

### **CNA** CENTRAL

## **Claim Information**

Claim Status/Loss Experience for the Agent User Guide

#### **Privacy Notice**

The collection, use and disposal of personal information are governed by federal and state privacy laws. Users of CNA Central shall comply with all state and federal laws regulating the privacy and security of personal information.



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This Agent user guide lists the steps to access specific claim details and loss information by account.

- Start at <u>www.cnacentral.com</u>
- Bookmark or Save the web site as a Favorite
- At the sign-in screen, enter your User ID and temporary password emailed to you from your CNA Central Security Administrator
- Click on Login button
- The system will prompt you to change your password.





### Claim Status/Loss Experience for the Agent

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From the CNA Central Home screen,

- Click on the Service My Accounts tab. Next, click on the Claim Information link.
  - (a) This link will take you to the Claim Information screen





### Claim Status/Loss Experience for the Agent

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From the Claim Information screen,

Click on the Claim Status/Loss Experience link
 This link will take you to the Account/Claim Search screen

			Welcome	<u>Home</u>   <u>Logout</u>	
<b>GNA</b>					
Classify Customer	Claim Information				
Work In Process	This section enables you to:				
▼ Service My Accounts	<ul> <li>Check the status of a claim</li> <li>Check customers' claims history</li> </ul>				
Policy Inquiry	<ul> <li>Search for a specific claim</li> <li>Report New Loss via the Internet</li> </ul>				
Electronic Document	-				
Claim Information	Commercial Insurance				
Massachusetts Auto Quote	Claim Status/ Loss Experience				
Data Retrieval	<u>Regional Claim Contact List</u> <u>Report New Loss via the Internet</u>				
► Reference Center	Find a CNA Workers' Compensation Network Provider	Welcome to Claim Information site at CNA Central			
► Support Tools					
► My Profile					
Contact Us					
	1-800-CNA-HELP (1-800-26	62-4357)			
	CNA is a registered trademark of CNA Fin Copyright © 2012 CNA, All rights	ancial Corporation. reserved.			
	Underwriting Companies Privacy Statement Terms	s of Service Product Disclaimer			
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Done				V musted sites	- 100 % ·



Claim Status/Loss Experience for the Agent

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### Account/Claim Search

You can access all claim related information from the Account/Claim Search screen.

If you are searching for details on a specific claim, choose Claim Status. If you are searching for claim detail for a specific account, choose Loss Experience. All claims will be available in Claim Status. Loss Experience will allow access to current plus four policy years of historical data.

Searching for claim information

- Go to Select Search Type and click on the dropdown button to the right
- Select either Claim Status or Loss Experience from the dropdown menu
- Input your search criteria in the appropriate fields
- Click Search
  - △ Any Search criteria except Claim Number will take you to the Account Index

Account / Claim Search		
Help CNA Central Technical Support Disclaimer and Copyrights	Select Search Type:       Claim Status         Account Name:       Claim Status         Account Number:       Claim Number:         Claim Number:       Claim Number:         Policy Number:       Search         Show All Accounts	△ Be sure to use all caps when searching by claim number!

Or, select your Search Type and click on the Show All Accounts button to see the Account Index screen.

From the Account Index screen,

- Click on the account name
  - △ The account link will take you to the Claim Index for Claim Status or Account Summary.

CNA		Help   New Search
	Account Index as of 04/24/09	
ACCOUNT SEARCH RESULTED IN 189 MATCHES. DISPLAYING R	ECORDS 1 - 100.	
Account Name	Account Address	Account Number
Z PLANTKTION PARK PROFESSIONAL BUILDING OWNERS ASSISTICATION	PO BOX 3823 BLUFFTON BC 29800	3014124310
ACE ELECTRIC REBUILDERS SUPPLY INC	814 PICKENS INCUSTRIAL OR. WARRETTA GA 30062	3003837415
ALLERANDER BERD PHOTOGRA	265 CABRINI BLXD # 4E NEW YORK MY 10040-	3000550050.746
ALLENANDER BERG PHOTOGRA	265 CABRINI BLXD # 4E NEW YORK NY 10040-	30007550750750750
AIMELUA PRIMICIO PHIOTO	120 E 76 ETREET #28 NEW VORK NY 10821	30007600007656

#### The New Search link on any screen will take you back to a fresh Account/Claim Search screen.



Claim Status/Loss Experience for the Agent

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### **Claim Status**

Let's start with the Claim Status search. Claim Status provides detailed information for a specific claim along with the claim specialist's non-confidential, claim file notes.

From the Claim Index for Claim Status screen,

- Click on a claim number
  - △ The link will take you to the Claim Status

Claim Index as af 05/02/00											
Claim Index as of 05/03/09											
Claim Index for Claim Status											
CLAIM SEARCH RESULTED IN 1031 MATCHES, DISPLAYING RECORDS 1 - 100.											
Claim Number	Loss Type	Loss Date	Claimant Name	Policy Number							
£1/10/07/01000	General Liability	04/30/09	HIOWNEREIRT, ARNTOPHETTA.	243794946227227							
£1/10/#1/E100	General Liability	04/30/09	JANGREARURI (SINAKANELEINN	2437/84945/27/27							
£1/56#13/100	General Liability	04/29/09	HIOLERE, HIRTRE	2427/848627/27							
£ 1/56 2/12/600	Work Comp	04/26/09	BHLLIMATELE AND BEAM	2083085382							
£.2/54.30000000	General Liability	04/26/09	CHRIEISLIGH0,A.J	243794946277277							
12/14/2012/2010	Work Comp	04/23/09	CALLARHAN(XICTORIA	24108/3410895-348(2)							
E-24546-07-257034D	Work Comp	04/22/09	TROUGHENSULEINDERFORM	24083408453482							
12/10/2013/2010	Work Comp	04/22/09	WILLER, STEPHEN	24108/3410895/348(2)							
£2/5014050000	Work Comp	04/21/09	TECOTL, WILLFREIDO	24083408453462							
12/14/17 42/100	General Liability	04/19/09	ALLVAREZ,20E	2437343462727							
En En (17771))	Work Comp	04/17/09	IN CERTON CO-WARMAN, INVERSITY OF	2083085382							
12540101-1010	General Liability	04/17/09	HUNTER, EUNICE	2437343462727							
E25000E5400	General Liability	04/16/09	MIC/C/OLIG/AINU, JOHINI	2427/8496227/27							
£ 255(b85) 10	Work Comp	04/14/09	EAN/TOE, JUAN	2083085382							
E.275768076600	Work Comp	04/14/09	WHILEON, THERTHAN	24083408453482							
E 2/5/(3467100)	General Liability	04/11/09	WURRPHAY, JOHN	2437/84962/727							

The Claim Index provides a four year history of all claims associated with the account by policy number.



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### Claim Status

From the Claim Status, you will be able to review the details of a claim. Claim Status is updated daily. There are four tabs in Claim Status, each with the same Claim Summary Header.

△ A Claim Status search by claim number will also get you here.

When viewing Claim Status information, you have two easy ways to contact the adjuster if you have questions.

• Click on the name link in the Claim Summary header to see the adjuster's telephone number and address. If you prefer to e-mail the adjuster, you can do it right here! Just click on the e-mail icon to create and send your e-mail.

Claim Number: Claimant Name: Policy Number: Date of Loss:	333234 Sally Si 123456 05/01/2	156 ( mith : 37890 1 2012 9	Current Status Report: SSN: Policy Year: Date of Notice to CNA:	06/01/2012 XXX-XX-1234 2012 05/01/2012	Status: Coverage: Adjuster:	Open Auto Tom Marsden 💌
Adjuster Notes	CI	aim Activities	Claim Characteristics	Financials		
FILTER OPTIONS		Note Date/Tim	e <u>Note Author</u>	Note 7	Topic	Note
Note Keyword:		07/15/2012	Tom Marsden	Recov	very/Subrogation	Recovery received from Ajax Company
Note Reyword.		06/10/2012	Tom Marsden	Gener	ral - CC	Invoices to be paid
		05/07/2012	Tom Marsden	Witne	SS	Placed call to Annie Walters to confirm her statement
Note Topic:		05/06/2012	Tom Marsden	Plan o	of Action	Received estimate from body shop and will be increasing reserve approvoriately
All	*	05/05/2012	Tom Marsden	Plan c	of Action	Working with autobody shop on estimate
Note Author:		05/03/2012	Tom Marsden	Witne	\$\$	Spoke to witness Annie Walters who gave statement of what she saw at the time of accident <u>more</u>
All	~	05/01/2012	Tom Marsden	Invest	tigation - CC	Contacted Rick Jackson at insured and claimants Sally and Joe
Note Date From:		<15				Besuits 1 - 7 of 7

# The default tab displayed when you select a claim link is Adjuster Notes (shown above). Use filter options on the left to locate notes related to specific topics, date ranges, or author.



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### Claim Status

• Click on the Claim Activities tab

The Claim Activities tab is where you can view information the adjuster has documented in structured fields rather than notes.

For incidents or claims with only one suffix, the information is available when you select this tab. For claims with two or more suffixes, information is available after you select a suffix. Just expand the section you would like to view.

CNA				
Claim Number:       33323456       Current Status Report:         Claimant Name:       Sally Smith       SSN:         Policy Number:       1234567890       Policy Year:         Date of Loss:       05/01/2012       Date of Notice to CNA:	<u>06/01/2012</u> XXX-XX-1234 2012 05/01/2012	Status: Coverage: Adjuster:	Open Auto <u>Tom Marsden</u> 📷	
Adjuster Notes     Claim Activities     Claim Characteristics       Select Suffix:     Auto BI, Sally Smith         Suffix Adjuster:     Patricia Wong	Financials			
<ul> <li>Contributing Factor</li> <li>Injury Details</li> <li>Treatment Details</li> <li>IME / Medical Experts</li> </ul>				
+ Wage Details     + Treatment Economic Losses     + Injury Reserve     + Involved Vehicle     + Third Party Vehicle Reserve Worksheet				
+ Property Non Auto     + Property Property General     + Third Party Property Reserve     + Med Pay Reserve				
+ Negotiations + Offers / Demands				



Claim Status/Loss Experience for the Agent

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### **Claim Status**

• Click on the Claim Characteristics tab.

In the Claim Characteristics tab, key claim data is available. You also select the suffix you would like to view on this tab to see data available for the specific suffix.

CNA					
Claim Number: 3 Claimant Name: S Policy Number: 1 Date of Loss: 0	3323456     Current Status       sally Smith     SSN:       234567890     Policy Year:       5/01/2012     Date of Notice 1	Report: 06/01/2012 XXX-XX-123 2012 to CNA: 05/01/2012	34 Status: Open Coverage: Auto Adjuster: <u>Tom M</u>	larsden 💌	
Adjuster Notes Select Suffix: Auto Claim	Claim Activities Claim Charac	teristics Financials		Claimant	
Accident State:	Illinois	Date of Loss:	05/01/2012	Claimant Name:	Sally Smith
Cattastrophe Code:		Date Suffix Closed:		Claimant Age:	48
Cattastrophe Code: Claim Number:	33323456	Date Suffix Closed: Date Suffix Reopened:		Claimant Age: Claimant DOB:	48 03/02/1963
Cattastrophe Code: Claim Number: Description of Loss:	33323456 Injuries include bruise to knee and elhow	Date Suffix Closed: Date Suffix Reopened: Notice to CNA:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH:	48 03/02/1963
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator:	33323456 Injuries include bruise to knee and elbow Service Centers	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender:	48 03/02/1963 Female
Cattastrophe Code: Claim Number: Description of Loss: ield Service Indicator: ncident Only Claim;	33323456 Injuries include bruise to knee and elbow Service Centers No	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status:	48 03/02/1963 Female Married
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: ncident Only Claim: nsured Name:	33323456 Injuries include bruise to knee and elbow Service Centers No ABC Company	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN:	48 03/02/1963 Female Married XXX-XX-1234
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: ncident Only Claim: nsured Name: Jurisdiction State:	33323456 Injuries include bruise to knee and elbow Service Centers No ABC Company Illinois	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service:	48 03/02/1963 Female Married XXX-XX-1234
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: ncident Only Claim: nsured Name: Jurisdiction State: Legal Status:	33323456 Injuries include bruise to knee and elbow Service Centers No ABC Company Illinois Non-Legal	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service: Occupation Class Codes (NCCD:	48 03/02/1963 Female Married XXX-XX-1234
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: ncident Only Claim: nsured Name: Jurisdiction State: Legal Status: Location Code:	33323456 Injuries include bruise to knee and elbow Service Centers No ABC Company Illinois Non-Legal 506	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service: Occupation Class Codes (NCCI): Occupation Description:	48 03/02/1963 Female Married XXX-XX-1234
Cattastrophe Code: Claim Number: Description of Loss: rield Service Indicator: Incident Only Claim: Insured Name: Iurisdiction State: Legal Status: Location Code: Medical Only Indicator:	33323456       Injuries include bruise to knee and elbow       Service Centers       No       ABC Company       Illinois       No-Legal       506       No	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service: Occupation Class Codes (NCC): Occupation Description:	48 03/02/1963 Female Married XXX-XX-1234
Cattastrophe Code: Claim Number: Description of Loss: ield Service Indicator: ncident Only Claim: nsured Name: urisdiction State: legal Status: location Code: fedical Only Indicator: fedical Rehab Code:	33323456       Injuries include bruise to knee and elbow       Service Centers       No       ABC Company       Illinois       Non-Legal       506       No       No	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service: Occupation Class Codes (NCC): Occupation Description: Driver	48 03/02/1963 Female Married XXX-XX-1234
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: Incident Only Claim: Incident Only Claim: Insured Name: Insured Name: Incident Only Claim: Incident Only Claim: Addical Only Indicator: Addical Rehab Code: Policy Number:	33323456       allow       Service Centers       No       ABC Company       Illinois       No-Legal       506       No       No       1234567890	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer: Loss Characteristics Insured Nature:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service: Occupation Class Codes (NCC): Occupation Description: Driver Driver Age:	48 03/02/1963 Female Married XXX-XX-1234 40
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: Incident Only Claim: Insured Name: Inrisdiction State: Legal Status: Location Code: Addical Only Indicator: Addical Rehab Code: Policy Number: Policy Year:	33323456       Injuries include bruise to knee and elbow       Service Centers       No       ABC Company       Illinois       Non-Legal       506       No       No       1234567890       2012	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer: Loss Characteristics Insured Nature: Insured Source:	05/01/2012	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service: Occupation Class Codes (NCC): Occupation Description: Driver Driver Age: Driver Name:	48 03/02/1963 Female Married XXX-XX-1234 40 George Williams
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: ncident Only Claim: nsured Name: Jurisdiction State: Legal Status: Location Code: Medical Only Indicator: Medical Rehab Code: Policy Number: Policy Year: Premium State:	<ul> <li>33323456</li> <li>Injuries include bruise to knee and elbow</li> <li>Service Centers</li> <li>No</li> <li>ABC Company</li> <li>Illinois</li> <li>Non-Legal</li> <li>506</li> <li>No</li> <li>1234567890</li> <li>2012</li> <li>Illinois</li> </ul>	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer: <b>Loss Characteristics</b> Insured Nature: Insured Source: Loss Body Part:	05/01/2012 Elbow, Knee	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Marital Status: Claimant SSN: Length of Service: Occupation Class Codes (NCC): Occupation Description: Driver Driver Age: Driver Name:	48 03/02/1963 Female Married XXX-XX-1234 40 George Williams
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: ncident Only Claim: nsured Name: Jurisdiction State: Legal Status: Location Code: Medical Only Indicator: Medical Rehab Code: Policy Number: Policy Year: Premium State: Salvage Indicator:	33323456       Injuries include bruise to knee and elbow       Service Centers       No       ABC Company       Illinois       Non-Legal       506       No       1234567890       2012       Illinois       No	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer: Loss Characteristics Insured Nature: Insured Source: Loss Body Part: Loss Incident Type:	05/01/2012 Elbow, Knee Rear ended other vehicle	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Gender: Claimant SSN: Claimant SSN: Length of Service: Occupation Class Codes (NCCI): Occupation Description: Driver Driver Age: Driver Name:	48 03/02/1963 Female Married XXX-XX-1234 40 George Williams
Cattastrophe Code: Claim Number: Description of Loss: Field Service Indicator: ncident Only Claim: nsured Name: Jurisdiction State: Legal Status: Legal Status: Legal Status: Legal Code: Vedical Only Indicator: Vedical Rehab Code: Policy Number: Policy Year: Premium State: Salvage Indicator: Secondary Injury Fund:	33323456       Injuries include bruise to knee and elbow       Service Centers       No       ABC Company       Illinois       Non-Legal       506       No       1234567890       2012       Illinois       No       No	Date Suffix Closed: Date Suffix Reopened: Notice to CNA: Reported to Employer: <b>Loss Characteristics</b> Insured Nature: Insured Source: Loss Body Part: Loss Incident Type: Loss Severity:	05/01/2012 Elbow, Knee Rear ended other vehicle	Claimant Age: Claimant DOB: Claimant DOH: Claimant Gender: Claimant Gender: Claimant SSN: Length of Service: Occupation Class Codes (NCCI): Occupation Description: Driver Driver Age: Driver Name:	48 03/02/1963 Female Married XXX-XX-1234 40 George Williams



Claim Status/Loss Experience for the Agent

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### Claim Status

• Click on the Financials tab.

In the Financials tab you can view financial transactions for a claim. These include reserve transactions and payments. You can view all the transactions for a claim, or select a claimant and see only the transactions for the claimant.

Filter Options are available if you want to view specific transactions only such as by date range, coverage, or transaction type.

Claim Numbe Claimant Nam Policy Numbe Date of Loss:	r: 333234 ne: Sally Sr er: 123456 05/01/2	156 Curri nith SSN: 17890 Polic 012 Date	ent Status Report: y Year: of Notice to CNA:	06/01/2012 XXX-XX-1234 2012 05/01/2012	Status: Coverage: Adjuster:	Open Auto Tom Marsden 🔀			
Adjuster No	Claimant	aim Activities C	laim Characteristics Paid	Financials Paid Expense	Expense Reserve	Outstanding Reserve	Total Incurred	Subrogation	Salvag
Summary	All	~	\$800.00	\$10.00	\$0	\$500	<b>\$</b> 1,310.00	\$0.00	\$200.0
	MS	Transaction Date	Claimant	Coverage Desc	Transaction Type	Payee	Description		Amour
		05/30/2012	Joe Smith	Property Damage	Final Recovery		Salvage		\$200.0
ILTER OPTIC		05/15/2012	Joe Smith	Property Damage	Partial Payment	Fred's Auto Shop	Final Payment		\$1,000.0
ransaction D	ate mon:								-\$500.0
ransaction D		05/15/2012	Joe Smith	Property Damage	Reserve Adjustment				
ransaction D	ate	05/15/2012 05/15/2012	Joe Smith Sally Smith	Property Damage Bodily Injury	Reserve Adjustment Expense Payment	Chicago Police Department	Police Report		\$10.0
Transaction D Transaction D Through:	ate	05/15/2012 05/15/2012 05/01/2012	Joe Smith Sally Smith Joe Smith	Property Damage Bodily Injury Property Damage	Reserve Adjustment Expense Payment Initial Reserve	Chicago Police Department	Police Report		\$10.0 \$500.0
Transaction D Transaction D Through:	ate	05/15/2012 05/15/2012 05/01/2012 05/01/2012	Joe Smith Sally Smith Joe Smith Sally Smith	Property Damage Bodily Injury Property Damage Bodily Injury	Reserve Adjustment Expense Payment Initial Reserve Initial Reserve	Chicago Police Department	Police Report		\$10.0 \$500.0 \$500.0
ransaction D ransaction D hrough:	ate	05/15/2012 05/15/2012 05/01/2012 05/01/2012	Joe Smith Sally Smith Joe Smith Sally Smith	Property Damage Bodily Injury Property Damage Bodily Injury	Reserve Adjustment Expense Payment Initial Reserve Initial Reserve	Chicago Police Department	Police Report		\$10.0 \$500.0 \$500.0
ransaction D ransaction D hrough: Coverage Coc	ate	05/15/2012 05/15/2012 05/01/2012 05/01/2012	Joe Smith Sally Smith Joe Smith Sally Smith	Property Damage Bodily Injury Property Damage Bodily Injury	Reserve Adjustment Expense Payment Initial Reserve Initial Reserve	Chicago Police Department	Police Report		\$10.0 \$500.0 \$500.0
ransaction D ransaction D hrough: Coverage Coc All Record Type:	ate	05/15/2012 05/15/2012 05/01/2012 05/01/2012	Joe Smith Sally Smith Joe Smith Sally Smith	Property Damage Bodily Injury Property Damage Bodily Injury	Reserve Adjustment Expense Payment Initial Reserve Initial Reserve	Chicago Police Department	Police Report		\$10.0 \$500.0 \$500.0

# All File Notes and Claim data are updated daily from the CNA claim applications. All financial data is updated the following day.



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### **Loss Experience**

The Loss Experience screen provides the account summary of claim information by policy including Premium and Loss data. The data history is limited to current plus four policy years.

From the Account/Claim Search screen, any Loss Experience search will take you to the Account Summary screen.

- Click on the account name
  - △ The link will take you to the Account Summary.

<b>CN</b> A										Help   N	ew Search  Reports	s & Downloads		
	Account				Servic	e Information				Agency				
J & T NIKNAGENENT, I RODO BIOSE RICAD DORWALLE GA 30340	2	Branch Office Branch Code Atlanta				AV. S. PHANES 2625 CUMBE ATLANTS, GO PHYMAY Photo	W. E. PHARRE & COMPANY 3425 CUMBERLAND BLXD, STE 1100 PO BOX 725368 ATLANTS, 60 21138 Primary Producer W. E. PHARRE & COMPANY							
Account Summary as	of 04/24/09													
	Policy	Premium Summar	У				P	olicy Loss Summ	ary (in dollars)					
Product Group	Policy Number	Effective Date	Written Premium Earn	ned Premium	# of Claims	Paid Losses	Paid Expenses	Reserves	Net Incurred	Deductible	Gross Incurred	Loss Ratio%		
Package	2087009240	11/01/08	79,908	39,629								0		
Package	2017101240	11/01/07	65,920	65,920	9	19,097	116	4,074	23,287	-2,000	25,287	35		
Package	2017101240	11/01/06	94,129	94,129	12	76,749	854		77,603	-7,000	84,603	82		
Package	2017101240	11/01/05	92,049	92,049	4	9,390			9,390	-2,000	11,390	10		
Auto	2012/1019/2/14	11/01/08	86,029	42,593	3	446	72	38,969	39,487	-4,300	43,787	93		
Auto	2012/1019/2/14	11/01/07	95,366	95,366								0		
Auto	2012/01/254	11/01/06	117,092	117,092	5	21,239	492	1,049	22,780	-8,468	31,247	19		
Auto	2012/1010/2/14	11/01/05	145,274	145,274	5	21,516	1,113		22,629	-5,294	27,923	16		
Work Comp	2011/2011/2011	11/01/08	151,928	75,340	3		947	3,321	4,268	-4,000	8,268	6		
Work Comp	2016/2019/2019	11/01/07	153,470	153,470	11	41,953	18,530	101,146	161,629	-24,373	186,002	105		
Work Comp	2016/2019/2011	11/01/06	167,631	167,631	6	15,206	19,393	11,622	46,222	-9,018	55,240	28		
Work Comp	2012/1019/201	11/01/05	159,041	159,041	6	57,838	10,487	18,753	87,078	-13,818	100,896	55		
Umbrella	2017003271	11/01/08	16,931	8,396								0		
Umbrella	2017003271	11/01/07	19,250	19,250								0		
Umbrella	2087309271	11/01/06	18,140	18,140								0		
Umbrella	2012/1012/21	11/01/05	20,322	20,322								0		

The Account Summary screen provides data by Product group in Effective Date order.

### From the Account Summary,

- Click on any policy number
  - The link will take you to the Policy Detail. The Policy Detail provides all claims associated with the
     policy number by policy period.

CNA										tiek I tiew lies	nti Repota & D	242240	
11	Account	1			Service Infe	residen			- ili	Asses	Ye Thursday and		
A Temperiters Sills Alles Alles Connella Sa Si	E.M.		Account No. (100000000)		Branch (	ATLE IN COLUMN	Draved 31	Cade D	No. 1, Provide a la Regis Completion, Alfonnicio, del 201	1087-002 440-00-078 11 108 108 2. Proddit 2.0	a Politica T(5) California		The Reports & Downloads link
Pulicy Dotat as of	042469												will allow access
Construction -	Policy Pre	miken Summary					Polic	y Loss Sianena	ry (in dollars)				
Product Group	Palicy Number 11	Rective Date: Wild	tion Promilians Earned	Premier F	of Charrie Pa	id Losses Paid	Cepenses B	eserves I	Not Incurred D	eductible Gras	Number of Long	a Ruters	o the data
Package	2007000200	11/01/08	79,908	39,629								0	rovided in the
Package	2007969240	11/01/07	65,920	65,920		19,097	116	4,074	22,287	-2,000	25,287	36	novided in the
Package	2107503(240	11/01/06	\$4,129	94,129	12	26,749	854		77,803	-7,000	84,603	82	Account
Package	2007003240	11/01/05	92,049	82,049	4	9,390			9,390	-2,000	11,290	10	lecount
					Individual Cir	am Analysis						- I S	summary. Policy
Claim tuander	Charrowd Norte	Status	Lanse Date		eftesses	Paid Expension		1941	Net becamed	Circles 184e	Gross b	wine read	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
212111111	MOLA, TUN, TAMANA Laudium, Code, II	Cist	10/25/08									1	Jetail and Claim
12478742-11	JAND T INVIACEMENT /	Cited	07/06/08		1,666		116		12	82		1,782	Status screens in
2020.2	JANO T INVADEMENT I Location Evaluation	Cled	67/06/08									I I	pre-formatted
2478228.51	JAND T MINADEMENTS	Cited	07/06/08									r	eports you can
CHRISTIALL	MCALER,MATTE	Cise	85/26/08		2,308				2,3	60	1,000	3,388	view, print or
62478718.51	J AND T MANAGEMENT I	Clad	87/07/08									i c	lownload.
12402585.11	TOWNSEND, SHIPLEY	Cisd	06/27/08		7,800				7,1	00		7,800	
E2015649-11	BYNERLEON .	Open	10/23/08					4.074	4.0	174		4.074	



### Claim Status/Loss Experience for the Agent

**CNA** CENTRAL

#### Loss Experience

Reports and Downloads screen provides access to formatted reports in PDF version to be viewed online or printed. The reports provide a summary of data available on the Account Summary, Policy Detail and Claim Status screens. The Agency Copy of the reports includes Premium and Loss data whereas the Customer Copy of the reports does not include this data. You can also download this unformatted data via Microsoft Excel or Lotus 1-2-3. The download feature will allow you to analyze the data using all of the Excel and Lotus capabilities.



#### $\bigcirc$ All formatted reports will print on 8.5 x 11 size paper.



**CNA** CENTRAL

#### Loss Experience

#### Account summary

The Account Summary report provides the claim financial summary by Product Group (policy type) and effective dates for an account.

CN									AC A	SENCY LO	SS REPOR SUMMARY	(T
		Run Date 6/2/20	09		As Of	05/15/2009			Current Policy Pe	rlod 02/19/20	006 - 02/19	/2007
	Account				Service	Information				Agen	су	
APPERIATE DATA	A STREET ADDRESS	ANT TEL:   18861	Account I	No CAM Pro	gram Bran	ch Office Bra	nch Code	Phone No	NUMBER OF COMMON	WERE AND A	1001-00-001	
BURNING STREET	BLMD IL I	10.00000	10011-000000		c	hicago	010		CONTRACTOR	NUR. AND APPE	L BREAK	
Product	Policy	olicy Premium	Summary	Erroad	Number	Paid	Paid	Policy Loss S	ummary		Gross	Lore
Group	Number	Date	Premium	Premium	Of Claims	Losses	Expenses	Reserve	Incurred	Deductible	Incurred	Ratio %
Auto	20711000	02/19/2006	160,480	160,480	6	8,617	220		8,837	-10,916	19,753	6
Auto	207110808	02/19/2005	193,450	193,450	11	37,949	572	51,477	89,998	-590	90,588	47
Auto	20710000	02/19/2004	210,675	210,675	14	719,907	60,464		780,371	-3,078	783,449	370
Package	an magar	02/19/2006	84,896	84,896	0							
Package	anneser.	02/19/2005	79,950	79,950	0							
Package	an where	02/19/2004	74,184	74,184	0							
Work Comp	201100128	02/19/2006	702,696	702,696	14	46,324	14,732		61,055	-42,610	103,666	9
Work Comp	201100120	02/19/2005	700,480	700,480	12	304,123	28,218	20,808	353,149	-15,378	368,526	50
Work Comp	207100128	02/19/2004	545,424	545,424	18	99,890	23,259	35,962	159,111	-18,944	178,055	29
Umbrella	3871 0862397	02/19/2006	19,431	19,431	0							
Umbrella	38710863397	02/19/2005	19,191	19,191	0							
Auto	MTMORNED.	02/19/2004	0	0	1		27		27	-2,034	2,061	0
Account	t Totals		2,790,857	2,790,857	76	1,216,810	127,492	108,247	1,452,549	-93,549	1,546,098	



Claim Status/Loss Experience for the Agent

**CNA** CENTRAL

#### Loss Experience

**Policy Detail** 

Policy Detail reports under the Loss Experience reports heading are subtotaled by Product Group (policy) and effective periods. The Policy Detail reports under the Loss Experience Reports Subtotaled by Location Codes provide claim history by location codes then Product groups and effective periods. These reports also provide high level facts of individual claims.

CA	//										AGEN PC	CY LOSS I	REPORT	
<i>2</i>			Run Date: 0	6/02/2009		As	Of: 05/29/2009			Current Po	olicy Period: 02/	19/2006 - 02/1	9/2007	
		Account				Se	ervice Information	11			P	gency		
INTERNATIONAL OF	BORT BAR	and the second			Account	No Policy No	Audit Indicator Bra	nch Office	Phone No	TAR OF A WORK	Aler - 19- 1944			
					and to de la	a 227-086	A	Chicago		Police Street	e darres ague (diffact)			
	_	Po	licy Premi	um Summary	_				Policy Los	s Summary		_	_	
Product Group	CAM Program	Effe Di	ctive ate	Exp Date	Written Prem	Earned Prem C	# Paid laims Indemnity	Paid Losses	Paid Expenses	Reserve I	Net Incurred D	eductible	Gross Incurred	Loss Ratio %
Auto		02/19	v2006	02/19/2007	160,4	480 160,480	6	8,617	220		8,837	-10,916	19,753	6
Auto		02/19	V2005	02/19/2006	193,4	450 193,450	11	37,949	572	51,477	89,998	-590	90,588	47
Auto		02/18	/2004	02/18/2005	210,0	0/0 210,0/0	14 dual Claim Analysis	/19,90/	00,404		780,371	-0,010	100,446	370
Claim Cla	aimant	Loss	Report	Notice	Location		dual chain ranaysis	1	Paid	Paid	1	Catastrope	Open/	Adjust
Number N	Name	Date	Date	Date	Code	Claimant Source	Insured Source		Losse	Expenses	i	Code	Closed	Code
Driver Name	Descrip	tion Of Los	s			Accident Type	Claimant Nature	Insured Nature	Reserv	e Incurred	Deductible	Gross	Claim	Office
EIIIMANNEN ANTER	REALITY .	2/2006		11/22/2006	UNKNOWN	PASSENGER CAR	PASSENGER CAR						С	LS
NAN, THENEL MAPT INCOME	10000, 7010 100340,00 (0)	OV MA	DE AND I	LLEGAL UTUR	N. OV ST	NOT OTHERWISE CLASSIFIED	PROPERTY DAMAGE ONLY	COLLISION OF	NLY					
CONTRACTOR ANTE	REAL PROCESSION	2/2006		11/22/2008	UNKNOWN	PASSENGER CAR	PASSENGER CAR						с	LS
NALTERAL ARE	WHE THIS	OV MA	DE AND I	LLEGAL UTUR	N. OV ST	NOT OTHERWISE CLASSIFIED	PROPERTY DAMAGE ONLY	COLLISION ON	NLY					
EDMITHEN ADJA	LARS	3/2006		08/14/2006	UNKNOWN	PASSENGER CAR	SPORT UTILITY VEHICL	E	1,5	10 65			с	C1
HELEFISCHER NUCES	04/1764	IV BAC	KING OUT	OF PARKING	SPACE.	BACKED INTO CLAIMANT	PROPERTY DAMAGE ONLY	COLLISION O	NLY	1,575		1,575		
COMPTON ADA	LARS	3/2006		08/14/2006	UNKNOWN	PASSENGER CAR	SPORT UTILITY VEHICL	E					с	C1
TILLIOTIDON, JA.	ON THE	IV BAC	KING OUT	OF PARKING	SPACE.	BACKED INTO CLAIMANT	PROPERTY DAMAGE ONLY	COLLISION ON	NLY					

## Depending on the amount of claim data being presented, the reports and downloads may take longer than usual to complete.

If you have any questions regarding any information on Claim Status/Loss Experience, please contact your Branch Underwriter or your Client Services Manager. For technical assistance, please contact the CNA Central Help Desk at 1-800-CNA-HELP (1-800-262-4357).