



Travel
January 1, 2024 through December 31, 2024
April 30, 2025

MCAS Administrator	The person responsible for assigning who may view and input company data.
MCAS Contact	The person most knowledgeable about the submitted MCAS data. This person can be the same as the MCAS Administrator.

4. They are aware that the state insurance department(s) receiving the data may initiate regulatory action as authorized by law in a specific jurisdiction if the data submitted in the MCAS is inaccurate, incomplete, or found to be materially false, misleading or omissive.
5. They affirm that the company is able to accurately trace the data as reported to its source within the company and if necessary, recreate the MCAS results as reported in this filing.

NOTE: The company must provide the name for at least two individuals who are able to attest that the criteria listed above have been met, and attest to the overall accuracy of the MCAS filing. Both attestors should have participated in the review and validation of the filing. We recommend that one person be the individual with operational responsibility for the source data such as a responsible individual from claims, underwriting or compliance. We recommend that the second person should be a responsible IT person that participated in the creation of the data in the filing.

5-48	First Attestor Information (First Name, Middle Name, Last Name, Suffix, Title)
5-49	Second Attestor Information (First Name, Middle Name, Last Name, Suffix, Title)
5-50	Overall Comments for the Period

In determining what business to report for a particular jurisdiction, unless otherwise indicated in these instructions, all companies should follow the same methodology/definitions used to file the Financial Annual Stt

A demand for payment for which it was determined

- The median value for all claims closed with payment during the period.

Calculation for losses with one final payment date during the reporting period:
Date the loss was reported to the company to the date of final payment.

Calculation for losses with multiple final payment dates during the reporting period:
Date the request for supplemental payment received to the date of final payment
(for each different final payment date.)

Exclude:

The median should be consistent with the paid claim counts reported in the closing time intervals.

Example: A carrier reports the following closing times for paid claims.