NAIC (National Association of Insurance Commissioners) ID Number: This is a unique identifier assigned to each insurance company by the National Association of Insurance Commissioners. It serves as a way to track and identify individual insurance companies within the insurance regulatory system.

Company Name: This refers to the name of the insurance company being discussed in the dataset. It's the official name under which the company operates and is registered.

Ratio: The Complaint Ratio, as explained earlier, is the quotient obtained by dividing the number of upheld complaints by the average of a company's current and prior year premiums written directly in New York State (NYS). It's a metric used to evaluate how effectively an insurance company handles customer complaints relative to the premiums it collects.

Upheld Complaints: These are complaint cases filed against the insurance company that were investigated and found to have merit or validity. These complaints have been upheld, meaning the insurance company was determined to be at fault or responsible for the issue raised by the customer.

Question of Fact Complaints: These are complaint cases where there is a dispute over the facts of the situation. It indicates cases where further investigation or clarification is needed to determine whether the complaint is valid or not.

Not Upheld Complaints: These are complaint cases that were not found to have merit or validity upon investigation. They may have been withdrawn by the complainant or dismissed due to lack of evidence or justification.

Total Complaints: This represents the total number of complaints filed against the insurance company, including upheld complaints, question of fact complaints, and not upheld complaints. It's the sum of all complaint categories.

Premiums Written (in Millions): This refers to the average of a company's current and prior year premiums written directly in New York State, measured in millions of dollars. Premiums written represent the total amount of premiums collected by the insurance company from policyholders within a given period.

Rank: This is a numerical value corresponding to the position of the insurance company on a report listing. The rank is typically based on certain criteria such as the Complaint Ratio or total number of complaints.

Filing Year: This represents the year in which the complaint filing was closed. It indicates the timeframe during which the complaints were resolved or adjudicated.

premiums -In insurance, premiums refer to the payments made by policyholders to insurance companies in exchange for coverage and protection against specified risks. Premiums are typically paid on a regular basis, such as monthly, quarterly, or annually, depending on the terms of the insurance policy.