D.1.b. for information regarding action by the vendor to attempt to correct the unmatched records.

Error codes will not be associated with unmatched records, as the vendor will not be able to tell why the record wasn’t matched.

The file naming convention for the unmatched data detail record is

**Reporting Format 1:**
- ABCD_20061106_1of1_500000_E_UMDet_0.pgp
- ABCD_20061106_1of1_500000_E_UMDet_60.pgp

**Reporting Format 2:**
- ABCD_20061106_1of1_500000_V_UMDet_0.pgp
- ABCD_20061106_1of1_500000_D_UMDet_0.pgp
- ABCD_20061106_1of1_500000_V_UMDet_60.pgp
- ABCD_20061106_1of1_500000_D_UMDet_60.pgp

**Reporting Format 3:**
- ABCD_20061106_1of1_500000_X_UMDet_0.pgp
- ABCD_20061106_1of1_500000_X_UMDet_60.pgp

**Reporting Format 4:**
Since Format 4 actually encompasses Formats 1 and 2, insurers should use the appropriate naming convention for the way they choose to implement the spreadsheet.

Where UMDet signifies the type of records contained in file (unmatched records), 0 signifies records unmatched for 60-days, and 60 signifies unmatched records for 120-days.

For Insurers using reporting using Format 2, driver records associated with an unmatched vehicle record will be returned in the Unmatched Data File. If all vehicles are matched, an unmatched data file will not be returned. Driver records without a reported vehicle record will not be shown in the unmatched data file. Non-owner driver records will be excluded from Unmatched Data Files. There will be a separate report generated related to unmatched drivers when the DPS driver license matching is completed.

### 5. Data Compliance File

Records reported with missing fields are tracked at a record level. The Acceptance file provides the total number of records with required missing fields. The Data Compliance file provides which records contain missing fields at the record level. TDI will periodically review both the Acceptance and Data Compliance files for reporting accuracy. In the detailed Data Compliance File (returned separately from the Acceptance file), the specific index of a missing field within a record and the error code will be appended to the end of the original record and returned to the insurer. The following error code is applicable to missing fields:

<table>
<thead>
<tr>
<th>Error Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>100</td>
<td>Field not present</td>
</tr>
</tbody>
</table>

Each error indicator will be of the format \[i^#\] where \(i\) is the index of the field and \(#\) is the error number. For example, if field number 12 was omitted, the error code appended to the end of the record would be \[12^100\]. A bracketed error indicator for each missing field element will be appended directly to the end of the original record. Due to the
addition of a potentially endless number of possible errors, these error records will be a variable length record beginning at this last 'error field'.

a. Reporting Format 1
The file naming convention for the data compliance detail record is

ABCD_20061106_1of1_500000_E_CompDet.pgp

where CompDet signifies the type of records contained in a file (records that are not in compliance with the file specification).

i. Sample Data Compliance File
(Missing policy number; this is highlighted as + in this example, where * and + both represent spaces.)

ABCD******UserDefinedField*********++++++++++++++++++++++++++
+++P200606012008060120060801Anystreet*************************
********Anytown*************************************************************************TX1111111111J12345
6789**********Jeep**Cherokee*******200476543**Anystreet*************************
**********Anytown*************************************************************************TX1111111111Jane**
**********Ann*************************************************************************TX
55555666666666666*********19651201[2^100]

b. Reporting Format 2
The file naming convention for the data compliance detail record is

ABCD_20061106_1of1_500000_V_CompDet.pgp
ABCD_20061106_1of1_500000_D_CompDet.pgp

where CompDet signifies the type of records contained in a file (records that are not in compliance with reporting requirements).

i. Sample Data Compliance Files
Sample 1: Vehicle Record
(Missing policy number; this is highlighted as + in this example where * and + both represent spaces.)

ABCD******UserDefinedField*********P+++++++++++++++++++++++++++
+++12345**********20060601200806012006080120060801200608012
J123456789**********Jeep**Cherokee*******200476543**Anystreet
3**Anytown*************************************************************************TX1111111111[3^100]

Sample 2: Driver Record
(Missing policy number; this is highlighted as + in this example where * and + both represent spaces.)

ABCD******UserDefinedField*********P+++++++++++++++++++++++++++
+++12345**********20060601200806012006080120060801200608012
Doee***************************Jane**************************SR***Anystreet***********
**********Anytown*************************************************************************TX5
55555666666666666*********19651201[3^100]
c. Reporting Format 3

The file naming convention for the data compliance detail record is
ABCD_20061106_1of1_500000_X_CompDet.pgp

where CompDet signifies the type of records contained in a file (records that are not
in compliance with the file specification).

This report contains the same record information that was submitted with the
following representations for missing required fields:

- State fields will be set to “XX” due to space limitations.
- All Date fields will be set to “19000101” due to data format limitations.
- Vehicle Year will be set to “0000.”
- All other fields will be set to “[[MISSING]].”

d. Reporting Format 4

Since Format 4 actually encompasses Formats 1 and 2, insurers should use the
appropriate naming convention for the way they choose to implement the
spreadsheet.

D. Error and Data Correction

The vendor’s matching software was built on the philosophy that data will at times be partial,
incorrect, or incomplete and was designed to accommodate this reality. During the data
collection phase when the full book of business is collected from each insurer, data is only
rejected by the vendor’s matching software when the file format is wrong, the file is corrupt, or
the data corresponds with an incorrect state. The vendor’s matching software employs a
series of algorithms in a cascading data matching process to create matches for the reported
records. Records reported with incomplete data, wrong characters, and missing fields may
result in the records not matching correctly within the database. Insurers are encouraged to
correct records with errors as soon as possible. In addition, a proprietary internal audit
application will be used to audit the accuracy of the matching process.

1. Error Corrections

Each database insurer must maintain a record of any data correction activities and
determinations for review by the vendor and TDI for four years. The records may be
stored electronically. Insurers should maintain sufficient information to verify that attempts
were made to verify and/or correct information, as necessary. It would be sufficient for an
insurer to track, at a policy level, the following details:

- date and detail of actions taken to attempt to verify and/or correct policy
  information (i.e., in-house determination of error, correction made to system) and
- result of error correction activities (contact from policyholder, correction made to
  system).

Each database insurer must achieve and maintain a 95 percent match rate by January 1,
2008, and a 98 percent match rate by January 1, 2010. The vendor shall provide reports
detailing the match rate for each database insurer. The match rate will be calculated as
the percentage of reported insurance policy records matched to registered vehicles
divided by the total number of all insurance policy records received.

Each database insurer must assist the vendor in auditing the database program, which
may include responding to vendor requests for confirmation of policy records matched to
a registered vehicle using cascading data matching. Cascading data matching may not
result in a 100 percent match of all fields, but a match may be made with a reasonable
degree of accuracy.
The database insurer shall comply with the data correction procedures listed with each error type/data report file.

a. **Rejection File (Data File Format Errors)**
   The database insurer will have three business days to correct file format errors and resubmit the entire data file to the vendor. Insurers are encouraged to correct the file format errors prior to the end of the submission deadline; otherwise the records will not be processed for the current submission period. Insurers missing submission periods may place their insureds at risk of being reflected as uninsured in the TexasSure database.

b. **Unmatched Data**
   After the vendor has attempted to match a record for 60 days without success, the policyholder will be contacted in an attempt to rectify the non-match. The vendor will send up to two notices to policyholders listed in the Unmatched Data File. The consumer will be provided with information and instructions to assist them in resolving the match discrepancy. Customer Service Representatives will be available at a vendor-staffed call center to assist consumers as needed. Please refer to TexasSure’s website at [http://www.texassure.com/consumernotices.html](http://www.texassure.com/consumernotices.html) for a sample of the Unmatched Notice.

   If policy information is found to be incorrect, the policyholder will be instructed to contact their insurance company or insurance agent to correct the information. The insurer must send any corrections received from the policyholder or the policyholder's insurance agent to the vendor within the next two regularly scheduled data transmissions.

c. **Data Compliance**
   The vendor prepares a report to track data element omissions at a record level – the Data Compliance File is described in section VI.C.4. In addition, the Acceptance file contains statistics on the number of records that are missing data for the submission period.

   The Data Compliance file is provided to assist in the identification of records that are not in compliance with reporting requirements. Insurers are encouraged to correct records with errors as soon as possible. TDI will regularly monitor the files to ensure compliance with reporting requirements. Companies will be contacted by TDI to address data compliance issues as needed.

E. **Testing Procedures**
   All insurers are required to participate in a testing phase. Insurers are expected to complete internal testing of their systems prior to engaging in the testing process with the vendor. If an insurer is reporting through a third party reporting entity, that reporting entity must successfully complete the testing procedures. Following a successful testing process, the insurer or reporting entity will be certified by the vendor to begin weekly data submissions.

   Testing should be conducted with “real” data. The insurer or reporting entity must complete the following testing phases:

   1. **Connectivity and Transmittal Testing**
      a. Insurer tests access to vendor system. This will be the connectivity testing where a small sample file will be uploaded to a designated secure FTP site. This can happen prior to having an extract coded.
      b. Test transmission of data. This will be an actual sample file conforming to the naming convention with at least one record included. This should
happen in the insurer’s development phase prior to the completion of their extract coding to ensure that they are sending the correct data.

c. Test adherence to file naming convention (file validation)
d. Test insurer’s ability to receive confirmation message/file

2. Validation and Matching Testing
   a. Send sample file (500 records or a full book of business)
   b. Test decryption and decompression
   c. Test data format for errors
   d. Test data for matching functions
      i. 90 percent of records in the test sample must process as expected, based on test cases
   e. Test insurer’s ability to receive acceptance message/file

3. Error Receipt Testing
   a. Test insurer’s ability to receive compliance detail files
   b. Test insurer’s ability to receive unmatched detail files

4. Full System and Performance Testing

F. Ongoing Verification Process

1. Description
   The ongoing verification process will monitor and report on the financial responsibility of Texas drivers on an ongoing basis. The vendor will track the insurance status of all registered vehicles. After a vehicle is listed as uninsured for nine (9) consecutive weeks, the vendor will begin a letter campaign in an attempt to contact the registered owner and verify insurance status or encourage insurance coverage to be purchased. Please refer to TexasSure’s website at http://www.texassure.com/consumernotices.html for a sample of the Uninsured Notice.

   In Texas, vehicle registration data does not contain information indicating whether a vehicle is used for personal or commercial purposes. The vendor will take reasonable steps to remove vehicles that appear to be used for commercial purposes from the list of letter recipients. However, TDI anticipates that some notices will be sent to the registered owners of a vehicle insured on a commercial auto policy.

   In the event a registered owner is mistakenly identified as uninsured, the letter will contain instructions for data corrections as well as the option to provide their private passenger or commercial auto insurance policy information directly to the vendor.

2. Insurer Requirements
   a. Customer Assistance
      Texas consumers who receive a letter of non-compliance from the State may contact their insurer for assistance to confirm or correct policy information. Insurers should maintain adequate customer service to handle these customer issues.
VII. Delegation

Insurers organized and operating under Chapter 912 of the Texas Insurance Code may delegate by written contract the functions that the insurer is required to perform under the program to one or more TDI licensed managing general agents (MGA). To the extent an insurer has contractually delegated any requirements of §§5.601 – 5.611 to an MGA, the MGA will be deemed an insurer for the purpose of §§5.601 – 5.611. A copy of the delegation agreement must be submitted to the TexasSure Program Coordinator; either by e-mail or mail (refer to contact information in Section X). Under such delegation, both the MGA and the insurer shall be jointly and severally responsible for full compliance with this program and jointly and severally subject to disciplinary actions from TDI for failure to meet program requirements. The delegation agreement must explicitly state the delegation of TexasSure reporting responsibility. In addition, each entity must sign the agreement.

A delegation agreement allowing an MGA to report a portion of a company’s business to TexasSure only applies for those insurers organized and operating under Chapter 912 of the Texas Insurance Code. The appointed MGA must obtain a three-digit MGA number from the Texas Insurance Checking Office (TICO) before reporting to TexasSure. Insurers may contact TICO at:

Texas Insurance Checking Office (TICO)
Attn: Camilla McDonald
2801 South Interstate Highway 35
Austin, TX 78741
512-444-9662
www.TicoStat.com
VIII. New Insurers

An insurer that commences writing personal automobile insurance in the Texas market more than 10 business days after the effective date of 28 TAC §§5.601 – 5.611 but before June 1, 2007, will comply with the database program, as detailed in Section VI of this manual, and must begin reporting data on or before June 30, 2007.

An insurer that commences writing personal automobile insurance in the Texas market on or after June 1, 2007, will have 30 calendar days to comply with the database program requirements in Section VI of this manual and begin reporting data.
IX. Penalties

Failure of an insurer to comply with any of the requirements of this division will subject the insurer to the enforcement and penalty provisions of the Insurance Code Chapters 82, 83, and 84 and any other applicable law.

In accordance with Transportation Code §601.454, a person commits an offense if the person knowingly uses data obtained under Chapter 601, Subchapter N, for any purpose not authorized under Subchapter N. An offense under §601.454(d) is a Class B misdemeanor.
X. Contacts and Resources

A. Vendor Technical Help Desk

Natalia Pitkin – Primary Contact
801-531-0731 office
npitkin@insure-rite.com

Zulie Gamez
801-531-0731 office
zgamez@insure-rite.com

B. Texas Department of Insurance, TexasSure Staff

Iris Saenz, TexasSure Coordinator
Tiffany Sloane, TexasSure Staff
Kate Thompson, TexasSure Staff

512-676-6695 office
512-463-6122 fax
TexasSure@tdi.texas.gov

Mailing Address:
TexasSure, MC 105-5D
Texas Department of Insurance
P.O. Box 149104
Austin, TX 78714-9104

C. Websites

www.TexasSure.com

TexasSure Information Page for Companies:
http://www.helpinsure.com/auto/frvp_company.html


Insurers may wish to check these websites regularly for updated news and information.

D. TexasSure Updates

Updates to the TexasSure program will be made available on TexasSure Information Page for Companies: http://www.helpinsure.com/auto/frvp_company.html.

E. Open Conference Calls

Conference calls will provide an open forum for questions and answers related to TexasSure with department staff and program vendor technical staff. TDI has discontinued conference calls as of January 22, 2015; however, future conference calls will be communicated directly to insurance companies currently enrolled with TexasSure. In addition, department staff will post a notice of any future conference calls on the TexasSure Information Page for Companies: http://www.helpinsure.com/auto/frvp_company.html. For any additional questions, please email to TexasSure@tdi.texas.gov.
The need to continue or increase the frequency of the conference calls will be monitored and communicated to insurers and MGAs, as necessary.
XI. Glossary

<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cascading Data Matching</td>
<td>A data matching algorithm that uses multiple data fields to increase the accuracy of matched data.</td>
</tr>
<tr>
<td>Company Control Code</td>
<td>A unique numeric code assigned to insurance companies for TexasSure reporting purposes.</td>
</tr>
<tr>
<td>Database Insurer</td>
<td>An insurer who opts to report policy record data directly to the selected respondent.</td>
</tr>
<tr>
<td>Department</td>
<td>The Texas Department of Insurance.</td>
</tr>
<tr>
<td>DIR</td>
<td>The Texas Department of Information Resources.</td>
</tr>
<tr>
<td>DPS</td>
<td>The Texas Department of Public Safety.</td>
</tr>
<tr>
<td>Extensible Markup Language (XML)</td>
<td>A flexible way to describe data and the format of that data over the Internet. XML allows designers to create their own customized tags, enabling the definition, transmission, validation, and interpretation of data between applications and organizations. Sometimes referred to as &quot;XML payload message.&quot;</td>
</tr>
<tr>
<td>File Transfer Protocol (FTP)</td>
<td>A standard network protocol allowing the transfer of files from one host to another.</td>
</tr>
<tr>
<td>Hypertext Transfer Protocol (HTTP)</td>
<td>The set of rules that define how messages are formatted and transmitted over the Internet. HTTP defines what actions should be taken by Web servers and browsers in response to various commands. HTTP runs on top of the TCP/IP suite of protocols.</td>
</tr>
<tr>
<td>Implementing Agencies</td>
<td>The Texas Department of Insurance (TDI), the Texas Department of Public Safety (DPS), the Texas Department of Motor Vehicles (TxDMV), and the Texas Department of Information Resources (DIR). Note: effective November 1, 2009, the Texas Department of Motor Vehicles (TxDMV) assumed TxDOT’s place in the implementation and operation of SB 1670 (79th Legislature).</td>
</tr>
<tr>
<td>Insured</td>
<td>An insurance customer or consumer who has purchased the required minimum limits of automobile liability insurance.</td>
</tr>
<tr>
<td>Insurers</td>
<td>An insurance company.</td>
</tr>
<tr>
<td>IVR</td>
<td>Integrated Voice Response System.</td>
</tr>
<tr>
<td>Match Rate</td>
<td>The percentage of reported insurance policy records matched to registered vehicles divided by the total number of all insurance policy records received.</td>
</tr>
<tr>
<td>Named Driver Policy</td>
<td>An automobile insurance policy that does not provide coverage for an individual residing in a named insured’s household specifically unless the individual is named on the policy.</td>
</tr>
<tr>
<td>Named Non-Owner Policy</td>
<td>Also Non-Owner Policy. Used to provide coverage for a named individual and spouse, if residents of the same household, for the operation of non-owned vehicles. The Driver License Number is the key to matching these types of policies.</td>
</tr>
<tr>
<td>Pretty Good Privacy (PGP)</td>
<td>Software allowing users to transfer encrypted files from one network to another.</td>
</tr>
<tr>
<td>Program</td>
<td>The TexasSure Motor Vehicle Financial Responsibility Verification Program.</td>
</tr>
<tr>
<td>Reporting Period</td>
<td>Weekly reporting cycle from Monday to Sunday.</td>
</tr>
<tr>
<td>TERM</td>
<td>DEFINITION</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>RTS</td>
<td>Registration and Title System. The TxDMV data processing system used to accomplish registration and titling transactions at county tax offices and other points of service throughout Texas.</td>
</tr>
<tr>
<td>Secured Sockets Layer/Transport Level Security (SSL/TLS)</td>
<td>Uses certificates to authenticate the identity of the endpoints, or “sockets,” of a trusted session or message transmission (i.e., transport level authentication). TLS is derived from SSL and has succeeded SSL as the protocol for managing the security of a message over the Internet.</td>
</tr>
<tr>
<td>Simple Object Access Protocol (SOAP)</td>
<td>Used to transfer XML payload messages or data. SOAP is a lightweight XML-based messaging protocol used to encode the information in Web service request and response messages before sending them over a network. SOAP messages are independent of any operating system or protocol.</td>
</tr>
<tr>
<td>TDI</td>
<td>The Texas Department of Insurance.</td>
</tr>
<tr>
<td>TLETS</td>
<td>The Texas Law Enforcement Telecommunications System. TLETS acts as a switching system for DPS, making information available to law enforcement and the criminal justice system, among other users.</td>
</tr>
<tr>
<td>Transmission Control Protocol/Internet Protocol (TCP/IP)</td>
<td>The basic two-layer suite of communication protocols, used to connect hosts on the Internet.</td>
</tr>
<tr>
<td>TxDOT</td>
<td>The Texas Department of Transportation.</td>
</tr>
<tr>
<td>TxDMV</td>
<td>The Texas Department of Motor Vehicles. Effective November 1, 2009, the TxDMV assumed TxDOT’s place in the implementation and operation of SB 1670 (79th Legislature). The TxDMV is composed, in part, of the Vehicle Titles and Registration Division previously under TxDOT.</td>
</tr>
<tr>
<td>VTR</td>
<td>Vehicle Title and Registration.</td>
</tr>
<tr>
<td>Users</td>
<td>The Texas Department of Motor Vehicles, the Texas Department of Insurance, Texas law enforcement, the Driver License Division of the Texas Department of Public Safety, and other authorized users.</td>
</tr>
<tr>
<td>Web Services Insurer</td>
<td>An insurer who opts to provide policy record data to the selected respondent on request via a Web services application.</td>
</tr>
<tr>
<td>Web Services, Web Services Application</td>
<td>Describes the standardized way that a Web user or Web-connected program can call another Web-based application hosted on a business’ Web server.</td>
</tr>
</tbody>
</table>
XII. Attachments
Attachment 1 – Insurance Company Profile Form

Insurers must submit this form to the vendor prior to the testing phase. Submit one completed form for each company NAIC number with reported insurance data. A minimum of two contacts at the company level are required.

Date: 

<table>
<thead>
<tr>
<th>Company Name:</th>
<th>Company Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Address:</td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
<tr>
<td>ZIP:</td>
<td>ZIP:</td>
</tr>
<tr>
<td>Company NAIC:</td>
<td>Number of Vehicles:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Primary Business Contact:</th>
<th>Secondary Business Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Title:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Fax:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Primary Technical Contact:</th>
<th>Secondary Technical Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Title:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Fax:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

**Interface Selection** (choose one)

- Format 1: Vendor Enhanced Format
- Format 2: Texas Interface
- Format 3: X12
- Format 4: Small Insurers

**Preferred Submission Day** (Choose one day and time)

__ M __ T __ W __ Th __ F __ S __ Su

__ AM __ PM

**Submission Data Format** (choose one)

- Fixed
- Delimited

**Third Party Reporting** (if yes, please fill out and submit a Third Party Reporting Form)

- Y
- N

Submit completed form to:

TexasSure Project Manager
HDI Solutions, LLC
334-321-0310 office
866-419-7905 fax
TexasSureProjectManager@hdisolutions.com
Attachment 2 – MGA Profile Form

The insurer must submit this form to the vendor prior to the testing phase. Submit one completed form for each NAIC/MGA relationship reporting insurance data. **Note: A Delegation Agreement is required as detailed in Section VII.**

Date: __________________________

<table>
<thead>
<tr>
<th>MGA Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Mutual Name:</td>
</tr>
<tr>
<td>Company Name as it Appears on the Proof of Insurance ID Card:</td>
</tr>
<tr>
<td>MGA Address:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City:</th>
<th>State:</th>
<th>ZIP:</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Mutual NAIC:</td>
<td>Number of Vehicles:</td>
<td></td>
</tr>
<tr>
<td>MGA Number:</td>
<td>Number of Policies:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Primary Business Contact:</th>
<th>Secondary Business Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Title:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Primary Technical Contact:</th>
<th>Secondary Technical Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Title:</td>
</tr>
<tr>
<td>Phone:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

**Interface Selection** (choose one)
- _____ Format 1: Vendor Enhanced Format
- _____ Format 2: Texas Interface
- _____ Format 3: X12
- _____ Format 4: Small Insurers

**Submission Data Format** (choose one)
- _____ Fixed
- _____ Delimited

**Third Party Reporting** (if yes, please fill out and submit a Third Party Reporting Form)

**Preferred Submission Day** (Choose one day and time)
- ___ M ___ T ___ W ___ Th ___ F ___ S ___ Su
- ___ AM ___ PM

Submit completed form to:
TexasSure Project Manager
HDI Solutions, LLC
334-321-0310 office
866-419-7905 fax
TexasSureProjectManager@hdisolutions.com
The insurer must submit this form to the vendor prior to the testing phase. Insurance Companies and MGAs using Third party reporting should include this completed form with their Insurance Company or MGA profile form.

Date: ______________________

<table>
<thead>
<tr>
<th>Insurance Company/MGA Name:</th>
<th>Reporting Company Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>City:</th>
<th>State:</th>
<th>ZIP:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Insurance Company/MGA NAIC:</th>
<th>Number of Vehicles:</th>
<th>Number of Policies:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reporting Company Primary Business Contact:</th>
<th>Reporting Company Secondary Business Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title:</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Fax:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reporting Company Primary Technical Contact:</th>
<th>Reporting Company Secondary Technical Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title:</th>
<th>Title:</th>
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</thead>
<tbody>
<tr>
<td>Phone:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Fax:</td>
<td>Fax:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

**Interface Selection** (choose one)

- Format 1: Vendor Enhanced Format
- Format 2: Texas Interface
- Format 3: X12
- Format 4: Small Insurers

**Preferred Submission Day** (Choose one day and time)

- _M_ _T_ _W_ _Th_ _F_ _S_ _Su_
- _AM_ _PM_

**Submission Data Format** (choose one)

- Fixed
- Delimited

Submit completed form to:
TexasSure Project Manager
HDI Solutions, LLC
334-321-0310 office
866-419-7905 fax
TexasSureProjectManager@hdisolutions.com
## Attachment 4.A – Return File Matrix, Reporting Format 1

### Submitted File: ABCD_20070702_1of1_500000_E.pgp

<table>
<thead>
<tr>
<th>Return File Type and Naming Convention</th>
<th>File is Received</th>
<th>Notification</th>
<th>Corrective Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receipt File</td>
<td>Always</td>
<td>Always (May be Blank)</td>
<td>Email, FTP</td>
<td>Optional</td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_E_REC.txt</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Rejection File</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_E_REJ.txt</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Acceptance File</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_E_ACC.txt</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Unmatched Data File – 0 Day</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_E_UMDet_0.pgp</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Unmatched Data File – 60 Day</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_E_UMDet_60.pgp</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Data Compliance File</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_E_CompDet.pgp</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
## Attachment 4.B – Return File Matrix, Reporting Format 2

Submitted Files: ABCD_20070702_1of1_500000_V.pgp, ABCD_20070702_1of1_500000_D.pgp

<table>
<thead>
<tr>
<th>Return File Type and Naming Convention</th>
<th>File is Received</th>
<th>Notification</th>
<th>Corrective Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receipt File – Vehicle Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_V_REC.txt</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Signifies vendor’s receipt of a file and verification that the file can be successfully processed; no file content. Insurer will receive either a Receipt file or a Rejection file for every submission.</td>
</tr>
<tr>
<td>Rejection File – Vehicle Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_V_REJ.txt</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Signifies that a file cannot be successfully processed; no file content. Insurer will receive either a Receipt file or a Rejection file for every submission.</td>
</tr>
<tr>
<td>Receipt File – Driver Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_D_REC.txt</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Signifies vendor’s receipt of a file and verification that the file can be successfully processed; no file content. Insurer will receive either a Receipt file or a Rejection file for every submission.</td>
</tr>
<tr>
<td>Rejection File – Driver Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_D_REJ.txt</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Signifies that a file cannot be successfully processed; no file content. Insurer will receive either a Receipt file or a Rejection file for every submission.</td>
</tr>
<tr>
<td>Acceptance File – Vehicle Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_V_ACC.txt</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Signifies that all data has been successfully processed; file contains a summary report.</td>
</tr>
<tr>
<td>Acceptance File – Driver Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_D_ACC.txt</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Signifies that all data has been successfully processed; file contains a summary report.</td>
</tr>
<tr>
<td>Unmatched Data File – 0 Day, Vehicle Record</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Identifies all records that could not be matched to a vehicle after 60 days from the first submission. File contains unmatched records exactly as submitted.</td>
</tr>
<tr>
<td>Unmatched Data File – 0 Day, Driver Record</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Identifies all records that could not be matched to a vehicle after 60 days from the first submission. File contains unmatched records exactly as submitted.</td>
</tr>
<tr>
<td>Unmatched Data File – 60 Day, Vehicle Record</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Identifies all records that could not be matched to a vehicle for an additional 60 days (i.e., 120 days from the first submission). File contains unmatched records exactly as submitted.</td>
</tr>
<tr>
<td>Unmatched Data File – 60 Day, Driver Record</td>
<td>X</td>
<td>X</td>
<td>X X X</td>
<td>Identifies all records that could not be matched to a vehicle for an additional 60 days (i.e., 120 days from the first submission). File contains unmatched records exactly as submitted.</td>
</tr>
<tr>
<td>Data Compliance File – Vehicle Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_V_CompDet.pgp</td>
<td>X</td>
<td>X</td>
<td></td>
<td>Identifies missing data at a record level. File contains records exactly as submitted appended with error code name/value pairs indicating the missing fields.</td>
</tr>
<tr>
<td>Data Compliance File – Driver Record</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_D_CompDet.pgp</td>
<td>X</td>
<td>X</td>
<td></td>
<td>Identifies missing data at a record level. File contains records exactly as submitted appended with error code name/value pairs indicating the missing fields.</td>
</tr>
</tbody>
</table>

**Submitted File:** ABCD_20070702_1of1_500000_X.pgp

<table>
<thead>
<tr>
<th>Return File Type and Naming Convention</th>
<th>File is Received</th>
<th>Notification</th>
<th>Corrective Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receipt File</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_X_REC.txt</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Always (May Be Blank) Signifies vendor’s receipt of a file and verification that the file can be successfully processed; no file content. Insurer will receive either a Receipt file or a Rejection file for every submission.</td>
</tr>
<tr>
<td>Rejection File</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_X_REJ.txt</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Always (May Be Blank) Signifies that a file cannot be successfully processed; no file content. Insurer will receive either a Receipt file or a Rejection file for every submission.</td>
</tr>
<tr>
<td>Acceptance File</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_X_ACC.txt</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Always (May Be Blank) Signifies that all data has been successfully processed; file contains a summary report.</td>
</tr>
<tr>
<td>Unmatched Data File – 0 Day</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_X_UMDet_0.pg</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Identifies all records that could not be matched to a vehicle after 60 days from the first submission. File contains unmatched records exactly as submitted.</td>
</tr>
<tr>
<td>Unmatched Data File – 60 Day</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_X_UMDet_60.pg</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Identifies all records that could not be matched to a vehicle for an additional 60 days (i.e., 120 days from the first submission). File contains unmatched records exactly as submitted.</td>
</tr>
<tr>
<td>Data Compliance File</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ABCD_20070702_1of1_500000_X_CompDet.pgp</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>Identifies missing data at a record level. File contains records exactly as submitted appended with missing fields identified.</td>
</tr>
</tbody>
</table>
Attachment 5 – Frequently Asked Questions

**Topic: Profile Forms**

1. **When should we submit our Company Profile Forms?**
   Submit your forms as soon as possible. An insurer that commences writing personal automobile insurance in the Texas market on or after June 1, 2007, will have 30 calendar days to comply with the database program requirements in Section VI of this manual and begin reporting data.

2. **Do we wait until we are ready to start testing before we submit our Company Profile Forms?**
   No. We may help avoid problems if we are involved during the development phase.

3. **Do we need to submit a company profile form for companies that write surplus lines?**
   Division 7, 28 TAC, Sections 5.601-5.611 (division applicable to TexasSure) includes surplus lines in the definition of insurer. You should only report policies that meet Texas financial responsibility requirements.

4. **Since our entity is a group of insurance companies, should we submit one company profile form for each writing company?**
   Yes, you should submit one Profile Form for each NAIC (Attachment 1), and one Profile Form (Attachment 2) for each NAIC/MGA combination.

5. **Our business has one writing company licensed in the state but no data; do we need to submit a company profile form?**
   If the company is licensed but not actively writing, a policy form is not necessary. However, you should send an email to TexasSure@tdi.texas.gov stating the company name, NAIC number, and the reason this company is not required to report.

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**Topic: Vehicles and Policies Included**

1. **Can you give any more information about the types of vehicles that are included? Are all trailers excluded? What about mobile homes? Motorcycles? Dune buggies? ATVs?**
   All vehicles covered under a personal automobile insurance policy must be reported unless you are able to determine that the vehicle is not subject to Texas registration for on-road use.

   The law in Texas is not written to exclude vehicles the way an insurer may prefer. The law requires insurance "on all vehicles, except trailers and semitrailers, registered for on-road use" with some limited exceptions. Those exceptions are not stated by vehicle type, but by the manner in which the vehicle is registered and used.

   To address some specific examples:
   - ALL trailers are excluded—boat and RV trailers are trailers and as a result, are excluded.
   - Motor homes, in general, are NOT excluded. If they are permanently parked off-road and not registered, or are actually mobile home trailers, then they can be excluded.
   - Boats are not usually on-road vehicles and almost all can be excluded. There are some exceptions, such as boat/auto hybrid vehicles, which can be driven on the road. If the vehicle is driven on the road, it needs registration and insurance, and should be reported to TexasSure.
   - Many dune buggies, all-terrain vehicles (ATVs), golf carts, recreational off-highway vehicles (ROVs), and even dirt bikes are bought for off-road use and not driven on the road. Following a review of the data and initial insurer submissions, the implementing agencies and vendor determined that ATVs, golf carts and ROVs can be omitted from insurer reporting. Insurers should report all vehicles that are subject to Texas vehicle registration and used for on-road use.
There is a lot of variation in the way manufacturers classify vehicles. In some cases, a scooter might actually be a moped; in another case it could be a "pocket bike." If they are being used on the road, TxDMV registers them as either mopeds or motorcycles depending on their characteristics (engine size, maximum speed) regardless of what vehicle type the manufacturer claims. If registered for road use, they need insurance and insurers should report them to TexasSure.

If you have issued an automobile liability policy on a vehicle, it is safe to presume that the vehicle is insured for on-road use and is, in fact, being used on the road. If the vehicle is insured, there is the possibility that the owner might register it tomorrow and use it on the road even if they are not doing so today.

2. Will the vendor or the insurers be responsible for identifying vehicles registered for non-road use (for example, ATVs, scooters, golf carts, dune buggies, etc.)?

Following a review of the data and initial insurer submissions, the implementing agencies and vendor determined that ATVs and golf carts can be omitted from insurer reporting. Insurers should report all vehicles that are subject to Texas vehicle registration and used for on-road use. If you can positively identify that certain motorcycles, trail motorcycles, enduro bikes, and dirt bikes you are insuring are not used for on-road use, then you can omit them; otherwise you should report all of them.

3. Section IV of the Reporting Guide and User Manual mentions special registration classes including “antique.” Our antique collectibles are used for parade and show purposes and are mileage based policies, but covered under a personal policy. How should we report this?

In Texas, a vehicle registered under the "antique" class is not driven on the road, except during a parade or trade show. If you collect information regarding the Texas registration class type, you can reasonably omit reporting those vehicles. However, if the possibility exists that you insure a vehicle as an antique auto, yet that vehicle is not registered in the antique class in Texas, then you should go ahead and report the vehicle. Generally, we recommend reporting all autos you have on a personal auto policy to avoid a situation where an auto is accidentally omitted. During the test phase, you may be able to identify a group of autos to omit from subsequent reporting.

4. The first paragraph of Section IV indicates reporting is limited to those insurers providing motor vehicle liability insurance under a personal automobile insurance policy in this state. The “Vehicles Included” paragraph indicates all vehicles covered under a personal automobile policy must be reported unless the insurer is able to determine that the vehicle is not subject to Texas registration for on-road use. Are we only required to report Texas registered vehicles insured on Texas auto policies or do we report all vehicles insured on a Texas auto policy, regardless of registration state? Is TexasSure expecting out-of-state vehicles garaged in Texas to be reported?

This program applies only to vehicles registered in Texas. If an insurer is able to determine the state a vehicle is registered in, they should only report Texas registered vehicles. However, not all insurers collect registration information. In cases where the insurer does not collect the registration state, they should consider reporting all policies sold in Texas and potentially reporting other vehicles with a Texas mailing or garage address. This may include vehicles not registered in Texas, which will show as an unmatched file. Situations such as these will need to be worked through during a company’s testing phase.

5. If a company stops writing personal automobile policies and has no more in-force policies, should this be reported to TDI and the vendor?

Yes, report the change to the TexasSure Coordinator at TexasSure@tdi.texas.gov and to Insure-Rite at txsubmissions@insure-rite.com.

6. What is the general rule-of-thumb regarding the reporting of antique vehicles?

An insurer may classify a vehicle as antique; however, the vehicle may not be registered with TxDMV under the antique classification. Please include all antique vehicles when reporting.
Companies repeatedly submitting files that do not adhere to established format and guidelines will be de-certified until the problem is resolved. Insurers are advised to monitor the quality of their data submissions to ensure accuracy.

1. **Does the program require data values to be submitted in all capital letters?**
The processing of the data is not case-sensitive.

2. **If a company is unable to send blank files for a company with no active policies, what can they do?**
Send an email to the TexasSure Coordinator at TexasSure@tdi.texas.gov and Insure-Rite at txsubmissions@insure-rite.com, the Company Control Code status will be flagged as inactive. When the company has files to report, send an email again and the status will be changed back to active.

3. **Some of our business is in the name of a trustee as opposed to a policyholder, should we leave the Driver License Number field and the Date of Birth field blank?** What if the registrant is deceased and that is why the policy is in the name of a trustee. Will the record be considered as unmatched if we transmit a correct VIN# with a DOB and DL# for a deceased registrant whose name is no longer on your database?
The vendor does not have any way of identifying dead registrants versus trustees. The record may match anyway. We recommend that you send both the trustee and the deceased driver information, so you have truly done everything possible to allow a match to happen.

4. **We do not record registration information on our system and have cases where an insured has Mailing and Garage Addresses from other states besides Texas. Do we report Mailing and Garage Addresses at all?**
The Mailing Address is a required field; please send that information regardless of what state is represented. The Garaged Address is optional; however, it is in the best interest of the match rate to send as much data as possible regardless of the state represented in the Garaged Address.

5. **We have a Driver License Number for another state, but do not know which one. Should we send "TX" as the state abbreviation or leave the field blank?**
Please leave the field blank if you do not have valid data. Any and all fields should be left blank of the data is unknown. Fillers and dummy data should not be used under any circumstance.

6. **What should an insurer do if they receive a change of garage address or they receive information on a current garage address that was not previously reported to the vendor?**
Insurers should send the updated information in their weekly submission upload to the vendor.

7. **If a company sends multiple files, can one file be in Reporting Format 1 and another file in Reporting Format 2?**
This can be done; however, we recommend that a company control code be assigned for each reporting format. By doing this it will be much cleaner in implementation and will run a far lesser risk of having issues in a production system.

8. **For fields that are numeric, but have no data, should insurers pad with zeros or with spaces? Does the vendor have a preference for right or left justification?**
All fields should be left justified and padded to the right with blank spaces. Insurers should not use fillers such as letters or numbers. Blank spaces are not considered fillers; rather the blank spaces ensure the proper field length is maintained when delimiters are not used. If the insurer has any issue with providing the data in this format, please contact the vendor directly.

9. **How should a field with no data be represented in the delimited format?**
In the following example, there is no middle name. Note that the field after the first name (Jane in this example), has a delimiter as a place holder for the missing field.

| ABCD | UserDefinedField | 12345 | P | 20060601 | 12345 | 20060801 | 20060801 | Anystreet | Anytown | TX | 11111 | Z
| J123456 | Jeep | Cherokee | 2004 | 76543 | Anystreet | Anytown | TX | 11111 | I | Doe | Jane | TX | 55555666 | 66 | 19651201

10. Who should insurers contact if they have a question about record submission or error reports?
   Please send questions to txsubmissions@insure-rite.com.

11. We’re unsure what to do about suffixes (Jr., Sr., etc.) because there is no field for those. Are we to list those as a part of the last name? Or just not submit at all?
   Reporting Format #1 does not include a field for suffixes, but Reporting Format #2 does. In Format #1, you should NOT include a suffix in the name field. You should simply omit it. In Format #2, the suffix is an optional reporting item for the insurer.

12. We are not required to report any element listed as “O” (optional), is that a correct statement?
   Yes; however, if you have the data element, you should send it because optional fields help in matching. Note - You will not receive errors for records that are only missing optional fields.

13. Will the User Defined field be sent back untouched?
   Yes.

14. What does Texas plan to do with the Driver License Number?
   The Driver License Number is primarily used in the matching process to link driver license data to insurance policy data. In the event a person is driving an uninsured vehicle, the officer may check that the driver has insurance using the Driver License Number.

15. How does an insurer report data records for multiple drivers on a vehicle?
   If there are multiple drivers on a vehicle (e.g. 4 drivers, 2 vehicles):

<table>
<thead>
<tr>
<th>Format Types</th>
<th>Number of Sent Records</th>
<th>Submission Examples</th>
</tr>
</thead>
</table>
   | Using Reporting Format 1 – Vendor Enhanced Format | You will send eight (8) records | Jane Doe, 2004 Jeep, policy 12345
   | | | Jane Doe, 2005 GMC, policy 12345
   | | | John Doe, 2004 Jeep, policy 12345
   | | | John Doe, 2005 GMC, policy 12345
   | | | Julie Doe, 2004 Jeep, policy 12345
   | | | Julie Doe, 2005 GMC, policy 12345
   | | | Jack Doe, 2004 Jeep, policy 12345
   | | | Jack Doe, 2005 GMC, policy 12345

   | Using Reporting Format 2 – Texas Interface | You will send six (6) records | 2004 Jeep, policy 12345
   | | | 2005 GMC, policy 12345
   | | | Jane Doe, policy 12345
   | | | John Doe, policy 12345
   | | | Julie Doe, policy 12345
   | | | Jack Doe, policy 12345

16. Can you specify what the vehicle coverage effective date is?
   The vehicle coverage effective date is the earliest date at which uninterrupted, continuous, coverage started for the policy specified on the record. If your company only maintains data for the current policy term, this date would likely be either the policy effective date or a later date if the vehicle was added mid-term.

17. We plan to use Format 2 which requires a Vehicle Record file and a Driver Record file. Regarding the driver indicator field in the Driver Record file: Does Texas want to know that an insured person is excluded from a vehicle on the policy without specifying which
vehicles have the exemption, or does Texas want to know that an insured is exempt from driving specific vehicles like the scenario below? Should the Driver Indicator actually be in the Vehicle Record? For example, there is a household with a mom, dad, and a teenage son. There are three vehicles on the policy. Unless specified with a Driver Indicator Endorsement, the policy will cover mom, dad, and son for all three vehicles. If mom and dad decide they only want their son to be covered on vehicle three, they would need to add an Endorsement to exclude the son from vehicles one and two. If a company excludes a specific driver for a specific vehicle, that company should use Reporting Format 1.

18. Regarding the requirement to report mailing address as mandatory and garaging address as optional: Can you advise what the mailing address is used for? I am wondering why the garaging address is not mandatory. Vehicle registration data maintained by the State captures several addresses. Mailing and garage addresses are used to increase the chances of matching a vehicle registration to an insurance policy. Many companies do not capture a garage address on vehicles and as a result, this field is not mandatory. If a company captures both a mailing and a garage address, you should submit both, as this may increase your chances of matching a policy to a vehicle.

19. We will have a number of Texas registered customers with a civilian mailing address in a foreign country. The Driver Record format allows only two characters for the Mailing State (Postal Abbreviation) field. Some foreign locations have three character abbreviations (e.g., United Kingdom is UKG, Spain is SPN, Belgium is BEL). If one of our member’s mailing address is in a foreign location, how do we report the foreign abbreviation in a two character field? It is appropriate to handle it in the same convention as the Driver License State field where international driver licenses are represented as ‘IT’ (Table 2 and 3, Section VI. B.2 of the Reporting Guide and User Manual).

20. Is the company control code just for reporting or does this need to be included on any other State submitted document? The company control code is just for reporting to TexasSure.

21. How do we handle international driver licenses? International addresses? The User Manual specifies to place “IT” for Driver License State if it is international. Do not make up a value or use fillers for the number field; if you do not have an actual value for the Driver License Number, fill with blank spaces. “IT” (international) also applies for addresses (State field).

22. What should the policy effective date be for the following example: policy inception term was 01/01 thru 07/01/2006, there was lapse from 08/01 thru 08/10 in coverage during the second term (07/01/2006 thru 01/01/2007)? If you are reporting during the first uninterrupted coverage period 01/01 - 07/01/2006, the policy effective date is 01/01/2006. During the lapse 08/01 - 08/10/2007, you would not report a record. For the periods following the lapse in coverage, you should put 8/11/07 for the policy effective date.

23. Policy Expiration Date is not a field we store on our system. Should we supply a date which is based on a formula (keep in mind it would not be a date which would be considered as a true date as to when a policy would expire or be canceled) or should we just not provide a date at all? Use your formula as long as it is a valid date and NOT a “junk” value like 13/45/9999.

24. Vehicle Coverage Effective Date is a new field in our system so there is the possibility that for some policies we would not have this information, in which case there would be nothing in that field. What should we do about reporting this?
In the absence of a Vehicle Coverage Effective Date, you should substitute the Policy Effective Date.

25. How will vehicles that are rated with the excess driver class be handled in the Unmatched Data and the Data Compliance Report? Policies with this type of rating will be missing mandatory information. For example: a policy has three cars and two drivers. Based on the highest to highest rating, Driver one is rated on vehicle one, Driver two is rated on vehicle two. The third vehicle will not have a driver assigned based on our rating and will be rated with the excess driver class. This policy will appear in the vehicle file with three rows for each vehicle. The third vehicle will have a generic DOB, and will not have a DL#. If you don't have a valid DOB, please send an empty field. Please do NOT send the 'generic' value. Since this record is missing two required fields (DOB and DL), it will show on the Data Compliance report. If the vendor cannot match the vehicle, it will show on the Unmatched Data report.

26. Given the example: a policy has 2 drivers and 2 vehicles; Driver 1 on the policy since inception – 04/01/2006, Driver 2 added to policy 03/12/2007, Vehicle 1 on policy since 04/01/2006, Vehicle 2 added to policy on 07/29/2006. Using the Vendor Enhanced Format (Format 1), what are the policy effective dates and vehicle/non-owner effective dates for all four combinations?

<table>
<thead>
<tr>
<th>Driver Number/ Vehicle Number</th>
<th>Policy Effective Date</th>
<th>Vehicle/Non-Owner Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Driver 1/Vehicle 1</td>
<td>04/01/2006</td>
<td>04/01/2006</td>
</tr>
<tr>
<td>Driver 2/Vehicle 1</td>
<td>04/01/2006</td>
<td>04/01/2006</td>
</tr>
<tr>
<td>Driver 1/Vehicle 2</td>
<td>04/01/2006</td>
<td>07/29/2006</td>
</tr>
<tr>
<td>Driver 2/Vehicle 2</td>
<td>04/01/2006</td>
<td>07/29/2006</td>
</tr>
</tbody>
</table>

27. We'll be using an Excel spreadsheet. Does that mean we will have to use a delimited file? Yes, you would populate the columns in the spreadsheet and follow the instructions on how to create a delimited file (Section VI.B.2.d of the Reporting Guide and User Manual).

28. Will we send only one file per book of business weekly? You must send one file per week per NAIC or NAIC/MGA combination. You may send multiple files for each company depending on the size. For example, for NAIC 12345 you could split 1 million records into two files of 500,000 records for submission.

29. We would like to voluntarily report commercially insured vehicles along with our personal lines policy vehicles. Can the weekly reporting system handle multiple reporting files from the same company with both personal and commercial vehicles? This is not a problem. We recommend that you submit two files, for example (using Format 1):
   ABCD_20070416_1of2_35000_E.pgp (for personal lines)
   ABCD_20070416_2of2_23000_E.pgp (for commercial lines or vice-versa)
   Notice that the NAIC specified by ‘ABCD’ is the same. The files are unique by the record counts. ‘XofX’ differentiates the files further if the record counts are the same. If your book of business is very large, we encourage you to break the file down even further. As a note, you may combine personal and commercial records in the same file.

30. If we are reporting commercial policies using Format 2, would we create one driver record for each commercial policy, filling the driver record with the company information? Yes. One driver record per commercial policy is appropriate for the situation. You can do this by putting the company name as the driver last name.

31. If we send every driver (employee) we have listed with every car we have, there could be numerous large files to process. Won't this take a long time to process and produce a lot of errors?
As it relates to personal policies, receiving multiple drivers for each vehicle is critical to the matching process because we want to have the best chance of receiving a record that matches the person that registered the vehicle. This does increase the file size; however, it has proven to return the highest possible match rate.

As it relates to commercial policies, it does not make sense for you to send all of the drivers for all of the vehicles in a fleet. That would be a tremendous amount of data. In a commercial policy, it is likely that the registration is in a company name, not any of the drivers so we recommend that you replace the driver last and first name fields with the company name.

32. **Should we use out-of-state driver license information?**
   If out-of-state driver license information is all you have available, please use it. Otherwise, in-state driver license information will be most helpful.

33. **What does the E/V/D/X in the return file filename mean?**
   Each of the letters corresponds to a reporting format:
   - E = Format 1, Vendor Enhanced Format
   - V = Vehicle File, Format 2, Texas Interface Format
   - D = Driver File, Format 2, Texas Interface
   - X = Format 3, X12 format

34. **What should an insurer send to the vendor if they do not have any policies to send (for example, there are no current policies for the period, but the company is still in business)?**
   Send a data file with zero records in it.

35. **What do we do with mailing addresses that are longer than 40 characters?**
   You may truncate the address at 40 characters. Data that is truncated should not appear on data compliance report.

36. **If an insurer changes reporting formats, will that change the Company Control Code assigned by the vendor? Do insurers need to resubmit the Company Profile Form if they want to change reporting formats?**
   Changing reporting formats will not change the Company Control Code and does not require submission of a new Profile Form. Companies should notify the vendor of the intent to change and are strongly encouraged to go through the testing process if the reporting format is changed.

37. **Will a data submission be rejected if the insurer submits in Format 1, when the company previously used Format 2?**
   No, the file will not be rejected. However, you will likely be contacted by the vendor to work through the change.

38. **Should we send future policies we have on file, policies that are not yet active?**
   No. You should only send active policies.

39. **It is understood that future dated transactions are not allowed when sending a full book of business, but what happens if one slips in? Is there a penalty involved?**
   There would not be a penalty, but insurers should try not to send any future dated policies if at all possible. If a future dated policy slips in to a current processing period the vendor would show the policy as current; that is, the vendor would err on the side of showing the policyholder as being insured.
40. The vendor does not accept future dated records, but can you tell me what is acceptable in the following scenario of process/transaction date versus effective date:
On 3/9/2007, an agent processes an endorsement to add a vehicle to the policy effective 3/29/2007. Which is the acceptable date for the next reporting period of 3/12/2007— is it the transaction date of 3/9 or the effective date of 3/29 (the future date)?
We expect to receive policy records that relate to the insured vehicles in the insurer's book of business at the time of the processing period. If in the example, the vehicle was considered covered on March 9th, we want the insurer to send the record in the reporting period that March 9th occurs in (or the next submission period - in this case March 12th would be the next available reporting period). However, since the example indicates that the vehicle is not covered until March 29th, the record should not be sent until the processing period that includes March 29th. In this case, March 26th would be the date that we would expect to see the record.

41. If a policy has two vehicles and two drivers, we have to send four records. If the same policy has two entries in the Texas VTR database, do we need to send four records for these database entries or do we need to send four records for every database row for the policy?
You are correct about sending four (4) records, which would be the case in Reporting Format #1 or #2. As for the Texas Vehicle Titles and Registration (VTR) database, you do not need to be concerned with how the data is captured and there is not a need for you to program to any conditions regarding the data. Please just send four (4) total records as you have described.

42. Are there any anticipated changes to the Vendor Enhanced Format for reporting in the near future?
No, we do not anticipate any changes to this format in the near future.

43. Does the State want to see the policy number preceded with zeros? For example, 0000123456911101 or 123456911101.
TexasSure prefers you send the policy number as it is reflected on the insurance card issued to the insured. In addition, TexasSure prefers that insurers not report leading zeros; however, if that is not possible, the leading zeros can be sent.

44. If a policyholder is not listed as a driver, should we still report the policyholder?
Since the policyholder is not a driver, you are not required to report their information. However, we advise that you go ahead and submit the policyholder as a driver for the policy. This could be a common situation where the policyholder is a parent and the driver is a child. The parent is more likely to be the registered owner than the child. To increase the chances of matching this policy to a registered vehicle, it would be best to report the parent as a driver.

45. What information should be placed in the User Defined Field?
You and your company can use the User Defined Field in any way you want, and fill it with any data you choose.

46. Since our policies are written as mileage based policies, what would we send as the "Policy Type" to the state? Would it be "P" personal or "M" mileage based?
If your policies are mileage based, you would report them as mileage based, "M".

47. We have names with dashes and spaces, for example Mc Donald or Smith-Brown. Will they produce an error?
The dashes/hyphens and spaces should be fine. If possible, it would be better to replace dashes/hyphens with spaces.

48. The Driver License Number is a mandatory field. What if an insurance company cannot provide a license number, for example if the vehicle owner has an international driver license that has not been replaced by a Texas license?
For international licenses, please mark the field “IT” and enter the international license number. Leave this field blank unless you have a valid license number, do not use fillers in the field. This will not count against the match rate.

If an insurer sends a good VIN but a bad vehicle year and vehicle make, will the vendor inform the insurer that they sent a bad year and make on the vehicle?
No.

49. If an insurer is using Format 1 and a driver is taken off a policy, does the insurer need to report that particular driver to Texas VTR (Vehicle Title and Registration)?
No. Since you are reporting a full book every week, the deleted driver would be excluded from the next data submission.

51. We sent our submission data to the vendor in policy number order, but received our Unmatched Data file with records out of order. Is this normal?
Records within the file will be returned in the same format but not necessarily in the same order.

52. We do not collect information for non-rated drivers. Do we have to send the driver license information?
If you do not regularly collect this information for non-rated drivers, you do not need to begin collecting it. However, this information will be increasingly useful as a secondary means to confirm insurance.

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**Topic:** Data Encryption, Data Transmission

1. The vendor’s specified encryption method of FTP with Pretty Good Privacy (PGP) automatically compresses files. Do insurers need to also “zip” their files?
   It is not required to zip files.

2. What version of the PGP encryption should be used?
   We recommend that Insurers use a minimum of 128-bit encryption to ensure the data is protected. If the version a company is using does not work during testing, Insure-Rite will notify the company.

3. We’ll be using an Excel spreadsheet: Will we still need to use FTP and PGP?
   Yes. You will need to use both FTP and PGP.

4. Is there a way to resubmit if a company misses their scheduled submission day and time?
   There are no scheduled days and times for company submissions. A company must send their weekly file within the reporting period to avoid penalties.

5. Will the FTP password ever change?
   We do not anticipate that the public key and credentials will change very often. All companies will be notified before a change is made.

6. Where do we find the information in order to access the FTP site (specifically the FTP site name and the encryption/PGP key information)?
   If you have completed your Profile Forms and faxed them to HDI Solutions and you don’t yet have your Company Control Codes, please contact Insure-Rite at txsubmissions@insure-rite.com.

7. We are sending a rather large file and are receiving a connection time out issue. What should we do?
   This could be a problem with large files. If you continue to have the problem, you may consider breaking the file down into smaller ones and labeling them 1of2, 2of2, etc., as detailed in the File Naming Convention sections.
8. Will there be any other kind of encryption used for the FTP services besides PGP?
   No.

9. We do not have our FTP encryption set up yet. Do we have to wait until the encryption is in place before we send a test file?
   Yes.

10. Does the vendor support the freeware version of PGP?
    A test file could be sent to Insure-Rite to determine if a freeware version of PGP would work.

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**Topic:** File Naming

1. Do companies need to pad spaces within the filename? The example in the reporting guide shows 500000 (6 spaces) as the number of records; if we are reporting only 75000 (5 spaces) records, do we need to pad the sixth space?
   No. The underscore signifies the break between fields. The following is an example as shown on page 14 of this manual.
   
   ABCD_20061106_1of2_500000_E.pgp
   ABCD_20061106_2of2_500000_E.pgp

2. We don’t have any automation in place to include a valid Total Record Count as part of a file name on an outgoing file. Does the Total Record Count have to be a valid number or can we just put any number there as part of the file name?
   The total record count should be a valid number and directly relate to the number of records within the file for two reasons:
   
   1. The file validation process checks the actual record count of a file and reconciles it with the number of records that an insurer says it sent (via the total record count in the file name). If the two don’t match, the processing of that file will be suspended.
   2. When the vendor receives a file, their system checks that the record count on the current submission is not exactly (or within a small deviation) the same as the previous submission. By putting the correct count in the file name, our system doesn’t have to decrypt and decompress prior to obtaining that information and can avoid processing duplicate file submissions.

3. Can we put leading zeros in the Total Record Count in the Filename? For example, 60126_20070409_1of1_0008500_E.pgp.
   Yes you can, but it is not necessary.

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**Topic:** Data Reports/Files

1. Insurers send their data to the vendor via FTP, but how will insurers obtain return files?
   These files will be placed in the insurer’s FTP directory; the files will remain in the directory for two weeks for insurers to obtain the file. If an insurer knows the file cannot be obtained in the two week period, they should contact Insure-Rite. Contact information is located on page 42 of this manual.

2. An insurer sends a Vehicle and Driver file (using Format 2) for both Company A and Company B: Company A has errors and Company B does not, will the insurer receive anything for Company B?
   They will receive blank error files for Company B.
3. If a VIN is missing, will we get that back as a data compliance error, but will that also be automatically returned in the Unmatched Data file as well?  
   The record will only be returned in the Unmatched Data file if the vendor was unable to match it on other fields that were supplied.

4. How long will return files remain on the FTP directory when we begin sending weekly submissions?  
   The return files will be on the server for at least two weeks.

5. Will insurers have the right to delete return files on the FTP directory?  
   Yes, insurers will have most rights to the folder to make changes. Please note however, the vendor will not be able to help an insurer find a file if it is renamed or deleted.

6. For insurers using a fixed record format, what is the maximum number of error codes that could be returned so that we may establish an adequate fixed record length?  
   As currently defined (with only error code 100), the maximum character count for a fixed record with every required field missing (filled with spaces) would be:
   - Reporting Format 1: 564 characters (+ carriage return + line feed for a total of 566 characters)
   - Reporting Format 2, Vehicle Record: 332 characters (+ carriage return + line feed for a total of 334 characters)
   - Reporting Format 2, Driver Record: 438 characters (+ carriage return + line feed for a total of 440 characters)

7. Will there be a method by which you can notify us of formatting errors, or errors that do not involve the data we collected from the insured?  
   Formatting errors vs. data collected (for example, if you send a VIN that has 10 characters, but should have 17, this could be interpreted as a format error):
   1. Currently, there are no plans to generate errors at this level. The only condition currently that will trigger an error is the omission of a required field. This may change as we start processing data and we may be required to add other error codes and conditions.
   2. The architecture for the variable length field at the end of data compliance records will accommodate the need for additional error codes and the error codes could definitely be format related.

8. Regarding the Receipt file: This sounds like a formatted report—are any data records included?  
   This is an ‘empty’ file that will be placed in the insurer’s report directory. It will not have any contents. Its existence will signify that the vendor has received your submission via FTP and that it is in the queue for processing. The vendor supplies this confirmation because the FTP site is read-only to protect the data. A receipt confirmation will also be emailed to company contacts.

9. Regarding the Acceptance file: Is this a formatted report? Does it include any data records?  
   This report is another file that will be placed in the insurer’s report directory. It will contain some data, but not individual submission records. The format is similar to an ‘ini’ file convention that will have name/value pairs. The following is an example from the reporting guide located in Section VI.C.3:
   - UnmatchedRecords=1234
   - MatchRate%=95
   - LastNameMissing=12
   Since this does not contain any submission records, this report is also emailed. The body of the email will contain the name/value pairs that are the contents of the file. The intent is for the data to be processed in an automated way and be legibly viewed by an actual person through email.
10. Regarding the Rejection file: This sounds like our original data records—will you be putting any error codes on the records? If so, can you provide the record layout? This will not contain any submission records and will be similar to the Acceptance file with name/value pairs that indicate the source of the rejection. This file will be sent to the insurer via email and put in the insurer’s report directory. If an insurer receives this file, they won’t see the Acceptance file. Its purpose is to inform the insurer there is an error with their submission file that is stopping the vendor from processing it. An example, and probably the most likely error, is that there is a failure in decrypting the file or the file is corrupt and can’t be read. It is more than likely the insurer will receive a call from the vendor to help resolve the problem.

11. Is the only error code still just 100 for a missing data field in the Data Compliance file? Yes.

12. Will the record count in the filename change for return files? Yes, the filename will reflect the record count for the return file (except Acceptance files); the date in the filename will not change.

13. Will the Data Compliance file always be sent? Yes, the vendor sends the Data Compliance file to all insurers.

14. Regarding the Data Compliance file: This sounds like both a summary report and data records. 1) For the data records, can you provide a fixed format record layout for the returned portion of the data on the records? 2) Will we only receive the individual records with missing fields by request?

1) This report contains the exact record that was submitted followed with error code name/value pairs that indicate the field in error and the actual error code. Currently, there is only one error code, 100, which indicates the omission of a required field.

The sample below (from page 35 of this manual) illustrates an error record that is missing field 2 that is required for Reporting Format 1. Note the [2^100] text appended to the record. The * characters represent spaces in a fixed file, and the + characters represent where a required field was passed as spaces (or empty). It is possible to have multiple name/value pairs on one record because a record may be missing more than one required field.

```
ABCD*****UserDefinedField************P200606012008
06012006060801Anystreet*****************Anytown**********TX11111****
ZJ123456789**********Jeep***Cherokee******20047576543**Anystreet**********
 ******************Anytown************************TX11111****jDoe************************Jane***
 ******************Ann***************************TX5555566666*************19651201[2^100]
```

2) You will always receive the individual records with missing fields in the detailed Data Compliance file. The summary information regarding missing data is supplied in the Acceptance file.

15. Regarding the Unmatched Data file: Is this both a summary report and the data records we sent? The summary is in the Acceptance file. The Unmatched Data file contains the records that the system could not match exactly as they were submitted. This will not be available via email as it contains submission records, and the files may be very large.

16. Regarding the Data Compliance file: Do the numbers match up to the field numbers listed in the reporting format tables in the reporting guide? Yes. The bracketed number appended to the end of a record within the Data Compliance file matches up to the field that is missing. Mandatory fields that are missing are not in compliance.

17. What will the return file layout look like for the Unmatched Data file? The format of the Unmatched Data file (0 and 60 day) is exactly the same as the file that was sent to the vendor. If we cannot match a record, we will return the entire record to you in the format it was sent.
18. Which reports are issued by request from the insurer? If we expect them regularly, can this also be set up?
The Unmatched Data reports are by request. Please send an email to Insure-Rite. Contact information is located on page 42 of this manual.

19. Would the Receipt file, Acceptance file, Rejection file, Unmatched Data file and Data Compliance file be sent on the same day? Or is there a possibility of receiving each of the return files on different days?
The Receipt file will be available as soon as our system has determined that the file has been successfully uploaded.

The Acceptance file will be available after we have successfully processed the submission file. It may or may not be the same day as the Receipt file, depending on system load and size of the file.

The Unmatched Data (if requested) and Data Compliance files will be available shortly after the Acceptance file and should be available the same day; however, there are some circumstances where there may be a slight lag depending on how many records are in these error reports.

The Rejection file will only be available if there is a problem processing the file and will most likely show up instead of the Receipt file. This situation may be accompanied with a phone call to facilitate in problem resolution.

20. Can the vendor let us know the file size (RECL, FB/VB, BLKSIZE) for the following return files: Unmatched Data file and Data Compliance file?
A file size cannot be provided as it will vary from week to week.

21. Will the Unmatched Data file have all the same records as the Data Compliance file?
There is no direct correlation between the Unmatched Data file and the Data Compliance file. You may see the same record in both, as a record could be unmatched and missing required fields. Alternately, it could be matched so it wouldn’t be in the Unmatched Data file, but, if it was missing a required field, it would be in Data Compliance (and vice-versa).

22. If a company submitted 2000 files last week and submits 1000 files this week, would that be a “red flag” in Data Compliance file?
No, not as it relates to the Data Compliance file. However, the vendor would notice this change and would contact the company to determine if files were missing from the submission.

23. What if we want the Receipt file and Acceptance file to go to an email address other than what was provided on the company profile form?
Please send the change of email address to Insure-Rite at txsubmissions@insure-rite.com.

24. What error codes should insurers be looking for?
There is only one error code: 100. This code represents a missing field in a record and is found in the Data Compliance file.

25. Will the vendor send empty return files?
Yes, the vendor will create ‘empty’ return files in the event the insurer does not have any errors or unmatched records.

26. Regarding the Unmatched Data file: If the VIN matches, is it safe to assume that the vehicle will not show in the Unmatched Data file? Even if the VIN matches, will we see the vehicle in the Unmatched Data file, as some other fields did not match (e.g. Make, Year, Driver Name, etc.)?
Matching is not necessarily performed on VIN only and cannot be considered a ‘trigger’ to indicate what would be in or out of the Unmatched Data file. If the VIN matches, we do perform other checks and if enough of them fail, the record could be named unmatched even if the VIN did match.
27. How quickly will an insurance company need to respond to a Rejection file if one is received?  
   Please note that a Rejection file is only sent if the vendor is unable to process a file. An 
   insurance company will have three (3) calendar days to resubmit a corrected file.

28. Regarding the 3-day error correction turnaround [on Rejection files] and the penalties 
   resulting from not meeting this deadline: What happens if a state has a holiday that Texas 
   does not observe?  
   TDI will not penalize an insurer headquartered in another state for missing the 3-day turn 
   around because of a holiday that Texas did not observe.

29. We have created a “listener” to know when to collect report files from the vendor’s site 
   based on the Acceptance email received. Will the Acceptance email that the vendor sends 
   ever change?  
   Carriers will be notified of any changes and can adjust accordingly.

30. We sent fixed files to the vendor, but we received delimited error codes attached to our 
    fixed file, is there a reason?  
    Error codes will only be provided in the delimited format.

31. Will carriers receive one Unmatched Data file for each Company Control Code they report?  
    Yes, upon request only.

32. Will carriers using Format 2 receive both the Vehicle file and the Driver file for the 0-day 
    Unmatched Data file?  
    Yes, eventually. However, until further notice only the Vehicle file will be returned as the vendor 
    is not matching against driver license data.

33. Regarding the Data Compliance file: What is the time frame required for correcting 
    missing fields?  
    Insurers are encouraged to work toward collecting the missing information at policy renewal or 
    with other regular customer communications. If information is currently available in the policy, the 
    data fields need to be updated. Records reported with incomplete data, wrong characters, and 
    missing fields may result in the records not matching correctly within the database. The State 
    expects to see data compliance numbers improve over time.

34. Regarding the Data Compliance file: Carriers are not required to send letters to customers, 
    correct?  
    Correct. For purposes of Data Compliance, insurers are encouraged to work toward collecting 
    the missing information at policy renewal or with other regular customer communications. If 
    information is currently available in the policy, the data fields need to be updated.

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**Topic: Data Matching**

1. If an insurer is recording Author Jones’ name as A.J. and the Texas VTR data has the 
   record as Author Jones will the differences in the way the name is recorded cause an 
   unmatched record?  
   It depends on how complete and accurate the insurer record is. The name is not the only piece of 
   data the insurer’s data is being matched against.

2. Will a policy be matched against DPS or VTR data?  
   The policy will be matched against both; however, VTR data is the main data that a policy will be 
   matched against.
3. In the case of multiple registration records with the same VIN, how will the vendor determine which registration record is correct?
The vendor will not be able to determine which registration record is correct. The insurance policy record will be matched to the appropriate registration record for that policy.

4. If an insurer is reporting commercial policies (currently optional) will this count against them in their match rate?
No. Any errors associated with these policies will not be included in the match rate and will not be included in error reports.

5. If a record is unmatched, will the individual fields be identified that caused the record not to match?
No, the vendor will not be able to determine which fields are in error. Individual fields will only be identified in the Data Compliance file (missing data).

6. How many fields have to match to confirm a match on a record?
It varies based on the algorithm logic that is being used for the matching process.

7. Are you using the same matching process as Utah?
Elements are similar, but the process was modified for the fields and volume of Texas.

8. What fields will be used to complete the matching process? Will you first try to match primarily on VIN?
A match cannot be based on using the VIN alone. The VIN plus another field or a combination of other fields will be used. The VIN is only one of many primary identifiers; it should not be assumed that the VIN is the one and only matching element used.

9. The Reporting Guide and User Manual states that the vendor’s matching software will use several algorithms to match the records. How strict will the algorithms be? Can we see which data elements will be used when matching records?
All of the data items requested (except for coverage dates) can be used in the matching algorithms. The algorithms are proprietary and as a result, the vendor will not make them available.

10. Our system has the insured’s name listed as Juan Gomez Ramirez. The state has the insured’s name as Juan Ramirez – would this be considered an unmatched record?
It is highly likely that this record will match. Matching is not a ‘typical discrete’ matching process. The vendor’s matching software will utilize several algorithms in a cascading matching process to attempt to provide a match, even in cases as described above.

11. What will happen if we receive a 100% match rate?
If an insurance company matched 100% of a file that they sent, they may still receive records in the Data Compliance file.

12. Will our match rate be affected by missing fields in a record?
A record only counts against an insurer’s match rate if the record does not match at all. If a record is matched but has a missing field, the missing field does not count towards the match rate.

13. Using Vendor Enhanced format (Format 1) - policy number 12345, insured drivers Jane and John Doe on a 2004 Jeep, 2005 GMC and 2006 Honda, then we send:

- Jane Doe, 2004 Jeep, policy 12345
- Jane Doe, 2005 GMC, policy 12345
- Jane Doe, 2006 Honda, policy 12345
- John Doe, 2004 Jeep, policy 12345
- John Doe, 2005 GMC, policy 12345
- John Doe, 2006 Honda, policy 12345
14. If a match is not found for the 2006 Honda, should we expect 2 records back in the unmatched file? How does this affect the match rate? Yes. You would get both records back, and it would affect the match rate as it is currently defined at a record level.

15. What occurs if two different insurance companies send the same VIN information on a vehicle and it matches the VTR database information; that is, a vehicle is showing two different insurance policies? In circumstances where multiple insurance policies are submitted for the same registered vehicle, all policies matched to the vehicle will be given a match score. The match that scores the highest will be used during the insurance verification/query process.

16. If a carrier’s full book of business only has one record and it is unmatched, what will the result of the failing match rate be on such a small book of business? The insurer is encouraged to work with the customer for such a small book of business to avoid errors. This issue may be addressed further when and if it occurs.

16. If we submit ATVs and golf carts in our submissions to the vendor, even though we are not required to, will we receive an error? Insurers who choose to report ATVs and golf carts will receive unmatched error notices (upon request) for those vehicles that are not registered. This will count toward the match rate.

**Topic:** Data Correction

1. Do errors have to be corrected and submitted by the next processing period? It depends on the type of file. Rejection files must be corrected within three days. The corrected file must have the same Monday date as the date on the original submission. Insurers are encouraged to correct the file format errors prior to the end of the submission deadline; otherwise the records will not be processed for the current submission period. Insurers missing submission periods may place their insureds at risk of being reflected as uninsured in the TexasSure database. Data Compliance files are monitored by TDI for compliance.

2. If we have incorrect data and need to submit corrected data to the vendor, must we send corrected transactions to the vendor during the processing period? You only need to correct data during the processing period if there are major issues with your file and you received a Rejection File, or if you submitted an incomplete book of business. If this happens, you should contact the vendor (if they have not contacted you already) and they will work with you through the problem.

   Other corrections related to missing or incorrect data fields should be included in the next earliest submission period’s file.

**Topic:** Testing

1. Has testing been done for the situation of an insurer having no activity for a period and sending a blank file to the vendor as a result? Yes. If an insurer sends an empty file, they will receive empty files in return.

2. How long will testing a connection take? As quick as an hour if the insurance company data format is in order, or as long as 2 or more weeks if the data format has issues.
3. We have not established connectivity with the vendor. Can we send a sample report before we establish connectivity to confirm that we are coding our extract correctly?
   Yes. If you have submitted your Profile Forms, your primary and secondary business contacts should have received your Company Control Codes and the information necessary to access the FTP site. Also, it may be helpful to ask the vendor questions during your sample file creation process.

4. We are ready to begin testing, what should we do?
   If you have test files you can send and you feel you are compliant with the Reporting Guide and User Manual, please send Insure-Rite an email (txsubmissions@insure-rite.com) with a company control code and an attached file for testing saying that you have uploaded a file for testing.

5. After sending the first test file, how long until we know it worked?
   The vendor will do a manual review of the first transmission and depending on the quality of the data; this review may be as quick as 48 hours or a few weeks.

6. Should a test file that is sent to the vendor have production data in it or test data?
   The vendor prefers to receive production data, if possible. Files containing production data must be encrypted to protect the personal data.

7. Should insurers send their full book of business in the testing phase?
   Yes.

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**Topic:** General Program Questions

1. Will the vendor send out any documentation to say that an insurer is in compliance with the required match rate of 95%?
   No. Insurers should look to their match rate percentage shown in the Acceptance file to determine if they are in compliance of the match rate. TDI will also be monitoring the match rates.

2. Is there a solution to insurers that are unable to identify vehicles that are registered in Texas but insured in another state?
   There is not a solution to the problem at this time.

3. How will an insurer know all of their files are ready for pick-up? Can we get an email notice?
   The vendor will provide email notices regarding the Receipt (or Rejection) and Acceptance files. It is reasonable to expect the additional files to be available shortly after the Acceptance file, but a definite turnaround time is not available. All files are expected to be available by the end of the reporting period.

4. When will non-compliance fines be levied on a driver – when they are pulled over or when they cancel their policy and do not rectify it within a certain timeframe?
   First, ongoing verification is currently not an element of this program, but may be in the future. If a driver is pulled over, the law requires “the operator of a vehicle to provide evidence of financial responsibility,” the TexasSure does not alter or circumvent this responsibility. Any fines associated with not having valid proof of insurance will continue to be applied as they currently are, generally through a moving violation.

5. If we elect not to report our commercial lines at this time, will the state be able to distinguish a commercial lines vehicle not showing an electronic insurance record from a personal lines vehicle? Will letters be sent to a commercial insured for not having insurance on file or will there be any other adverse impact, such as not being allowed to register?
The database of registered vehicles maintained by the Texas Department of Motor Vehicles does not distinguish vehicles used for commercial purposes from vehicles used for personal purposes (aside from motor carriers). Registered owners of commercial vehicles may receive notification of not having insurance on file. However, they will be able to submit an affidavit stating that the vehicle is insured under a commercial policy.

6. How will people be able to prove that they are current with their insurance if insurers are only reporting a policyholder’s status once a week?
   For example: A policyholder is dropped from coverage on Thursday, March 1st. The insurer sends the weekly report of the full book of business on Monday, March 5th. The policyholder renews their policy on Wednesday March 7th and is stopped by law enforcement on Thursday March 8th. Won’t the policyholder appear to be uninsured, even though they are, in fact, insured?
   As long as the policyholder can later prove they had insurance when they were issued a ticket the ticket should become void. While the objective of this program is to provide accurate and timely proof of insurance via an electronic database system, the law still requires the motorist (§ 601.053 of the Texas Transportation Code) to make available current effective paper or electronic proof of insurance upon request.

7. What are the penalties for Texas residents if they were found to not have insurance when law enforcement stopped them?
   At this time, penalties directly related to this program have not been determined. However, penalties and enforcement actions mandated by DPS and TxDMV will remain in effect. Texas law provides severe penalties for violating the state’s financial responsibility laws. A first conviction may result in a fine up to $350. Subsequent convictions could result in fines of $350 to $1,000 and suspension of your driver’s license.

8. Can we send files every day?
   No, the system is not designed to accommodate daily reporting.

9. Regarding data servers and security measures: Will all servers be maintained with current security patches? What security controls will be in place on the servers?
   Yes, security patches will be maintained. All uploaded data will be encrypted via PGP. The upload FTP site is upload only and will deny the LIST command so others cannot view submission files. The report directory is different than the upload directory. Insurers have the ability to delete, rename, and view the contents of the reports directory. For security, the LIST command is restricted from the upload directory as it is shared across multiple insurer reporting entities, and we don’t want insurers to have the ability to see other insurer files (even though the files are encrypted).

10. Who will have access to the data maintained by the vendor?
    Insure-Rite sanctioned technical support staff.

11. Will VIN validation be used?
    The system used by County Tax Assessor Collectors when processing vehicle titles or registrations uses VIN validation software. There are numerous circumstances where a VIN will not be correctly validated by TxDMV. Older cars (pre-1981) do not use VINs that conform to the current 17-digit standard. Some vehicles that have been modified or remanufactured (i.e., motor homes, custom hot rods, etc.) may have unique, non-conforming VINs or VINS assigned by Texas or another state.

12. Is there any Texas VIN database that can be purchased to perform VIN validation on our system?
    There are services to which a qualified user may subscribe that provide access to the TxDMV vehicle database. “Qualified user” must be emphasized as the Driver Privacy Protection Act and
Texas statutes restrict the use of this information. All the services require a subscriber contract with TxDMV and payment of fees.

The most popular service allows for web access and permits the user to inquire on a specific VIN, plate number, or title number (DOCNO). If that VIN, plate, or title is in the database, the record or records will be displayed. This service is browser based and is best used for manual inquiries or low volume. However, some users have written automated scripts to obtain hundreds of queries per session. You can obtain information on subscribing to this service: https://prod1.dot.state.tx.us/.

There are also two services specifically intended for batch or high volume inquiries. The first is a batch inquiry process which requires submission of a data file containing VINs or plate numbers to a TxDMV FTP server. After processing, a file with the corresponding data records is placed on the server for the subscriber to download. Ad hoc batch inquiries can usually be run the same day. Some users with larger inquiry files (e.g., 1 million or more) must be scheduled and run overnight. The second is a subscription to the current motor vehicle database. This is normally provided as a one-time data transfer with weekly updates thereafter.

13. How will the program handle VINs less than the normal length (i.e., 9 digits long)?
This will not be a problem. The program will handle this in the same way it would handle the full VIN.

14. How often will Texas Department of Motor Vehicles (TxDMV) VTR data data be uploaded?
VTR (Vehicle Title and Registration) data will be updated weekly.

15. If an insurance company sends their NAIC numbers to the vendor, can the vendor tell if the company has received their Company Control Codes?
Yes. Send an email to Insure-Rite at txsubmissions@insure-rite.com if you are in doubt about your Company Control Code.

16. Will Texas have a web service that would allow insurers to post proof-of-insurance online similar to what Georgia allows?
This is not a feature of the program at this time.

17. What happens if there is an issue with the vendor’s server and every carrier’s reporting files need to be restored?
The vendor would re-run the batch to generate the files.

18. We deleted our reporting files from the vendor’s site prematurely. Is it possible for the vendor to place the files back on the server for us?
it is possible; however, the vendor cannot guarantee that a file could be retrieved once deleted. They also cannot guarantee any timeframe for retrieval of a deleted file. Insurers should use caution when reviewing files and establishing automated processes to download and delete.

19. How will the TexasSure handle military personnel who are stationed in Texas but drive a vehicle registered out-of-state?
Law enforcement officials should not verify insurance through the TexasSure for vehicles not registered in Texas.
20. Can we expect to receive reports within a week of our weekly submission?
   Yes, an insurer should be able to pick up their reports within seven (7) days.

21. We receive a lot of invalid fields in our Data Compliance file. Is there a reason for this?
   It is most likely because you are sending empty or blank fields for required fields where you do not have valid information. This is 100% correct and the recommended method for reporting to ensure the best matching possible. The nature of the Data Compliance file is to illuminate holes in insurer data that may contribute to a low match rate.

   Please do not modify your submission to send any other value than empty or blank for fields without information. Although this will cause invalid field counts to be higher on the Data Compliance file, it will aid identifying quality and quantity issues of insurer data.

   For example:
   If you are observing a low match rate or looking for a way to increase a match rate, a comparison of the records on the Data Compliance file to the Unmatched Data file may show a trend where the vendor is unable to match some records because the submission file is missing some required fields that are useful in matching. The two reports work in conjunction to identify records where additional motorist information could be obtained to try to increase a match rate.

   If these invalid fields are 'hidden' on the Data Compliance file by attempting to pass dummy values, it will skew the data and thwart the cooperative nature that exists between the reports.

22. How important is the Driver License information in the overall picture?
   The Driver License information is important in a customer relationship perspective as a secondary source of determining insurance. Available data should be sent, including international driver license numbers. Insurers are again advised not to add junk data or "unknown" to driver license fields. A blank field should be sent where data is not available.

23. We are working on voluntarily submitting our Commercial Lines book of business. For the non-owner commercial policies, should we report the policy type as 'N' and include a vehicle non-owner effective date (we will not have the vehicle information on the policies)?
   As with personal lines, commercial lines also share the same requirements related to non-owner policies; if there isn't any vehicle information to report, you wouldn't be able to supply vehicle information.

24. Does the program allow files to be sent from more than one source, that is, can the insurer send files from separate locations using the same Company Control Code?
   Yes. An insurer can accomplish sending two files for the same Company Control Code with each file being generated from a separate location/system by leveraging the ‘XofX’ portion of the file naming convention.

   For example:
   Company Control Code ABCDE will report two separate files from two separate locations/systems A and B.
   Using Format 1, you would submit two files that are named:
   
   ABCDE_20080519_1of2_2500_E.pgp (from location A)  
   ABCDE_20080519_2of2_35000_E.pgp (from location B)

   It is not required, but it may be useful for some insurers to further distinguish their submission files by adding a suffix after the reporting format designation, for example:

   ABCDE_20080519_1of2_2500_E_locA.pgp (from location A)  
   ABCDE_20080519_2of2_35000_E_locB.pgp (from location B)
## XV. Appendix Version Change History

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