DISBURSEMENT

“DISBURSEMENT” is the title of this section. It identifies the opening and closing of this xml section. This document provides additional reporting requirements of data under this section for disbursement of loss payment including escrow.

Policy precedes Disbursement.

The process flag and/or change flag submitted for this section will be inherited unless otherwise indicated. Example: <DISBURSEMENT process flag =“2”>.

CHANGE_FLAG (ATTRIBUTE)

If Process Flag = 2 or 5 certain data will be allowed to change after initial acceptance. Tags have been identified by flags below. Flag of ‘1’ will only be allowed to change data identified by ‘1’. Flag of ‘2’ will be allowed to change data identified by ‘1 or 2’. Flag of ‘3’ will be allowed to change any data.

Valid flags:
1 = general
2 = company approval
3 = RMA approval

Change flag will default to 2 unless otherwise indicated.

PROCESS_FLAG (ATTRIBUTE)

Valid flags:
1 = original
2 = modify
3 = delete
4 = validate (original)
5 = validate (modify)
6 = quote (only applicable for premium)
7 = retrieve
8 = cancel (only applicable for Livestock crop policy)
9 = re-instate (only applicable for Livestock crop policy)

Process flag will default to 1 unless otherwise indicated.
<table>
<thead>
<tr>
<th>No.</th>
<th>Tag</th>
<th>Key</th>
<th>Level of Change</th>
<th>IN/OUT</th>
<th>REQ/OPT/CON</th>
<th>Max Size</th>
<th>Picture</th>
<th>Description/Edit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>&lt;RECORD_NUMBER&gt;</td>
<td>Y</td>
<td>NA</td>
<td>Y/Y</td>
<td>REQ</td>
<td>3</td>
<td>9(03)</td>
<td>Must be &gt; 000 and unique within a Crop.</td>
</tr>
<tr>
<td>2</td>
<td>&lt;CLAIM_NUMBER&gt;</td>
<td>2</td>
<td>Y/Y</td>
<td>REQ</td>
<td>8</td>
<td>9(08)</td>
<td></td>
<td>Claim Number assigned by company.</td>
</tr>
<tr>
<td>3</td>
<td>&lt;TOTAL_REINSURANCE_YEAR&gt;</td>
<td>2</td>
<td>Y/Y</td>
<td>REQ</td>
<td>4</td>
<td>9(04)</td>
<td></td>
<td>Total Reinsurance Year. If Total Loss Code = “R”, must equal Recovery Year or subsequent year. Format YYYY.</td>
</tr>
<tr>
<td>4</td>
<td>&lt;MEMO_COMPANY&gt;</td>
<td>2</td>
<td>Y/Y</td>
<td>REQ</td>
<td>3</td>
<td>9(03)</td>
<td></td>
<td>Total Payment/Credit Memo Company. Must be a valid company.</td>
</tr>
<tr>
<td>5</td>
<td>&lt;TOTAL_LOSS_CODE&gt;</td>
<td>2</td>
<td>Y/Y</td>
<td>REQ</td>
<td>1</td>
<td>X(01)</td>
<td></td>
<td>Total Loss Code. Must be: D = Draft issued Unfunded Escrow (see note) E = Escrow funded F = Administrative Fees M = Credit Memo this policy for current year O = Other (e.g. Interest, etc.) P = Credit Memo – Loss applied to another policy for current year R = Recovery of prior year premiums or All reinsurance year overpaid indemnities (OPI) for prior or subsequent reinsurance years Premium (i.e. Prepaid Premium with Producers Approval). Escrow Check/Draft Number or P/C Memo State and P/C Memo Policy. If Total Loss Code = D or E, enter escrow check/draft number. If = P, enter credit memo number.</td>
</tr>
<tr>
<td>6</td>
<td>&lt;ESCROW_DRAFT_NUM&gt;</td>
<td>2</td>
<td>Y/Y</td>
<td>CON</td>
<td>9</td>
<td>9(09)</td>
<td></td>
<td>Total Date Draft Issued. Must be a valid date. Not applicable if Total Loss Code = D. must be zeros. Format is M/DD/YYYY.</td>
</tr>
<tr>
<td>7</td>
<td>&lt;DRAFT_ISSUED_DT&gt;</td>
<td>2</td>
<td>Y/Y</td>
<td>REQ</td>
<td>10</td>
<td>X(10)</td>
<td></td>
<td>Total Amount. Must be &gt; 0 or &lt; 0. Sum of all Total Amounts must be ≥ zero for each loss code by claim number.</td>
</tr>
<tr>
<td>No.</td>
<td>Tag</td>
<td>Key</td>
<td>Level of Change</td>
<td>IN/OUT</td>
<td>REQ/OPT/CON</td>
<td>Max Size</td>
<td>Picture</td>
<td>Description/Edit</td>
</tr>
<tr>
<td>-----</td>
<td>----------------------</td>
<td>-----</td>
<td>-----------------</td>
<td>--------</td>
<td>-------------</td>
<td>----------</td>
<td>---------</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>9</td>
<td>&lt;AUTHORIZATION_NUM&gt;</td>
<td>2</td>
<td>Y/Y</td>
<td>CON</td>
<td>5</td>
<td>9(05)</td>
<td></td>
<td>Authorization Number provided by Reinsurance Services Division (RSD) approving the original, change, or deletion. Change Flag must = 3 and Process Flag must = 1, 2, 3, 4, or 5. If changing a “Key” field with Level of Change = 2, Authorization Number assigned by administrative screen and Change Flag must = 2. Authorization Number assigned by administrative screen and Change Flag must = 2. If section accepted, flag = Y. If rejected, flag = N. If deleted, flag = D. If cancel, flag = C.</td>
</tr>
<tr>
<td>10</td>
<td>&lt;TRANSACTION_FLAG&gt;</td>
<td>NA</td>
<td>N/Y</td>
<td>REQ</td>
<td>1</td>
<td>X(01)</td>
<td></td>
<td>Notes: Key field is Record Number (field 1)</td>
</tr>
</tbody>
</table>

The loss code of “D” will be used to process a loss without funding escrow. In order to fund escrow the AIP must resubmit the records for the policy using a loss code of “E”.

Information regarding column headers:

1) ‘Tag’ identifies the naming convention used in creation of XML.
2) ‘Key’ identifies the tags that are key to the validation/storage of data.
3) ‘Level of Change’ identifies the data that is allowed to change and at what level according to Change Flag.
4) ‘IN/OUT’ identifies the direction of data, IN for input and OUT for output with flags ‘N’ (NO) and ‘Y’ (YES).
5) ‘REQ/OPT/CON’ identifies if the data is required (REQ), optional (OPT), or conditional (CON). If optional or conditional and there is no data to report the tag is not used.
6) ‘Max Size’ is the maximum size of data allowed for that tag.
7) ‘Picture’ identifies the type of data expected.
8) ‘Description/Edit’ gives additional information

On an update, only the key fields that define the sections are required plus any changed fields or new sections.