

## SUBMITTING A STATUS REPORT

- Go to Servicing Carrier Updates on the KACP website.
- Select 'Status Report' from the dropdown menu and click proceed.

The screenshot shows the 'Kentucky Assigned Claims Plan' website. On the left, there are sections for 'Login for Internal Users' (with fields for User ID, Password, and a 'Remember my User ID' checkbox), 'Apply for Benefits' (with a 'Start Application' button), and 'Contact Us' (with a 'Contact Us' button). The main content area features the title 'Kentucky Assigned Claims Plan' and a 'Purpose' section. The purpose text states: 'A person entitled to Basic Reparations Benefits because of injury may obtain them through the Kentucky Assigned Claims Plan subject to the provisions of KRS 304.39-160. The Kentucky No-fault application must be completed and submitted online. Click the Start Application link under the Apply for Benefits menu on the left side of this screen to begin the process. Claims are assigned to a Servicing Carrier who will assign a claim number, notify the applicant, provide contact information and proceed with their investigation of the claim. All further questions regarding the claim should be directed to the Servicing Carrier.' On the right, the 'Servicing Carrier Updates' dropdown menu is open, showing options: 'Status Report', 'Report Claim Number', 'Investigation or Eligibility Determination', 'Updated Investigation or Eligibility Report', 'Billing Summary Form', and 'Status Report'. The 'Status Report' option is highlighted with a red box. Below the dropdown is an 'FAQ' button.

This screenshot shows the same website as the previous one, but with the 'Proceed' button in the 'Servicing Carrier Updates' section highlighted with a red box. The 'Status Report' option in the dropdown menu is no longer visible, indicating it has been selected. The rest of the page content, including the login, apply for benefits, and contact us sections, remains the same.

- Enter the carrier claim number, control number, and application number. Click proceed.

**Servicing Carrier Updates - Pre Validation**

Carrier Claim #  ⓘ

Control #

Application #

- The highlighted fields are required. Select an option from the dropdown menus. Once the highlighted fields are completed you may hit submit.

The screenshot shows a web form titled "Status Report" with a blue header. The form contains several input fields and dropdown menus, some of which are highlighted with a red border to indicate they are required. The fields include:

- Assigned Control Number (text input)
- Company Claim Number (text input)
- Company Name (text input)
- Adjuster (dropdown menu, highlighted)
- Date (calendar icon)
- Select Claimant (dropdown menu, highlighted)

Below these fields is a section titled "Please provide the following information as it pertains to the above noted claim:"

- 1- Status of Claim (dropdown menu, highlighted)
- Comments (text area)
- 2- Status of Subrogation (dropdown menu, highlighted)
- If open, please check all of the following that apply:
  - Pursuing Claimant Insurer
  - Pursuing Uninsured Owner
  - Subro Attorney Involved
  - Suit Filed to Protect Subrogation
  - Judgment Obtained
- Date of Judgment (calendar icon)
- Judgment Amount (text input)
- Gross Amount Collected (text input)
- Comments (text area)

At the bottom of the form are two more questions:

- 3- Has final billing been sent to Kentucky Assigned Claims Plan? (dropdown menu, highlighted)
- 4- Has final subrogation recovery been sent to Kentucky Assigned Claims Plan? (dropdown menu)

At the bottom left, there are two buttons: "Submit" and "Exit", both highlighted with a red border.

- Once you hit submit and click ok, you will receive a confirmation indicating status report submitted successfully. You may download this form for your records and click exit to return to the main page.

Are you sure you want to submit the status form?

OK Cancel

Assigned Central f

Company Name  Adjuster

Date

Select Claimant

Please provide the following information as it pertains to the above noted claim:

1- Status of Claim

Comments

2- Status of Subrogation

If open, please check all of the following that apply:

<input type="checkbox"/> Pursuing Claimant Insurer	<input type="checkbox"/> Judgment Obtained
<input type="checkbox"/> Pursuing Uninsured Owner	Date of Judgment <input type="text"/>
<input type="checkbox"/> Subro Attorney Involved	Judgment Amount <input type="text"/>
<input type="checkbox"/> Suit Filed to Protect Subrogation	Gross Amount Collected <input type="text"/>

Comments

3- Has final billing been sent to Kentucky Assigned Claims Plan?

4- Has final subrogation recovery been sent to Kentucky Assigned Claims Plan?

Submit Exit

### Investigation or Eligibility Determination

Assigned Control Number  Company Claim Number

Company Name  Submitted By

Date

Select Claimant

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#### 1- Claimant Details

DOB  SSN (Last 4 Digits)

Address

Nature & Extent of Injury

Medical Treatment

Employment and Wages

Dependents

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#### 2- Accident Details

Accident Date  Accident Location

Host Vehicle Owner  Host Vehicle Driver

Other Vehicle's Insurance

Accident Description

Police Version (if applicable)

Witness Version (if applicable)

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#### 3- Eligibility Determination

Is Claimant Eligible?

Other Sources Available

KY Insurance on Host Vehicle?  Out-of-State Insurance on Host Vehicle?

Insurance in Household?  Private Health Insurance?

Other Sources Impact on Eligibility

Owner of Host Vehicle's Name(s)

Eligibility Comments/Determination

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#### 4- Claim Disposition

Amounts Paid  Outstanding Reserves

Subrogation Open for the Following

- Pursuing Claimant Insurer
- Pursuing Uninsured Owner
- Subrogation Attorney Involved
- Suit Filed to Protect Subrogation

Subrogation Remarks/Recommendations

What Remains to Be Done to Resolve Claim

Investigation form is successfully submitted