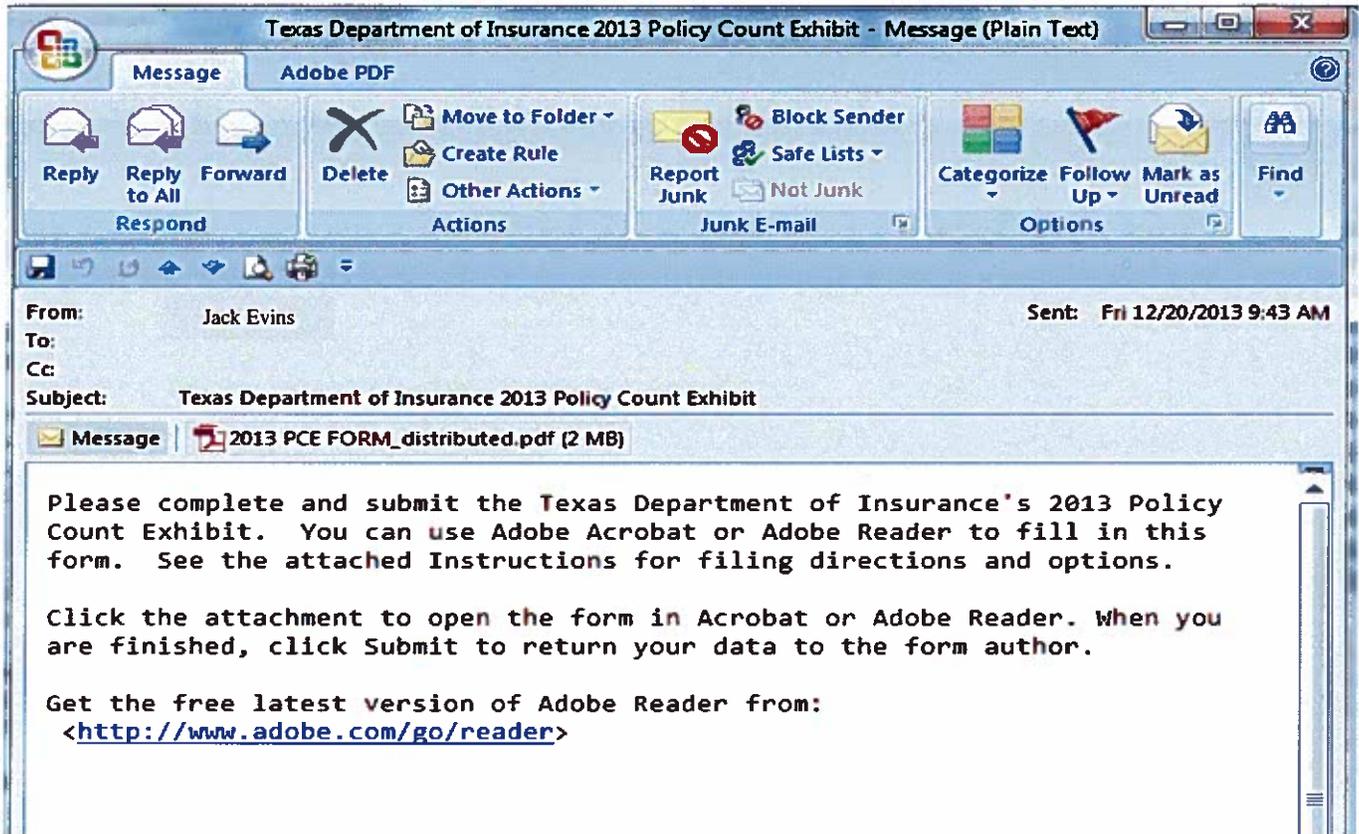


**Texas Department of Insurance
Policy Count Exhibit Submittal Instructions
January 2014**

IMPORTANT: Please read the instructions below **thoroughly** prior to completing the attached Texas Department of Insurance 2013 Texas Policy Count Exhibit - Adobe Acrobat interactive form.

1. You have received an email inviting you to complete the 2013 Policy count Exhibit (form "2013 PCE FORM_distributed.pdf"), stating you can use Adobe Acrobat or Adobe Reader to fill in this form.

Please see example below:



2. You may submit your filing in any one of the following ways:

Online, as further described below

Or **fax** it to: Jack Evins at 512-305-7463 (Fax)

Or **mail** it to: Jack Evins

Consumer Protection MC 111-1A

Texas Department of Insurance

P O Box 149104

Austin TX 78714-9104

Texas Department of Insurance
Policy Count Exhibit Submittal Instructions
January 2014

- **Important:** If you file online or by fax, please do not mail a paper copy of the filing.
 - Questions? Contact Jack Evins via e-mail Jack.Evins@tdi.texas.gov or call him at 512-305-8194.
3. If you already have Acrobat or Adobe Reader, click on the attachment to open the form in Acrobat or Adobe Reader.
 4. If you do not have Adobe Reader, you can click on the following link to download the free latest version of Adobe Reader: <http://www.adobe.com/go/reader>
 5. Once you have opened the form you can begin to fill in the required fields. Required fields are outlined in red on the form.
 6. The following fields are required fields:
 - **TDI # - Enter numerical values only.** If you do not know your company's TDI number, please look it up on TDI's website at https://apps.tdi.state.tx.us/pcci/pcci_search.jsp.
 - Company Name
 - Address:
 - City:
 - State
 - TX
 - Zip Code – **Enter zip code values only**
 - Lines of coverage – Enter numerical values in each blank for each line of coverage (see “Definitions,” below). Do not include commas (,) for values greater than 999. Enter a zero (0) if the company had no policies/contracts/certificates in force covering Texas risks as of December 31, 2012. **Note:** If your company had no coverages of any type in force in Texas as of December 31, 2013, you may instead check the “No coverages in force in Texas as of December 31, 2013” box indicating that rather than entering a zero (0) value for each line.
 - Special instructions for **TITLE** insurers: Enter the total number of policies written during the preceding five calendar years (2003-2013). This figure is required in lieu of a count of policies in force as of December 31, 2013.
 - Date
 - First Name
 - Last Name
 - Title
 - Area Code – **Enter numerical values only**
 - Phone Number – **Enter numerical values as follows: 9999999**
 - E-Mail Address
 - TDI may release my e-mail address in response to a public information request? Choose “**Do Not Agree**” or “**Agree**”

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DEFINITIONS

Lines of Coverage

- *Life* - all forms of coverage on the life of a person (whole, universal, term, credit, etc.).
- *Annuities* - fixed and variable annuities.
- *Medicare Supplement/Select* - all contracts providing health benefits and/or services to fill the gaps in the protection provided by the Medicare program.
- *All other Health and Accident* - all contracts providing or arranging for health care services or covering or indemnifying health care expenses (indemnity/insurance), including disability, credit health/accident/disability, HMO and other managed care contracts, and long-term care contracts, other than Medicare Supplement or Medicare Select.
- *Personal Motor Vehicle* - all personal automobile policies covering any type of vehicle, including policies written by assignment through the Texas Automobile Insurance Plan Association (TAIPA).
- *Commercial Motor Vehicle* - all motor vehicle coverages other than those issued under personal automobile policies, including policies written by assignment through the Texas Automobile Insurance Plan Association (TAIPA).
- *Dwelling* - all forms of homeowners, renters (tenant), and dwelling fire coverage.
- *Workers' Compensation* - policies issued to employers and which indemnify employees for health care expenses and/or their loss of income, resulting from injuries sustained within the course and scope of their employment.
- *Other Property, Casualty, Surety and/or Title* - all captioned lines, including credit property and credit involuntary unemployment, and farmowners and ranchowners. Exclude motor vehicle, dwelling, and workers' compensation, as described above.

Policies, Contracts and Certificates

- *Individual Policies/Contracts* - all policies and contracts not issued to or through a group.
 - *Group Contracts* (or "master contracts") - all group policies or contracts issued to groups having members (or certificate-holders) located in Texas.
 - *Group Certificates* - the number of Texas members (or, for HMOs, "subscribers") covered under any group contract.
7. Once you have completed filling in the form, you have the option to print the form you have completed, by clicking on the "Print" button located at the bottom of the form. If you have made a mistake and want to completely begin again, you may click on the "Clear Form" button, and this button will completely clear the form.
 8. When you are ready to submit your form, please click on the "Submit Form" button located in the top right corner of the Adobe Form Tool Bar. See example on page 4.

Texas Department of Insurance Policy Count Exhibit Submittal Instructions January 2014

Example:



9. Once you have clicked on the "Submit Form" button, you will receive a "Send Form" pop-up.
10. Enter your Email Address, your Full Name, and click "Send".

A screenshot of a "Send Form" dialog box. The dialog has a title bar with "Send Form" and a close button. On the left side, there is a preview of the form being submitted. On the right side, the following information is displayed:

To: Jack.Evins@tdi.texas.gov
Subject: 2013 Policy Count Exhibit Submission
Attachment: 2013 PCE FORM_distributed (2).pdf

Below this, there are two input fields:

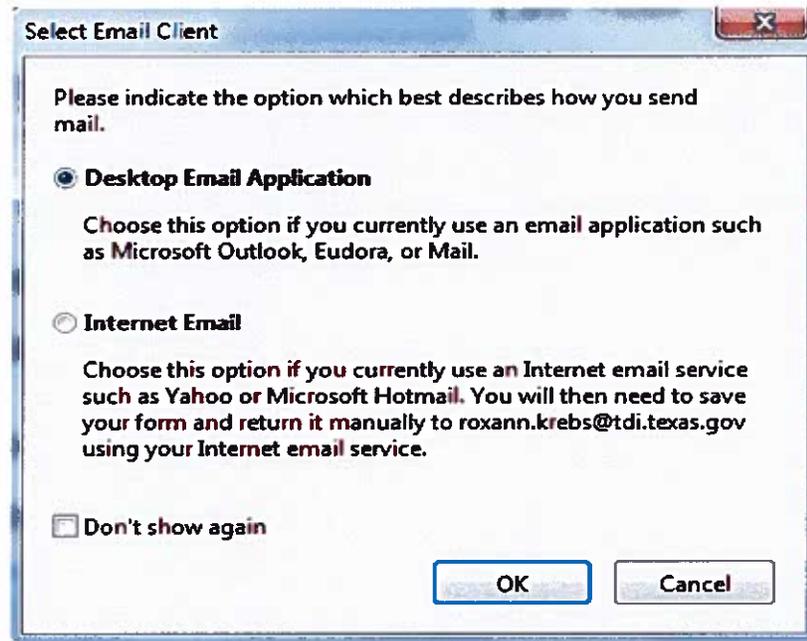
From:
Email Address:

Full Name:

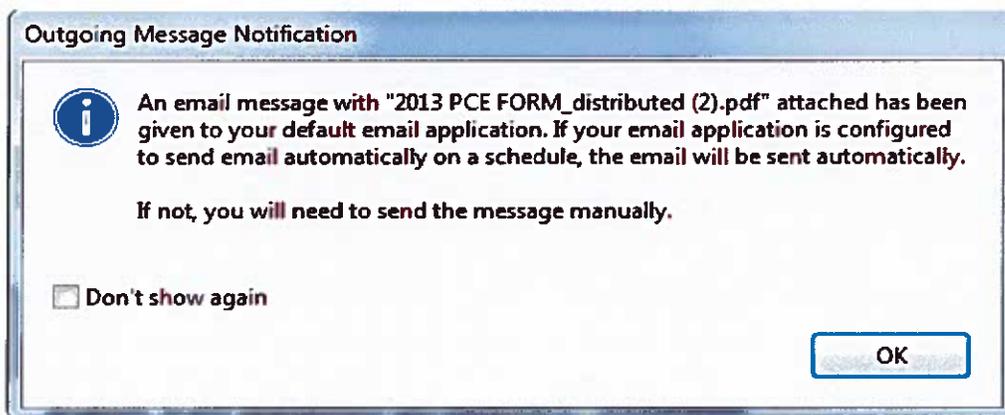
At the bottom left, there is a checkbox labeled "Remember me". Below the input fields, there is a lightbulb icon and a message: "To save your email address and name in Acrobat's Identity preferences, check Remember me. Do not check this box if you are using a public computer." At the bottom right, there are two buttons: "Send" and "Cancel".

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11. You will receive a second pop-up, "Select Email Client," requesting you to indicate the option which best describes how you send mail. Choose the "Desktop Email Application" option and click "OK".



12. A third pop-up will appear "Outgoing Message Notification"; click "OK".



13. Click on the on the red "X" box located in the right top corner of your form to close your form. You will receive an Adobe Acrobat prompt asking you if you would like to save the changes to the '2013 PCE FORM_distributed(2).pdf' before closing. If you want to save the form, save it to a directory of your choice. If you do not want to save the form, click "No" and the form will close.

Thank you for your help with submitting the 2013 Policy Count Exhibit.