

**Markel Corporation**

**Cyber Data Capture Standard**

Version 0.8

**Contact Information:**

Data Governance Council

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# Purpose

To establish a corporate standard for identifying the nature of Cyber exposure onMarkel insurance (reinsurer is out of scope at this time) policies (e.g. Affirmative, Excluded, Silent). Additionally, for those policies where Cyber exposure is Affirmative or Silent, to identify and standardize the minimum Cyber-related data required on policy and related claims.

Prior to now, Cyber exposure, when identified, was captured and accumulated using a number of methods and processes, many of which were manual processes using spreadsheets and adhoc queries. Some of the exposure was purely an estimate based on assumptions which may or may not be true. Beginning in 2016, Markel Senior Leadership began requiring high-level cyber data. Soon after, reinsurers, regulators and rating agencies began requesting a level of data that was unavailable in any of our systems or processes. Recent research conducted by ISO has shown that the insurance marketplace has been writing more individible combinations of Cyber coverage and resulted in ISO creating a new Line of Business for Cyber. Feedback indicates a need for more detailed information to be collected statistically in order to identify and segregate, for analysis, rate making, reporting, etc. the many variations of Cyber Coverage.

The Markel Cyber Data Capture Standard is a compilation of requests for data coming from reinsurers, regulators, insurance rating agencies ( ISO and Lloyds) and credit rating agencies (Moody’s, S&P).

*Note: reference the [Corporate Business Glossary](C:\\Informatica\\BusinessGlossaryDesktop\\HtmlPagesFolder\\filename1.html) (located on the MyMarkel Data Governance page) for definitions of terms/abbreviations.*

# Accountability / Responsibility

Associates should use this Standard as a reference when developing new systems and processes. The data attributes below, where missing from current systems, must be implemented which will require a number of enhancements to our internal systems, processes and workflows. This document has been written from the perspective of Direct Insurance Only. Global Re requirements have not yet been analyzed, and therefore out of scope from this standard until further analysis of the Global Re cyber reporting requirements can be identified.

This Standard has been established per the input of the Cyber Working Group, a number of Markel Associates representing reinsurance, actuarial, underwriting and claims who also reside on the Global Cyber Committee (GC3). Items highlighted in Green have been discussed with the working group. The DGC is responsible for reviewing and updating these Standards as described below.

# Cyber Data Element Minimum Requirements

The Data Governance Council approved definitions for many of the elements below can be found in the [Markel Business Glossary.](C:\\Informatica\\BusinessGlossaryDesktop\\HtmlPagesFolder\\filename1.html)

The minimum data elements have been identified based on a criticality level which was determined by the number of requestors for a particular element and refined through a review of the elements by internal Markel stakeholders. Many of the elements are already identified in our systems, since they represent general data required on a Policy (e.g. Writing Company) or data required for another product line or type of business. However, there are a number of elements specific to Cyber, and these will be noted in the table below.

General Organization and Terms

Policy Level

Unit - (LOBIO) Line of Business / Insured Object

Layer

Coverage

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Data Type** | **Data Element Name** | **Data Element Description** | **Cyber Specific (Y or N)** | |
| Character | Policy, Deal or Contract # (Policy) | The alpha-numeric business number that identifies the insurance contract (Policy) to which all subsequent data values. Appears on the declaration page to uniquely identify the policy. | N | |
| Character | New/Renewal Policy Indicator | Indicates if policy is new or renewal business to Markel (see Markel New Renewal Code in the Markel Business Glossary for specifics) Valid Values N or R | N | |
| Date | Policy Effective Date | The named date on which the Coverage[s](https://va1-pcorapp410:8086/analyst/Coverage" \t "_blank) for the policy become In-force. Date format of yyyy-mm-dd. | N | |
| Date | Policy Expiration Date | The named date on which the Coverage[s](https://va1-pcorapp410:8086/analyst/Coverage" \t "_blank) for the policy cease to be In-force. Date format of yyyy-mm-dd. | N | |
| Character | Named Insured | Any person, corporation, firm, partnership, or other entity specifically designated by name as the insured(s) in an insurance policy | N | |
| Character | Originating System | The code designating the system of record for the policy and to which the associated legacy values are relevant. | N | |
| Character | UW Team/Dept/Branch Code | The legacy system code ~~and description~~ that identifies the team or subset of people who underwrote the policy. | N | |
| Character | Insured ID/Risk ID-Future State | A common code to connect a named insured across products and systems. This is a future state item to be considered once we have a master data management solution in-place. . TD: for now we want the Legacy Insured ID - identifier in the legacy system for the Named Insured. | N | |
| Character | Insured ID/Risk ID –current State | A common code to connect a named insured across products and systems. For current state, use the Legacy System Insured ID for the Named Insured which will not be common across all products and systems. | N | |
| Character | Country of Domicile | The Country where the insured headquarters is domiciled (registered). See Appendix F for a list of Valid Values. | N | |
| Character | Policy State | Policy State is the two digit USPS State Code that represents the State (Province if Canada) with the predominant Exposure[s](https://va1-pcorapp410:8086/analyst/Exposure" \t "_blank) on a policy. For all other Countries leave blank. See Appendix E for a list of Valid Values. | N | |
| Character | Currency of Policy | The primary currency of the policy. Even multi-currency policies have a primary currency. See Appendix G for a list of Valid Values. | N | |
| Character | Primary Excess Type | Indicates if the policy is written by Markel on a primary or excess basis. Code values:  P – Primary  X– Excess  U – Unknown | N | |
| Character | Assumed Indicator | Indicates if the policy is written direct with the insured on Markel legal entity paper, or if the policy is actually accounted for as inward reinsurance business. Valid values are:  Y-Assumed  N-Direct  (note for purposes of Cyber reporting, only include Direct or Assumed) | N | |
| Character | Cyber Type: | Indicates the method used to manage Cyber exposure on a policy.Valid Values are:  A - Stand Alone  B - Blended  E - Endorsement  X - Excluded  S – Silent  U – Unknown | Y | |
| Character | Writing Company (Legal Entity) | The Markel owned insurance company on whose paper the policy is written as indicated by the company's name on the declarations page of the policy, facultative certificate or treaty. See Appendix I for Valid Values | N | |
| Character | Industry Code | A code and description that represents the primary industry of the policy. It can be a conformed code such as NAICS, or a non-conformed code such as SIC or proprietary codes reflected for this data element. | N | |
| Character | Industry Description | Descriptor for the Industry Code above | N | |
| Character | Industry Code Type | i.e NAICS, SIC, NCCI, Proprietary | N | |
| Character | Coverage Trigger Type | Coverage Type Trigger which defines the general type of event that must occur in order for a claim to be considered for coverage under a policy. Valid Values:  O - Occurrence  C - Claim Made  R - Claim Made & Reported  X- Reported Only | N | |
| Date | Retro Date if Claims Made Policy or Claims Made & Reported Policy | A date, equal or prior to the coverage effective date that indicates the earliest date of loss for which coverage is provided. Retro Date may be the same as the Policy Effective Date. Date format of yyyy-mm-dd | N | |
| Character | Cyber Coverage Beneficiary | Indicates whether the specific cyber coverage is a first party, or third party coverage. First party directly benefits and is paid to the named insured, and third party is a coverage paid on behalf of the named insured. This can be derived from the conformed coverage code. | Y | |
| Character | Cyber Coverage Code | Code that relates to what Markel classifies as coverage (high correlation to the ISO Insuring Agreement Code). Each requestor has their own sets of coverage or insuring agreement codes where we will need to build out conversion maps taking our own internal code and mapping it to the requestors code. See Appendix A for Valid Values | Y | |
| Number | Policy Aggregate Limit Amount | Maximum amount that will be paid out on all claims and products over the course of the given policy period (Policy Effective Date to Policy Expiration Date). If there is no Policy Aggregate Limit, leave blank. | N | |
| Number | Policy Occurrence or claims made Limit Amount | Maximum amount that will be paid out for one claim occurrence on the policy. If there is no Policy Occurrence Limit, leave blank. | N | |
| Date | Transaction Effective Date | The calendar date on which a recorded policy transaction goes into effect (e.g. recorded into the system records). Date format of yyyy-mm-dd. | N | |
| Character | Layer Product Line Code | An internal Markel PL2 (Product Line Detail) code to identify the product where cyber exposure exists for a specific Layer of a policy Contact [DGC@MarkelCorp.com](mailto:DGC@MarkelCorp.com) for a current list of Valid Values. | N | |
| Number | Layer Participation Ratio | Identifies the proportional basis for which an Insurer is sharing in premium and losses within a Layer. This value is the ratio, so 50% would be “.5”, 75% = “.75”. Typically, a Layer would default to 1.0 or 100% | N | |
| Character | Layer Original Currency Type | The currency in which the monetary policy terms are measured Typically if a multi-layer policy, it will be the same as the Currency of Policy. Note, Layers on a Policy can have different Original Currencies. See Appendix G for Valid Values | N | |
| Number | Layer Bind Exchange Rate | The Rate of Exchange set at the date of binding coverage (entered and bound) to convert Original Currency amount into USD currency amount. USD currency will always be 1.00. Formula: Original Currency Amount divided by US Dollar Amount. For example $2.5 million Euro Limit would divide by the current US Dollar Amount of $2.883 million, resulting in a exchange rate of .86690~~..~~ | N | |
| Number | Layer **Attachment Point Amount** | The lowest limit as which insurance coverage applies within a layer. | N | |
| Character | Layer **Deductible Aggregate** Amount | The amount (in Original Currency) of covered claim payments for all claims during a given policy period on a specific layer of the policy that is the responsibility of the insured and is either:  a) withheld from a claim payment made to an insured party; or  b) reimbursed to the insurer by the insured party when the claim is paid to a third party on behalf of the insured party. Used for Cat and internal modeling to understand total exposures | N | |
| Character | Layer **Deductible Occurrence** Amount | The amount (in Original Currency) of covered claim payments for a single claim in a given policy period on a specific layer of the policy that is the responsibility of the insured and is either:  a) withheld from a claim payment made to an insured party; or  b) reimbursed to the insurer by the insured party when the claim is paid to a third party on behalf of the insured party. Used for Cat and internal modeling to understand total exposures | N | |
| Number | Layer **SIR** Amount | The amount of covered claim payments that must be paid by the Insured before a claim on the the insurance policy will be paid. Typically this will only apply to the Primary layer on a monoline policy. When it doesn’t apply, set to zero. | N | |
| number | Layer **Aggregate Limit Amount** | The maximum amount which an insurance company agrees to pay for all covered claims for a given Policy period, arising from the given Layer of the Policy. When it doesn’t apply, set to zero. | N | |
| Number | Layer **Occurrence Limit Amount** | Maximum limit that will be paid out for one claim on an occurrence for a given layer. When it doesn’t apply, set to zero. | N | |
| Number | Layer **Gross Written Premium Amount** | The gross monetary consideration for the insurance contract on a specific layer of the policy for all coverages on the policy layer. | N | |
| Number | Layer Cyber Coverage **Attachment Point Amount** | The lowest limit as which insurance coverage applies within a layer applicable to the cyber coverage only. | N | |
| Number | Layer Cyber Coverage **Deductible Amount-Aggregate** | The amount (in Original Currency) of covered claim payments for all covered cyber claims during a given policy period on a specific layer of the policy that is the responsibility of the insured and is either:  a) withheld from a claim payment made to an insured party; or  b) reimbursed to the insurer by the insured party when the claim is paid to a third party on behalf of the insured party. Used for Cat and internal modeling to understand total exposures. When it doesn’t apply, set to zero. | Y | |
| Number | Layer Cyber Coverage **Deductible Amount-Occurrence** | The amount (in Original Currency) of covered claim payments for a single covered Cyber claim in a given policy period on a specific layer of the policy that is the responsibility of the insured and is either:  a) withheld from a claim payment made to an insured party; or  b) reimbursed to the insurer by the insured party when the claim is paid to a third party on behalf of the insured party.Used for Cat and internal modeling to understand total exposures. When it doesn’t apply, set to zero. | Y | |
| Number | Layer Cyber Coverage **SIR Amount** | The amount of covered cyberclaim payments that must be paid by the Insured before the insurance policy will respond to a claim. When it doesn’t apply, set to zero. | Y | |
| Number | Layer Cyber Coverage **Aggregate Limit Amount** | Maximum amount that will be paid out for one Cyber claim occurrence on the policy. | Y | |
| Number | Layer Cyber Coverage **Occurrence Limit Amount** | Maximum amount that will be paid out on Cyber claims over the course of the given policy period (Policy Effective Date to Policy Expiration Date). When it doesn’t apply, set to zero. | Y | |
| Number | Layer Cyber Coverage **Participation Ratio** | Identifies the proportional basis for which an Insurer is sharing in premium and losses within a Layer applicable to cyber coverage only. Typically the same as the Layer Participation Percent. | Y | |
| Number | Layer Cyber Coverage **Gross Written Premium Amount** | The gross monetary consideration for the insurance contract applicable to the cyber coverage only on a specific layer of the policy. | Y | |
| CYBER EXPOSURE RATING ELEMENTS | | | |
| Number | Cyber Rating Basis Code | The basis to which rates are applied to determine premium. Current Valid Values:  R- Gross Revenues, Gross Receipts or Gross Sales  O-All Other | N | |
| Number | Cyber Exposure Units-Amount | The numeric value that a rate is multiplied by in order to determine premium to charge for insurance Coverage (See Appendix A for a list of Cyber Coverages). | N | |
| Integer | Number of Employees | # of Employees at the Insured Company | Y | |
| Character | Domain (URL) | Insured Company URL | Y | |
| Character | Stock Symbol if applicable | Insured Company Stock Symbol where applicable | Y | |
| Number | Waiting Period Deductible Amount | Time Deductible in hours | Y | |
| Character | Cyber Data Type | Examples would be CC, PCI, PII, PHI, other types as defined by the various cat models. This could be multiple. How do we represent this? (Jim Duby?) | Y | |
| Character | Asset Type | Examples would be database, paper, physical, server, computer, mobile, laptop as noted by the various cat models. This could be multiple. How do we represent this? (Jim Duby?) | Y | |
| Character | Cloud Provider Name | Examples such IBM, Amazon, VMWare, etc. as defined by the various cat models. This could be multiple. How do we represent this? (Jim Duby?) | Y | |
| Character | Payment Processor Type | Examples would be Amazon, PayPal, WePay, etc. as defined by the various cat models. This could be multiple. How do we represent this? (Jim Duby?) | Y | |
| Character | Operating System Type | Examples such as iOS, Windows, Android as noted by the various cat models This could be multiple. How do we represent this? (Jim Duby?) | Y | |
| Character | Data Transfer Type | Examples such as Cloud, email, internet, vendor, etc. as noted by various cat models This could be multiple. How do we represent this? (Jim Duby?) | Y | |
| Number | Security Rating/Cyber Hygiene Rating | Cyber security score for the insured as obtained using various external cyber risk management tools, or as required by the various cyber model vendors. | Y | |
| Number | Daily Operating Hours | # of hours insured company is operational | Y | |
| Number | Avg Hrly Wage-Employee | Average hourly rate for employees of the Insured. | Y | |
| Number | Avg Hrly Rate-Restoration Contractors | Average hourly rate for contractors performing restoration work | Y | |
| Number | Avg Hrly Rate BI-Internet Failure | Average hourly loss amount for business interruption due to an internet failure | Y | |
| Number | Avg Hrly Rate BI-Cloud Outage | Average hourly loss amount for business interruption due to a cloud outage | Y | |
| Number | Number payment system transactions | # of payment transactions. A conformed Set of Ranges will be established. | Y | |
| Number | Number PII Records | # of records containing sensitive customer informance collected and stored through any medium and separated by the type of data. A Conformed Set of Ranges will be established. | Y | |
| Number | Number PCI Records | Y | |
| Number | Number PHI Records | Y | |
| Number | Number Beds in Healthcare Facility | Number of Beds in the Healthcare Facility when underwriting Cyber exposure at a healthcare facility. | Y | |
| Number | TIV of Physical Assets | Total Insured Value Amount of the systems/network Physical Assets insured by Markel | Y | |
| **CLAIM ELEMENTS** | | | | |
|  | **Data Element Name** | **Data Element Description-*Pulled from Policy Record unless otherwise noted*** | **Cyber Specific (Y or N)** | |
| Character | Claim Folder Number | Number used to uniquely identify a specific Claim Folder within a particular system. | N | |
| Character | Claim Feature Number | A number assigned within the Originating System to delineate Claim Features within a Claim Folder. | N | |
| Character | Claim Feature Status | The condition of the Claim Feature. A Claim Feature represents one Coverage for one Claimant. | N | |
| Date | Date of Loss | The calendar date on which a loss/incident occurs. The date that the insured became “no longer whole”. Date format of yyyy-mm-dd. | N | |
| Date | Claims Made Date | Date on which the Insured receives written notice of the claim or became aware of the loss. Date format of yyyy-mm-dd | N | |
| Date | Reported Date | The calendar date on which a loss is reported to the insurer. Date format of yyyy-mm-dd. | N | |
| Number | Incurred Amount-Loss | See [Markel Business Glossary](https://va1-pcorapp410:8086/analyst/web.isp/login) that defines the relationships of the specific financial elements making up Incurred Amount. Financial Data Elements are also documented in the Loss Run Standard. | N | |
| Numbe | Incurred Amount-ALAE | N | |
| Character | Loss State Code | State where a loss (claim) occurred. Could be the need to capture multiple states. | N | |
| Character | Loss Country Code | ISO Country Code of the countrywhere a loss (claim) occurred. See [Markel Business Glossary](file:///C:\\Program%20Files%20(x86)\\Ivanti\\Workspace%20Control\\pwrgate.exe%22%20655). | N | |
| Character | Type of Loss Code | A Code that identifies the coverage associated with the corresponding type of loss. See Appendix B for a list of Valid Values. | N | |
| Character | Cause of Loss Code | The cause or reason for a loss occurring. See Appendix C for a list of Valid Values. | N | |
| Character | Cyber Event Code | Event Code specific to identifying if claim is a cyber related claim. Code is established when a cyber event is communicated such as Wanna Cry or Not Petya, otherwise, a generic event code is utilized called Cyber Event. | Y | |
| Character | Effect of Loss Code | A Code that identifies the Specific conformed reasons for the claim. See Appendix D for a list of Valid Values. | Y | |

Questions: How do we connect policies when we have layers spread across multiple policies?

# Affected Areas

This Standard applies to all Associates within Markel’s insurance operations. These Standards do not apply to the company’s non-insurance operations nor inward/outward reinsurance.

# Review Cycle

The DGC shall review this Standard as necessary and make updates as the current market and business environment require.

# Effective Date

This Standard is effective on January 1, 2019.

# Approval History

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Version** | **Description** | **Approver Name** | **Approver Title** |
|  | .5 | Initial creation and draft | DGC representative  Tom Dimantova | DGC representative  Manager Data Governance |
|  | .6 | Revised Draft after working group meetings | DGC representative  Tom Dimantova | DGC representative  Manager Data Governance |
|  | 1.0 |  | Kara Owens  Scott Culler  Scott Bailey | Managing Director,Cyber |
|  |  |  |  |  |

# Appendix A – Coverage List and add the conformed code as well (need to get a current copy of the coverage list reference inorder to grab the conformed code.

* + Breach Mitigation Expense
  + Network and Information Security Liability
  + Network Security Loss
  + Business Income and Extra Expense
  + Contingent Business Interruption
  + Media Injury Liability
  + Social Engineering
  + Funds Transfer Fraud
  + Regulatory Fines
  + PCI Assessments
  + Telecommunications Fraud
  + Public Relations Expense
  + Reputational Coverage
  + Other Cyber Coverage
  + Other Cyber Coverage

# Appendix B –Type of Loss (add Conformed Code) (need to get a current copy of the coverage list reference inorder to grab the conformed code

* Media Liability/Web Site Publishing Liability
* Security Breach Liability
* Programming Errors & Ommissions Liability
* Replacement or Restoration of Electornic Data
* Extortion Threats
* Business Income and Extra Expense
* Public Relations Expense
* Security Breach Expense
* Regulatory Proceeding Defense Expenses and Fines or Penalites
* Payment Card Industry Providing Coverage for Defense Expenses including Fines and Penalities
* Dishonest, Malicious or Fraudulent Acts Committed by Employees
* Unintentional Errors and Omissions
* Telephone Toll Fraud
* Computer and Funds Tranfer Fraud
* Computer Fraud
* Data Re-Creation Costs
* Payment Card Industry Providing Coverage for Defense Expenses excluding Fines and Penalites
* Contingent Business Income
* Reputation Protection
* Identify Recovery
* Privacy Regulation
* Corporate Intellectual Property
* Payment Card Block and Reissuance Coverage
* All Other

# Appendix C-Cause of Loss conformed code?

* Hack into insured’s systems
* Hacking incident at third party
* Ransomware
* Virus/malware/spyware/non-ransomware malware
* DDOS attack
* Phishing incident / social engineering
* Telephone phreaking
* Lost physical assets – including laptop, USB stick, disc, papers or paper files.
* Cyber terrorism
* Cyber other fraud
* Deliberate insider/employee act
* Insured negligence
* Systems outage
* Insured error
* Defamation
* Improper data collection
* Improper hardware disposal
* Declined (Not a Cyber Loss)

# Appendix D-Effect of Loss conformed code?

* Loss of the insured’s own money
* Loss of the insured’s client’s/clients’ money
* Compromised Payment Card Information (PCI)
* Involving up to 1,000 records
* Involving between 1,001 to 5,000 records
* Involving more than 5,000 records
* Compromised personally Identifiable information (PII)
  + Involving up to 1,000 records
  + Involving between 1,001 to 5,000 records
  + Involving more than 5,000 records
* Compromised Protected Health Information (PHI)
  + Involving up to 1,000 records
  + Involving between 1,001 to 5,000 records
  + Involving more than 5,000 records
* Loss of insured’s Intellectual property
* Loss of other data from insured
* Business interruption losses
* IT / Systems rebuild
* Cyber event response costs (to include IT costs, notification costs, forensic, legal and PR costs and credit monitoring costs)
* Ransom payment
* Regulatory costs
* Fines and penalties
* Reputational loss
* Loss of share value
* Property damage
* Bodily injury
* Claim against insured by third party
* Claim against insured by employee(s)
* Claim against directors
* Defense costs – civil
* Defense costs – criminal
* Claimant’s costs
* Not a covered loss
* Coverage costs

# Appendix E-[State](https://pe.usps.com/text/pub28/28apb.htm) (USPS.Com postal explorer site)

# Appendix F[-Country](http://sharepoint2010/sites/dgc/Key%20Documents/Reference%20Docs/2016-08-29%20ISO%20Countries.xlsx) (2016-08-29 ISO Countries Listing)

# Appendix G-Currency

|  |
| --- |
| * AED - UAE Dirham |
| * ARS - Argentine Peso |
| * AUD - Australian Dollar |
| * BMD - Bermudian Dollar |
| * BRL - Brazilian Real |
| * CAD - Canadian Dollar |
| * CHF - Swiss Franc |
| * CNY - Yuan Renminbi |
| * COP - Colombian Peso |
| * DKK - Danish Krone |
| * EUR - Euro |
| * GBP - Pound Sterling |
| * HKD - Hong Kong Dollar |
| * INR - Indian Rupee |
| * JPY - Yen |
| * KRW - Won |
| * MYR - Malaysian Ringgit |
| * NOK - Norwegian Krone |
| * NZD - New Zealand Dollar |
| * SEK - Swedish Krona |
| * SGD - Singapore Dollar |
| * STAT - Statistical |
| * USD - US Dollar |
| * USX - Plan USD |
| * ZAR - Rand |

# Appendix H-PL2 (need to get a current copy of the PL2 ref)

# Appendix I-Writing Company (need to get a copy of the writing company or legal entity ref)

# 6/11/19-Consider adding these Potential Future Data Element Requirements, that had not previously been included in our data standard. Per Nick Petrarca’s response to Data Standard review process.

1. Number of Records Exposed
   1. One of the fields we need to report on claims is the number of records in thousands that are exposed in a cyber-attack. Is this something we are capturing?
2. Number of Days out of Business
   1. The days of regular operations impaired or suspended due to a covered cyber event.
3. Number of Years of Credit Monitoring
   1. The years of insured's established credit monitoring service
4. Types of records exposed
   1. See attached