

# WEB-BASED CLAIMS REPORTING

AN OVERVIEW OF THE ONLINE FIRST NOTICE OF LOSS TOOL

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# **OVERVIEW**

OneBeacon has launched a new tool that allows producers and policyholders to submit a first notice of loss online, 24/7. This feature helps streamline the claims process and provides another alternative for efficient claims reporting, making it easier for producers and policyholders alike.

All policies written through the OneBeacon companies can report a claim online, except those written through the following:

- AutoOne
- Dewar
- International Marine Underwriters
- OneBeacon Accident Group
- OneBeacon Entertainment
- OneBeacon Professional Insurance

# HOW TO SUBMIT A CLAIM ONLINE

### **STEP 1: POLICY HOLDERS - ACCESS THE APPLICATION**

To access the claim reporting tool:

- Go to <u>www.onebeacon.com</u>.
- Click on the "CLAIMS" button in the bottom right-hand corner of the homepage.
- Go to Step 2: Register to Report Claims Online (see pg. 7).



# STEP 1A: AGENTS- ACCESS THE APPLICATION -

To access the claim reporting tool from the Agent Portal:

- Go to <u>www.onebeacon.com</u>.
- Log into the Agent Portal by clicking the "Producer Login" link at the top of the homepage.
- From the Resources listed on the left-hand side of the page, select **Report a Claim.**

ME   OUR BUSINESSES   PRODI	JCER RESOURCES   ABOUT US
Q Policy Search	
*Enter name or policy number	P Recent Transactions
Search	Current Week (09/13/2015 - 09/17/2015)
	No results found. Try a different date range?
💥 My Tools	
	Spotlight
Resources	OneBeacon Reports \$10.85 Book Value Per Share
New Document   New Link	
Producer Portal Quick	HAMILTON, Bermuda, July 27, 2015 – OneBeacon Insurance Group, Ltd. (NYSE: book value per share of \$10.85, reflecting an increase of 0.5% for the second quar the first six months of 2015 including dividends.
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Producer Portal Quick Tips Producer Portal User	book value per share of \$10.85, reflecting an increase of 0.5% for the second quar the first six months of 2015, including dividends.
Producer Portal Quick Tips Producer Portal User Guide Claims Inquiry User Guide Proofpoint –	book value per share of \$10.85, reflecting an increase of 0.5% for the second quar the first six months of 2015, including dividends. Newsroom New Article • 8/26/15
Producer Portal Quick Tips Producer Portal User Guide Claims Inquiry User Guide Proofpoint – Encrypted Email FAQ	book value per share of \$10.85, reflecting an increase of 0.5% for the second quar the first six months of 2015, including dividends. Newsroom New Article
Producer Portal Quick Tips Producer Portal User Guide Claims Inquiry User Guide Proofpoint –	book value per share of \$10.85, reflecting an increase of 0.5% for the second quar the first six months of 2015, including dividends. Newsroom New Article 8/26/15 OneBeacon Declares Third Quarter Dividend 7/31/15 OneBeacon Exits Crop Business

- The following page will appear.
- Click on the "Log In" link and follow the instructions in Step 2 (see pg. 7).

### Reporting a Claim

#### << Back to Previous Page

#### Online

You and your One Beacon Clients\* can report claims anytime on the web via our first notice of loss tool, powered by Succeed Management Systems:

Log in to report or view a claim online 24/7 web-based claim reporting is a click away. You may register at any time, and can access your claim information using your registered user ID and password.

The individual who reports a claim receives a confirmation email with a submission number. The insured can generally expect contact by the assigned adjuster within 1-2 business days of the online claim submission.

\*Does not apply to the following businesses:

- Dewar: Please click here.
- OneBeacon Accident Group: Call the claims department at 866-568-2233.
- OneBeacon Entertainment (non workers compensation claims): Please click here
- OneBeacon Professional Insurance: Visit their website here.

#### By Telephone - 1.877.248.3455

Our 24/7 Claims Call Center receives and processes all new claims, including Workers Compensation claims; and our highly trained team of customer service representatives makes telephone claim reporting quick, easy and efficient.

Claims phoned into the 24/7 OneBeacon Call Center before 5 p.m. ET will be assigned a claim number immediately, and a copy of the information reported will be faxed to you on the same day.

#### By Fax

You and your clients may also fax claim reports to us; however, please remember that you must also submit the appropriate ACORD First Notice of Loss form, and you may include attachments that support a claim with the fax transmission. Be certain to fax only one complete claim transaction at a time.

- 1.866.213.2802 All claims except Workers Compensation
- 1.800.224.4416 Workers Compensation claims

For claims faxed to us, the sender's fax receipt will serve as confirmation and the only acknowledgement.

### **STEP 2: REGISTER TO REPORT CLAIMS ONLINE**

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You will need to create a unique User ID and password for the claims reporting tool. Any existing OneBeacon IDs (e.g. for the Customer or Agent Portal) will not grant you access.

To create a User ID and Password:

1. Click on the "Log In" link under the Report a Claim Online login area.

WHO WE ARE INVESTOR RELATION	NS NEWSROOM OREERS	CONTACT US	
	The second		
Home >			
Claims		with superior claim service. From the initial loss	Report a Claim Online:
Our team is committed to making contact v	ated, experienced claim professionals will guid with our policyholders within one business day	of receiving your claim. Our mission is not	Log in to report or view a claim online 24/7 web-based claim
	fair and ethical resolution based on your policy tus of an existing claim or to speak to a OneBe		register at any time, and can access your claim information
			access your claim information using your registered user ID an
Call: 877.248.3455 to check on the stat Business Segments: A.W.G. Dewar Phone: 617.774.1555 International Marine Underwriters			register at any time, and can access your claim information using your registered user ID an password. The individual who reports a clai receives a confirmation email wil a submission number. The insure can generally expect contact by the assigned adjuster within 1-2
Call: 877.248.3455 to check on the stat Business Segments: A.W.G. Dewar Phone: 617.774.1555	tus of an existing claim or to speak to a OneBe OneBeacon Financial Institutions Raymond Tiburzi Phone: 212.440.6575	vacon Claims representative. OneBeacon Management Liability Raymond Tiburzi Phone: 212.440.6575	register at any time, and can access your claim information using your registered user ID an password. The individual who reports a clai receives a confirmation email wil a submission number. The insure can generally expect contact by the assigned adjuster within 1-2 business days of the online claim
Call: 877.248.3455 to check on the stat Business Segments: A.W.G. Dewar Phone: 617.774.1555 International Marine Underwriters Joe Gallagher Phone: 678.255.7606 jgallagher@imu.com OneBeacon Accident & Health	tus of an existing claim or to speak to a OneBe OneBeacon Financial Institutions Raymond Tiburzi Phone: 212.440.6575 rtiburzi@onebeacon.com OneBeacon Financial Services	Conceleacon Management Liability Raymond Tiburzi Phone: 212.440.6575 rtiburzi@onebeacon.com OneBeacon Media Liability	register at any time, and can access your claim information using your registered user ID an password. The individual who reports a clai receives a confirmation email will a submission number. The insure can generally expect contact by the assigned adjuster within 1-2 business days of the online claim submission.
Call: 877.248.3455 to check on the stat Business Segments: A.W.G. Dewar Phone: 617.774.1555 International Marine Underwriters Joe Gallagher Phone: 678.255.7606 jgallagher@imu.com	tus of an existing claim or to speak to a OneBe OneBeacon Financial Institutions Raymond Tiburzi Phone: 212.440.6575 rtiburzi@onebeacon.com OneBeacon Financial Services Daniel Ryan Phone: 952.852.0479	Conception of the second secon	register at any time, and can access your claim information using your registered user ID an password. The individual who reports a clai receives a confirmation email wil a submission number. The insure can generally expect contact by the assigned adjuster within 1-2 business days of the online claim submission. Instructions for online reporting
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•	Once the following screen app	ears, click the <b>Register</b> link.
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OneBeacon Report A Claim	
Welcome! Welcome to the OneBeacon Insurance Report a Clai are required to access this site. Report a Claim Login Username: Password: Forgotten Username or Password? Vog In	m software platform. A user name and password Not Registered? To gain access to the platform, <u>register</u> and request a username and password. More Information To learn more or to view videos, click for <u>more information</u> .
System Requirements. For addition	hal assistance, please contact us.
Free Risk Management Courses Take advantage of Succeed University®— your portal to a multitude subjects. Topics include Injury & Illness Prevention Programs, Ergono OSHA's Globally Harmonized System (GHS) and more. <u>Click to see cla</u>	mics, OSHA 300 Log reporting, Sexual Harassment Prevention,

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• Complete all information and create your own username and password and then click on the green Register button at bottom.

Report a Claim   New User Registration
Welcome! Please provide the following information to gain access to your Report a Claim software platform. Each yellow highlighted field is required. After you have been approved you will receive a confirmation email with your username and password.
Basic Information
*Primary responsibility:
Select primary responsibility
*First and last name:
*Organization name:
*Email address:
*Phone: Ext:
Address
Country:
United States

• You will receive an email confirmation (example shown below) with your login information.

	Report A Claim	
Registration Confi	rmation	
Thank for registering to rep the login information belo		n. To report a claim online now, please use
Your Username is:		
[user-id] Your		
Password is: [password]		
[[00500010]		

# STEP 3: LOG INTO THE CLAIMS REPORTING APPLICATION

## To log in:

<ul> <li>Click Login.</li> </ul>	· 🔨		
		Producer Login   Customer Login	Search
WHO WE ARE INVESTOR RELATION	NS NEWSROOM GREERS	CONTACT US	
Home >	Res Sol		
Claims			Report a Claim
Our team is committed to making contact complete until we have provided a timely,	rated, experienced claim professionals will guide with our policyholders within one business day fair and ethical resolution based on your policy atus of an existing claim or to speak to a OneBe	of receiving your claim. Our mission is not /s terms.	Log in to report or view a claim online 24/7 web-based claim reporting is a click away. You ma register at any time, and can access your claim information using your registered user ID and password.
Business Segments:			The individual who reports a clair receives a confirmation email with
A.W.G. Dewar Phone: 617.774.1555 International Marine Underwriters	OneBeacon Financial Institutions Raymond Tiburzi Phone: 212.440.6575 rtiburzi@onebeacon.com	OneBeacon Management Liability Raymond Tiburzi Phone: 212,440.6575 rtiburzi@onebeacon.com	a submission number. The insure can generally expect contact by the assigned adjuster within 1-2 business days of the online claim submission.
Joe Gallagher Phone: 678.255.7606 jgallagher@imu.com	OneBeacon Financial Services Daniel Ryan	OneBeacon Media Liability Emily Caron	Instructions for online reporting
OneBeacon Accident & Health Larry Wagner	Phone: 952.852.0479 dryan@onebeacon.com	Phone: 913.945.3017 ecaron@onebeacon.com	Exclusions noted below:
Phone: 303.531.3806	OneBeacon Government Risks	OneBeacon Program Group	
			A.W.G. Dewar
Iwagner@OneBeacon.com OneBeacon Architects & Engineers	Aaron Stone Phone: 952.852.0829 astone@onebeacon.com	Bryan Wakefield Phone: 303.531.3873 bwakefield@onebeacon.com	A.W.G. Dewar International Marine Underwriters: <u>visit website</u>

 Input the username and password you created in Step 2 into the Report a Claim login box.

One Beacon Report A Cla	
Welcome! Welcome to the OneBeacon Ins are required to access this site. Report a Claim Login Username: 1 Password: forgetten.Username or Password?	Not Registered? To gain access to the platform, register and request a username and password. More Information To learn more or to view videos, click for more information.
Free Risk Management Take advantage of Succeed University®- subjects. Topics include Injury & Illness P	IRequirements. For additional assistance, please contact us. COUITSES _your portal to a multitude of free webinare on risk management and workplace safety revention Programs. Ergonomics. 05HA 300 Log reporting. Sexual Harassment Prevention. (5) and more. <u>Slick to see classes or sign van</u>



Once logged in, you will be at the main Report a Claim page.

## **STEP 4: UPDATE USER INFORMATION**

To update your user information (e.g. address, phone number, etc.):

 Click the Update Registration Info button in the upper right hand corner of the main screen.

	Report a Claim
Select	the claim type below:
Workers Compensation Start a new Workers Compensation Claim.	Auto/Fleet Start a new auto/fleet daim.
Liability	Dranasty
Start a new Liability claim.	Start a new Property claim.
Yacht Start a new Yacht daim	

• Update your information and select "Save."

| Main - Windo

	eacon Report	A Claim		Management Solution
		Report a Claim		
		Select the claim type below		
		Select the claim type below	<i>'</i> ,	
		Edit: OneBeacon Claims Demo		
	Site Name:	OneBeacon Claims Demo		-
	FEIN:	234567892		
-	NAICS:	5500		
	Phone:	503-123-4578		
		Physical Address of Business		
	Country:	United States	<b>_</b>	
	*Address (Line 1):	21010 SW Edison Ave.		
	Address (Line 2):	apt 33		
	*City:	Wilsonville *State: OR	Zip: 97256	
	County:			
	Business Mailing Ad	ress (If mailing address is the same as the phy	sical address. leave blank.):	-
		Save Cancel		

### **STEP 5: ENTER CLAIM INFORMATION**

- Select one of the five claim types to report on the main screen:
  - Workers Compensation
  - o Liability
  - o Auto/Fleet
  - o Property
  - o Yacht
- For Workers Compensation, you will first need to select a state.
- Enter as much information on each tab.
  - Fields with a red asterisk (\*) are required.
  - Use the scroll bars at the right to see the entire form.

### Example: Auto/Fleet Claim, Initial Information tab

- Windows Internet E	xplorer provided by OneBe	acon Insurance				
om/IncidentTrack/Main.as	spx					
		eport A Claim				Management Solutions, LLC
			Claim   Auto/Fleet			
ch in						Submit 🗴 Cancel
New Claim Type: Clain	m					
Initial Information	Loss Information	Other Property Damage	Insured's Vehicle	Injured Information	Witness Information	Remarks
Inicial Information	Loss Information	Other Property Damage	Tistred's vehicle	Injured Information	withess fillorination	Reinans
General Inf	*Today's Date:	03/02/2011	jIII e	ex: 03/02/2011		
Agent Info	Agency: Phone Number: Email Address:	[]Ex	t:		ex: x@y.com	
Insured Info	*Are you the insured? *Name: *Address (Line 1): Address (Line 2): *City: *Phone Number:	C Yes C No		▼ *Zip:		

- Some tabs provide the ability to add multiple sets of information (e.g. several witnesses). To add additional information:
  - Simply select the **Add** button to add another witness, vehicle, etc.
  - If you wish to delete a witness, vehicle, etc., select the **Clear** button.

om/IncidentTrac	k/Main.aspx					
	OneBeacon	Report A Claim				Management Solutions, LLC
			Claim   Auto/Fleet			
New Clain	ı				E	🗄 Submit 🗴 Cancel
Ту	be: Claim					
Initial Inform	ation Loss Informatio	n Other Property Damage	Insured's Vehicle	Injured Information	Witness Information	Remarks
nas si	omeone witnessed the accid	ent? O Yes O No			Clear	
Info	rmeone withessed the accid Withess's Na Address (Line Address (Line	me:			Clear	$\mathbf{D}$
	Witness's Na Address (Line Address (Line	me:	State: -	▼ Zip:	Clear	$\mathbf{D}$
Info	Witness's Na Address (Line Address (Line	me:	State:	Zip:	Clear	D

### STEP 6: SUBMIT THE CLAIM

- Once you have filled in as much information as possible on each tab, click the Submit button in the upper right hand corner of the screen.
  - If you have not filled out all of the required fields, you will get a pop-up alerting you.
  - Go back to the tabs that are highlighted in **red**, and fill out the required fields.
- Note: If the claim is not successfully submitted and the cancel button is selected or the application is closed, <u>no record of it is kept and all information already entered is</u> <u>lost.</u>

Auto/Fleet Claim, submitting a claim when not all required fields are filled in

ain - Windows Internet Exp	lorer provided by OneB	eacon Insurance					_0_
ns.com/IncidentTrack/Main.asp>	×						<u> </u>
		eport A Claim				Management Solutions, LLC	
			Claim   Auto/Flee	t			
Claim #9694					8	Submit 🗙 Carlel	<u>_</u>
Type: Claim							
Initial Information	Loss Information	Other Property Damage	Insured's Vehicle	Injured Information	Witness Information	Remarks	
Ceneral 1	*Today's Date: Agency:	03/02/2011		ex: 03/02/2011	_		
Agent Inf	Phone Number: Email Address:	Ext	t:		ex: x@y.com		
dini t	*Are you the insured? *Name: *Address (Line 1):	C Yes C No				-	
Insure	Address (Line 2): *City:		*State:	▼ *Zip:			
	*Phone Number:	Ext		z.p.		Tabs highlighted in ı saved. All other tabs	red where not × s were saved.

- After you submit the claim, you will be asked to verify that the claim is not false or fraudulent.
  - Click the **Accept** button to agree to the terms.
  - Click the link for **State Specific Fraud Information** to view the fraud language

		Report A Clair	n			Management Solutions, LLC
			Claim   Auto/Fleet			
1						
laim #9694 Type: Claim						
		Other Pro	Submit Claim	mation	Witness Information	
	vitnessed the accident		er to submit the claim you must agree tha im is not false or fraudulent. <u>State specific fraud information</u>	at	Clear	

### STEP 7: RECEIVE CONFIRMATION OF CLAIM SUBMISSION

- Once your claim has been submitted, you will see a confirmation page.
  - The **Print Report** button can be used to generate and save or print the PDF form created from the claim information entered.
  - The **New Claim** button can be used to go back to the main screen where a new claim type can be selected.
  - The **Logout** button can be used to log out of the application.
- The text contains the submission confirmation number, as well as general instructions about the claim reporting process.
  - Note that the submission confirmation number is not the claim number. Your claim number will be provided to you when you are contacted by our adjuster.
  - You will receive a confirmation email with this same information.

Main - Windows Internet Explorer provided by C	nebeacon insurance	
edms.com/IncidentTrack/Main.aspx		
	Report A Claim	
	Claim   Auto/Fleet	
	Viam   Auto/Heet         Viam   Auto/Heet         Viam   Auto/Heet         Print Report         Print the claim report submitted to the carrier         New Claim         File another claim         File another claim         Logout         Logout of the sytem	
	Thank you for submitting your claim to OneBeacon. Your submission confirmation number is 9694; please note, this is NOT your claim number. Your claim will be assigned in the next business day and you will be contacted within the next 24-48 business hours. You will be provided your claim number at that time. If you need immediate attention, please call 1-877-248-3455 during normal business hours (8-5 EST) and follow the prompts for OneBeacon Commercial Lines Status calls to speak with one of our Customer Service	

# IF YOU NEED HELP

- If you have difficulty submitting your claim online you may phone your claim into our 24-Hour Claim Center at (877) 248-3455.
- If you have any questions relating to a submitted claim, contact us at (877) 248-3455 during normal business hours (8-5 EST) and follow the prompts for the OneBeacon Claims Service Center.
- If you need technical assistance with logging in, internet browser settings, etc., please call the OneBeacon Enterprise Support Center at (877) 248-9500.