

POLICY DATA QUALITY ASSURANCE PROGRAM



FAQ

Frequently Asked Questions

updated March 2025

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What Is the Policy Data Quality Assurance Program?

The Policy Data Quality Assurance Program (PDQAP) is designed to enhance the quality, accuracy, and timeliness of policy data submissions. The program will assist our carrier members in identifying data defects, improve policy timeliness, facilitate carrier education and outreach initiatives, and provide metrics to evaluate carrier performance.

What is the purpose of the PDQAP?

The DCRB collects workers' compensation policy data from member carriers to support critical functions such as establishing expectations for unit statistical reports, determining carrier recipients for experience rating worksheets, and transmitting coverage information to the Delaware Insurance Department.

By maintaining accurate, consistent, and timely policy data, the DCRB ensures operational efficiency and industry-wide compliance with reporting standards.

Who does this program apply to?

The PDQAP applies to all insurers issuing workers' compensation policies in Delaware. Carrier members will receive regular policy timeliness reports through DCRB's Policy Data Manager (PDM) application. Automated email notifications will alert carriers to late policy submissions and post invoice notifications. Additionally, carriers will have access to performance reports designed to help them track compliance and improve the efficiency of their data reporting processes.

How to register for Policy Data Manager?

The Policy Data Manager (PDM) is available within the **Application Manager** on the DCRB website.

Carriers looking to gain access must log in to the Application Manager and request authorization from their designated Carrier Group Administrator (CGA). Access levels within PDM vary, with some users permitted to view and edit policy data while others have view-only access.

CGAs manage user permissions and can grant appropriate access based on the carrier's needs. Once successfully logged in, the user will observe the Application Manager home screen. Select Policy Data Manager to launch the application.

For further instructions, see the **Policy Data Manager User Guide** within the DCRB Learning Center. For any questions, please contact the DCRB's Central Support department at centralsupport@dcrb.com.

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How will fines be sent to DCRB carrier members?

CGAs have the ability to designate one contact person as the "assessment" contact. Effective, July 1st, 2025, policy invoices will be issued by the DCRB on the 7th of each month, or on the next available business day if the 7th falls on a weekend.

How to view all invoices and statements?

All invoices and statements are accessible with the Application Manager through Invoice Online. CGAs can register up to five (5) email addresses to receive an email notification whenever a new invoice or statement is posted to Invoice Online. Upon invoice generation, an email notification is sent to each carrier contact, allowing them to access and distribute the invoice as necessary.

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What transactions qualify for the PDQAP's Late Reported Policy Timeliness Initiative?

Effective July 1, 2025, the DCRB will assess fines for only the following policy transactions processed 36 days or more beyond the policy effective date:

01 - New Policy and 02 - Renewal Policy Transactions: Transactions 01 and 02 are initiating transactions that establish the policy with the DCRB.

04 - Annual Rerate Transactions: Transaction 04 is used for two reasons:

- 1.To report on the second or third terms of a three-year variable policy
- 2.To report the remaining portion of policies with a coverage period greater than annual (1 year and 16 days).

Note: Transactions submitted in June 2025 will be eligible for the Late Reported Policy fining program.

What if Delaware was added to a policy as a mid-term endorsement?

All mid-term endorsements should be processed as Transaction Code 15 - State Change. Transaction 15 is not currently included in the DCRB's Late Policy Initiative.

What transactions do not qualify for the Late Reporting Policy Timeliness Initiative?

The following policy transactions will not be included in the DCRB's Late Reported Policy Initiative:

- 03** Endorsement
- 05** Cancellation/Reinstatement/Non-renewals
- 06** Policy Replacement Due to Key Field Change
- 08** Policy Replacement Due to Rating Change
- 10** Policy Replacement Due to Non-Rating Change
- 14** Policy Replacement Due to Misc. Change
- 15** Policy Replacement Due to Add/Delete State Change
- 17** Noncompliance/Compliance of Policy Terms & Conditions (Delaware Assign risk)

Are policies that are canceled and rewritten subject to late policy fines?

Consider the following example: A policy was issued on time; however, due to unforeseen circumstances, it was canceled outright and rewritten 30 days after the effective date.

In such circumstances, the rewritten policy should be reported using Transaction 06/ Policy Replacement Due to Key Field Change. As noted above, Transaction 06 is excluded from the Late Reported Timeliness Initiative.

How does the DCRB calculate the number of days a policy is late?

To calculate the number of days a policy is overdue, the DCRB compares the policy's Processed Date with its policy Effective Date. Please be advised that a copy of every Workers Compensation Policy showing the state of Delaware on the Information Page shall be electronically submitted to the DCRB within thirty days after the effective date of the policy. See Section 1, Underwriting Rules, Rule 1 – General. Item H. Filing Requirements, 1. Policy in the Delaware Basic Manual. The DCRB allows a 5-day grace period to accommodate reasonable delays in processing.

Where do I see my late policies?

1. DCRB Late Policies Report

The DCRB's Late Policies Report in PDM provides a comprehensive list of all late policies by carrier. This tool enables carriers to view their own late policies over the past 12 months.

2. Automated Late Policy Notifications

Effective January 5, 2025, the DCRB began issuing automatic, monthly emails to each of our member carriers' designated Policy Review contact to notify insurers of their late policies for the previous month.

For guidance on both the DCRB's Late Policies Report and the Automated Late Policy Notifications, please look out for the DCRB's Policy Timeliness Guide.

Fine Schedule

Here is the fine schedule for late policy submissions:

36 to 60 days late	\$50
61 to 89 days late	\$100
90 to 364 days late	\$1,000
365 to 547 days late	\$1,500
548 days or more late	\$2,000

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What payment methods are accepted?

The DCRB prefers Automated Clearing House (ACH) payments for all invoices. To ensure a timely and accurate application of your payment, please email payment details to finance@dcrb.com and include the invoice number, carrier, and payment amount.

Please be advised that all ACH payment instructions are included with your issued invoice. If you have any billing questions, please contact our Accounting Department at finance@dcrb.com.

What is the appeal process?

Waivers for delinquent policies may be granted at the discretion of the DCRB, contingent upon the demonstration of good cause such as systemic data reporting issues.

Carriers will have up to 90 days after their receipt of a DCRB invoice to appeal any assessment. Any appeal of fines should be submitted electronically to pdminquiry@dcrb.com, must include the invoice number in question, and must set forth all factors which the carrier wishes to be considered in the review of the appeal. The DCRB will acknowledge receipt of your appeal request within 30 days.

Appeals of late policies should be supported by documentation showing the date(s) the policy was submitted to the DCRB. Documentation for the timing of electronic submissions may include copies of electronic submission logs indicating that the policy in question was received.

Have additional questions?

Please contact us at pdminquiry@dcrb.com.