

**Forsikring  
& Pension**

**Guide for online Claim History  
for business, agriculture,  
vehicle and private**

**Appendix 2  
Updating History**

Version 3.0 Draft H

Document Information

<b>Title:</b>	Guide for Online Claim History for business, agriculture and vehicle, Appendix 2 Updating History
<b>Project:</b>	EDI Office industry coordinated data exchange
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Change log

Version	Date	Changed pages or sections	Comments
1.0	4 September 2017	First edition as independent document	Cf. Appendix 2 Updating History
2.0 Draft C	December 2018	Addition of industry group vehicle to the Claim History solution	Cf. Appendix 2 Updating History
2.0 Draft D	June 2019	Corrections in connection with testing the solution	Cf. Appendix 2 Updating History
2.0 Draft E	September 2019	Clarifications leading up to implementation	Cf. Appendix 2 Updating History
2.0 Final	31 October 2019	Clarifications leading up to implementation	Cf. Appendix 2 Updating History
3.0 Draft F	January 2020	No changes	Cf. Appendix 2 Updating History
3.0 Draft G	March 2020	Addition of private, accident and pleasure craft and various clarifications	Cf. Appendix 2 Updating History
3.0 Draft H	June 2020	Clarifications leading up to implementation	Cf. Appendix 2 Updating History

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## 1 Version 3.0 Draft H – June 2020

### 1.1 Guide for Online Claim History for business, agriculture, vehicle and private

Change made	Change description	Only relevant to companies registered for private	Relevant to all companies
Sections 1.1 + 2.1.1 + 2.4	Expansion of the solution with the rest of the private area will be implemented by 14 September 2020	X	X
Section 2.1.1	Clarification of requests in several companies and reference to guidance added	X	X
Section 2.2	<p>Clarification of procedure for requests:</p> <p>Claim History is based on a principle of one request per CPR number of CVR number.</p> <p>Claim History is based on a principle of one request per CPR number of CVR number.</p> <p>For companies with Policyholder 1 and Policyholder 2, consent from Policyholder 1 will provide information about claims on the policies held by Policyholder 1 and consent from Policyholder 2 will provide information about claims on policies held by Policyholder 2. It is up to the individual receiving companies to sort out any dublets (= claims that both policyholders are part of) in the display to own employees if desired by the company.</p> <p>If the policyholder is not or has not been created as policyholder/co-insured of a policy, the request will have to be responded to as unknown customer.</p> <p>For policies with only one policyholder on the policy, consent will give access to all claims on the policyholder's policy.</p> <p>One request is sent per CPR No. (Policyholder 1 and Policyholder 2) and one response is received per request.</p> <p>Example 1 – one request per policyholder – the response is:</p> <ul style="list-style-type: none"> <li>unknown customer (Policyholder 1)</li> <li>claims/bonus (Policyholder 2)</li> </ul> <p>Example 2 – one request per policyholder – the response is:</p> <ul style="list-style-type: none"> <li>claims/bonus (Policyholder 1)</li> <li>claims (Policyholder 2)</li> </ul> <p>if some insurances are in the name of one person and some in the name of the other.</p>	X	X
Section 2.3	<p>Clarification that arrears are stated for all product groups and regardless of whether a policy is current or has been deleted/exported.</p> <p>Specifically for private and agriculture The following industry/product groups are to be considered equal while companies, e.g., may have private buildings under an agriculture product and a claim would then not be included if the request only uses CPR number for industry/product group 002/001:</p> <ul style="list-style-type: none"> <li>002/001, 004/001, 006/001 Building</li> </ul>		

	<ul style="list-style-type: none"> <li>• 002/002, 004/002, 006/002 Content</li> <li>• 002/003, 004/003, 006/003 Liability</li> </ul> <p>Private claims under agriculture claims must be indicated as private claims under 002/001 in the response.</p> <p><b>Change of ownership and seller/buyer claims are not part of the claim history solution and must therefore not be part of the answer.</b></p> <p>Specifically for travel Medical pre-approvals must not be included in the claim history solution.</p> <p>The response may include multiple claims with the same claim date, e.g., on travel insurance with payments on several coverage levels: lost travel days etc. It is up to the receiving company to interpret the claims relative to their own coverage rules and potentially combine claims with a shared claim date into one claim.</p> <p>Specifically for accident The following industry/product groups are to be considered equal as companies may have private accident insurance under an agriculture product and a claim would then not be included if the request only uses CPR number for industry/product group 005/001:</p> <ul style="list-style-type: none"> <li>• 005/001 and 006/008 Accident.</li> <li>• Industry/product group 006/008 is not part of the solution. A request for 005/001 will result in a response for all private accident policies, regardless of whether they are placed in 005/001 and/or 006/008</li> </ul> <p>Claims for deceased individuals must not be exchanged.</p> <p>For accident policies, claims are stated per insured. Is a person turns 18 years, the claim history can be provided 5 years back in time with the consent of the insured. Is the person not 18 years of age, information can be disclosed with the consent of the insured's guardian/parents.</p> <p>Example 1</p> <ul style="list-style-type: none"> <li>• Policy 1 (current insurance company)</li> <li>• Policyholder 1/Insured 1 = Male 50 years old</li> <li>• Policyholder 2/Insured 2 = Female 48 years old</li> <li>• Insured 3 = Child 1, 15 years old</li> <li>• Insured 4 = Child 2, 19 years old</li> </ul> <ul style="list-style-type: none"> <li>• Offer from new insurance company for a policy to coverage all 4 people in the new insurance company</li> <li>• Consent from Policyholder 1, Policyholder 2 and Insured 4</li> <li>• 4 separate requests – one for each insured (CPR No.)</li> <li>• Claims regarding Insured 1, Insured 2, Insured 3 and Insured 4 are returned as 4 separate responses.</li> </ul> <p>Example 2</p> <ul style="list-style-type: none"> <li>• Policy 1 (current insurance company)</li> <li>• Policyholder 1/Insured 1 = Male 50 years old</li> <li>• Insured 2 = Female 48 years old</li> <li>• Insured 3 = Child 1, 15 years old</li> <li>• Insured 4 = Child 2, 17 years old</li> </ul> <ul style="list-style-type: none"> <li>• Offer from new insurance company for a policy to coverage Insured 2 and the 2 children</li> <li>• Consent from Insured 2</li> <li>• 3 separate requests – one for each insured – Insured 2, Insured 3 and Insured 4 (CPR No.)</li> </ul>	X	
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	<ul style="list-style-type: none"> <li>Claims regarding Insured 2, Insured 3, and Insured 4 are returned as 3 separate responses.</li> </ul> <p>Example 3</p> <ul style="list-style-type: none"> <li>Policy 1 (current insurance company)</li> <li>Policyholder 1/Insured 1 = Male 50 years old</li> <li>Policyholder 2/Insured 2 = Female 48 years old</li> <li>Insured 3 = Child 1, 15 years old</li> <li>Insured 4 = Child 2, 17 years old</li> </ul> <ul style="list-style-type: none"> <li>Offer from new insurance company for a policy to coverage the 2 children</li> <li>Consent from Policyholder 2/Insured 2</li> <li>2 separate requests – one for each insured – Insured 3 and Insured 4 (CPR No.)</li> <li>Claims regarding Insured 3 and Insured 4 are returned as 2 separate responses.</li> </ul> <p>Example 4</p> <ul style="list-style-type: none"> <li>Policy 1 (current insurance company)</li> <li>Policyholder 1/Insured 1 = Male 50 years old</li> <li>Policyholder 2/Insured 2 = Female 48 years old</li> <li>Insured 3 = Child 1, 15 years old</li> <li>Insured 4 = Child 2, 19 years old</li> </ul> <ul style="list-style-type: none"> <li>Offer from new insurance company for a policy to coverage Insured 4</li> <li>Consent from Insured 4</li> <li>1 request for Insured 4 (CPR No.)</li> <li>Claims regarding Insured 4 are returned in the response</li> </ul>		
Section 2.5	<p>Clarification regarding the storing and processing of data:</p> <p>The companies' consent/confirmation letter must include a list of the companies to which requests have been made. Specifically when using the solution in connection with online sales, the customer must actively indicate the companies and industries from which claim history is desired. Regarding industries it is open to the companies to require claim history for other industry/product groups than those for which offers are retrieved. A company can, for example, require the retrieval of claim history for a home insurance if the customer only needs a content insurance.</p> <p>For the benefit of auditing, companies need to store data for a certain period of time. However, in case of requests to which the response is "Unknown customer", data must be deleted immediately by the ceding company and as soon as possible by the receiving company.</p> <p>Data must not be stored any longer than necessary.</p> <p>Requests must not be used by the receiving company to subsequently contact customers with the purpose of marketing and offers.</p>	X	X
Sections 2.8.1 + 2.8.2 + 2.9.5 + 2.9.6.1 + 2.9.6.3	<p>Requests/responses for accident can involve either the policyholder or insured. For industry 002 Private, 003 Pleasure Craft and 005 Accident, requests can be for policy number</p>	X	
Sections 2.8.1 + 2.8.2 +	<p>Consent confirmation is divided into two - consent for claim history/bonus and consent for arrears. The response must indicate whether responses Yes or No have been received or whether a</p>	X	X

2.9.9 + 2.9.17	request was not sent (the latter is only possible for consent for arrears). Examples inserted in Section 2.9.17		
Sections 2.8.2 + 2.9.19	The list of coverage levels has been expanded with the coverage levels for Private	X	
Section 2.8.2	Claim type – clarification for rules for including claim type in responses	X	X
Section 2.8.2	Amount paid – clarification of when amount must not be included in the response for private	X	
Section 2.8.2	Manually determined reserves – clarification of when manually determined reserves must not be included in the response	X	
Section 2.9.10	Listing of industry/product groups for the private area	X	
Sections 2.9.23 + 2.9.24	Amounts paid and manually determined reserves: Surrendered claims are also considered to be 0-claims.  Where the claim is a service purchased outside and it is also a single claim where the price of the service is not camouflaged by other amounts, the value -10 is entered in the amount field.  Specifically for vehicle – clarification added  Specifically for private – clarification added  Specifically for accident – clarification added	X	X
Section 2.9.25	Clarification of the definition for prejudicial damage.  The definition is inserted in section 2.9.25.  Roadside assistance claims is not prejudicial.	X	X

## 1.2 Appendix 1 Rest Api

Change made	Change description	Only relevant to companies signed up for private	Relevant to all companies
Section 4	<p>DEMO has changed name to Test.</p> <p>DEMO:</p> <p>API Endpoint: <a href="https://testedi.forsikringogpension.dk/api/v3/claimservice/claimhistory">https://testedi.forsikringogpension.dk/api/v3/claimservice/claimhistory</a></p> <p>IP address from which the FP server is calling: 81.19.248.248</p> <p>Production:</p> <p>API Endpoint: <a href="https://edi.forsikringogpension.dk/api/v3/claimservice/claimhistory">https://edi.forsikringogpension.dk/api/v3/claimservice/claimhistory</a></p> <p>IP address from which the FP server is calling: 81.19.248.254</p> <p>Online documentation:</p>	X	X

	<p>ClaimService Apis online documentation is to be found on this address: <a href="https://testedi.forsikringogpension.dk/api">https://testedi.forsikringogpension.dk/api</a></p>		
Section 4	<p>Companies:</p> <p>Added the following IndustryProductGroups:            002/001            002/002            002/003            002/004            002/005            003/001            005/001</p> <p>Deleted the following IndustryProductGroups:            006/008            006/009</p>	X	X
Section 4	<p>HistoryRequest (input):</p> <p>Version:            Added indication of version number</p>	X	X
Section 4	<p>HistoryRequest (input):</p> <p>Added the following ObjectIdQualifier (POL=policy number)            002 private            003 pleasure craft            005 accident</p>	X	
Section 4	<p>HistoryRequest (input):</p> <p>Added extra confirmation for consent for arrears:            ConsentFormArrears</p>	X	X
Section 4	<p>HistoryRequest (output):</p> <p>&lt;Policy&gt;            Arrears:</p> <ul style="list-style-type: none"> <li>• Changed from Bool to Integer</li> <li>• Changed from not-required to required field</li> <li>• Values: 0=No, 1=Yes, 2=Not requested</li> </ul>	X	X
Section 4	<p>HistoryRequest (output):</p> <p>The following information is added under &lt;Policy&gt;</p> <ul style="list-style-type: none"> <li>• ProductName</li> <li>• ObjectIdQualifier</li> <li>• ObjectId</li> </ul>	X	X
Section 4	<p>HistoryRequest (output):</p> <p>&lt;Claim&gt;</p> <p>ClaimLevels:            New values entered for all industries            – see 'HistoryRequest – Coverage levels'</p>	X	X
Section 4	<p>HistoryRequest (output):</p> <p>&lt;Claim&gt;</p> <p>ClaimPayed:</p>		



	<p>New values for amount paid -10 = Not stated</p> <p>ClaimReserve: New values for amount paid -10 = Not stated</p>	X	X
Server checks	<p>IndustryProductGroups must be minimum one of the following values: 001/001-001/007, 002/001-002/005, 003/001, 004/001-004/009, 005/001, 006/001-006/007</p> <p><del>Object identification type POL must only be used for industry 001, 002, 003 and 005</del></p> <p>Object identification types <b>POL</b>, REG and VIN must only be used for industry 001</p> <p>Version must be 3.0</p>	X	X
Return codes and text	<p>New return codes added:</p> <ul style="list-style-type: none"> <li>400 Bad request, 37 Invalid version</li> <li><del>400 Bad request, 503 Error from Company</del></li> </ul> <p><del>Result Code 503 must be used if the company wishes to reject and the rejection is not unknown customer or unknown object/policy. In Result Text, the company must indicate a rejection cause.</del></p>	X	X

### 1.3 Appendix 3 Rules and principles for information exchange

Change made	Change description	Only relevant to companies signed up for private	Relevant to all companies
Entire document	This represents a general rewriting of the document – the entire document should therefore be read again	X	X

### 1.4 Appendix 4 Consent

Change made	Change description	Only relevant to companies signed up for private	Relevant to all companies
Section 2.2.2	<p>Example of consent declaration – Private</p> <p>Clarification that CPR number can be used to retrieve the information</p>	X	X

## 2 Version 2.0 Final – 31 October 2019

Version 2.0 Final was published on 31 October 2019.

### 2.1 Guide for Online Claim History for business, agriculture, and vehicle

Version 2.0 Final was published on 31 October 2019.

#### Section 2.1.1

Clarification that bonus is exchanged on the basis of what the company has recorded in its own systems.

#### Section 2.1.3

New section regarding consent checking.

Consent checking

The consent requirements are described in Appendix 4, Consent.

It is up to each individual company to ensure the auditing of the consents they have obtained.

The consent is not included in the request. If in some cases a company is unsure whether the consent has been obtained, the company can request to see the consent. In case of companies being unable to provide satisfactory consent, this will be presented to the Business Insurance Committee (business/agriculture), the Private Insurance Committee and/or the Car Insurance Committee, which will discuss the need for further measures.

#### Section 2.4

A change to clarification regarding bonus:

Current text:

- A response for Bonus can result in claim-free years of 1 year, 10 years, 20 years, etc.
- When a response for bonus is made for CPR No./CVR No., the response must include bonus for all policies active within the previous 5 years. Where there have been no active policies within the previous 5 years, a bonus response is not returned/the response is unknown customer.
- Where the response includes bonus to a request on CPR No./CVR No., bonus must be included relative to the most recently active vehicle for a given policy.
- In case of a request for bonus for a specific reg.no., bonus for this reg. no. must be returned if there has been an active policy within the previous 5 years, and otherwise no bonus response is sent/the response is unknown customer.

New text (change to bullets 2 + 3):

- A response for Bonus can result in claim-free years of 1 year, 10 years, 20 years, etc.
- When a response for bonus is made for a request on CPR No./CVR No., bonus must be included for active policies for all active cars and not for previous/deleted cars.

- When response for bonus is made for a request on CPR No./CVR No., bonus must be included for the most recently deleted car for deleted policies, regardless of whether the same policy included several cars.
- In case of a request for bonus for a specific reg.no., bonus for this reg. no. must be returned if there has been an active policy within the previous 5 years, and otherwise no bonus response is sent/the response is unknown customer.

### Examples in section 2.9.10

Change to example.

Current text:

Example:

- A customer has a policy created by Company A 08.2003
- The customer cancels the policy with Company A and the policy expires 08.2005.
- The customer returns and reinstates the policy 01.2008
- The response will result in 2 policies (with the same policy No.)
  - Policy A: Effective from 08.2003 and expiry 08.2005, any claims
  - Policy A: Effective from 01.2008 no expiry date, any claims and bonus

New text:

Example:

- A customer has a policy created by Company A 08.2003
- The customer cancels the policy with Company A and the policy expires 08.2005.
- The customer returns to Company A and reinstates the policy 01.2008
- The customer contacts Company B, which sends a request of 01.2009 to Company A
- The response from Company A will result in 2 policies (with the same policy No.)
  - Policy A: Effective from 08.2003 and expiry 08.2005, any claims
  - Policy A: Effective from 01.2008 no expiry date, any claims and bonus

### Number of claim-free years section 2.9.13

The wording of section 2.9.13 was arrived at in connection with the working group's discussions regarding transfer of claim-free years from company to company, the result of which was that this was not information that we wanted to disclose. It is therefore only a requirement that the company can provide number of claim-free years in own company, but if more is available, it is permitted to provide it.

Current text:

The customer's number of claim-free years is stated. However, the maximum is the number of years that the customer has had an insurance with the company.

For tractors and machinery, the number of claim-free years must always be stated as 0.

New text:

The customer's number of claim-free years is stated. As a minimum the number of the years that the customer has effectively had an insurance with the company.

For tractors and machinery, the number of claim-free years must always be stated as 0.

### Clarification regarding claims with prejudice section 2.9.24

Deleted 'only' in the text to make it clear that a response must be provided as to whether a claim is prejudicial for all closed claims.

Current text:

Here it is stated whether the claim has or has not been prejudicial to the policyholder's policy. The term prejudicial is taken to mean that the policyholder is liable for the claim and has not invoked no-claim protection. The marking for prejudicial claim (yes/no) must only be entered for closed cases – where a claim is open, the field is returned blank.

New text:

Here it is stated whether the claim has or has not been prejudicial to the policyholder's policy. The term prejudicial is taken to mean that the policyholder is liable for the claim and has not invoked no-claim protection. The marking for prejudicial claim (yes/no) must be entered for closed cases – where a claim is open, the field is returned blank.

### 2.2 Appendix 1 Rest Api

Extra error code added:

502	BadGateway	251	Error calling responding Company
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### 3 Version 2.0 Draft E – September 2019

Version 2.0 final will be published on 31 October 2019.

#### 3.1 Guide for Online Claim History for business, agriculture, and vehicle

Version 2.0 will be published on 31 October 2019.

##### Section 2.3, Specifically for motor vehicles

The following text has been added:

Arrears must be disclosed when all the following criteria have been satisfied:

- Industry/product group 001
- The policy comprises statutory motor vehicle liability insurance
- The subject is premium arrears due within 2 years
- The reminder payment date has been exceeded (note - the reminder procedures may differ between companies)

Arrears are disclosed regardless of whether a policy is in force or deleted/exported.

In some companies, this will be after the 1st reminder or the 2nd reminder and in some companies

perhaps already after the original payment date has been exceeded if this date is the same as the reminder date.

##### Section 2.4

The following text has been added:

For Bonus the following applies:

- A response for Bonus can result in claim-free years of 1 year, 10 years, 20 years, etc.
- When a response for bonus is made for CPR No./CVR No., the response must include bonus for all policies active within the previous 5 years. Where there have been no active policies within the previous 5 years, a bonus response is not returned/the response is unknown customer.
- Where the response includes bonus to a request on CPR No./CVR No., bonus must be included relative to the most recently active vehicle for a given policy.
- In case of a request for bonus for a specific reg.no., bonus for this reg. no. must be returned if there has been an active policy within the previous 5 years, and otherwise no bonus response is sent/the response is unknown customer.

##### Section 2.7

New section added:

###### Availability

Data exchange must be available 24/7. Any service windows must, however, be considered. As a general rule, the FP server has a short service window every 3rd Sunday of the month from 03:00 and approx. 30 minutes on for maintenance purposes. In this and similar situations, the companies will receive a Status 503 return response if the FP server is unable to contact the database server. If the FP server/endpoint is unavailable, however, the company's own system will generate an error (company specific).

The EDI office will provide advance notification to all IT technology and business technology contacts in case of planned down-times in addition to the aforementioned periods.

If a company has to disable requests/responses for a period due to maintenance or other reasons, F&P is notified via a call to an API. The same takes place on re-opening.

If the FP server responds that a company is closed, a new request has to be submitted at a later time.

### Section 2.9.10

The following text has been added:

The policy commencement date shall, as a general rule, be the date on which the policy comes into force. If a customer has terminated an insurance, but returns to the company after e.g., 1 year (same policy number is reused), the commencement date will be the same as the reinstatement date for the policy. Conversely, the original commencement date would have to be stated if the customer changes their mind and therefore in reality has not had a broken cover period. When reinstating expired policy numbers, the expired and active policy must be indicated separately. The purpose is to make breaks in the cover period visible.

Example:

- A customer has a policy created by Company A 08.2003
- The customer cancels the policy with Company A and the policy expires 08.2005.
- The customer returns and reinstates the policy 01.2008
- The response will result in 2 policies (with the same policy No.)
  - Policy A: Effective from 08.2003 and expiry 08.2005, any claims
  - Policy A: Effective from 01.2008 no expiry date, any claims and bonus

### Section 2.9.13

The following text has been added:

For tractors and machinery, the number of claim-free years must always be stated as 0.

### Section 2.9.16

The following line has been deleted:

~~A policy is in arrears when reminder status is 2 or more.~~

### Section 2.9.22

The following text has been added:

This means that:

- Claim amount paid is **not** disclosed:

- For claims at cover level Driver (without claim at other cover levels) = the cover level is disclosed, claim amount paid/manually determined reserves are not disclosed
- For claims at cover level Roadside assistance (without claim at other cover levels) = the cover level is disclosed, claim amount paid/manually determined reserves are not disclosed
- For claims at cover level Glass (without claim at other cover levels) = the cover level is disclosed, claim amount paid/manually determined reserves are not disclosed
- For claims at cover level Driver, Roadside assistance and/or Glass (without claim at other cover levels) = the cover levels are disclosed, claim amount paid/manually determined reserves are not disclosed
- The total claim amount paid is disclosed:
  - For claims at cover level Comprehensive, Driver and/or Roadside assistance and/or Glass = cover levels are disclosed and claim amount paid/manually determined reserves are disclosed (full claim amount)
  - For claims at cover level Liability, Driver and/or Roadside assistance and/or Glass = cover levels are disclosed and claim amount paid/manually determined reserves are disclosed (full claim amount)
  - The exception to the 2 previous bullets is that the company does not hold data about the glass claim or roadside assistance amount because the service is purchased externally and therefore cannot be disclosed. In these cases, the cover levels and comprehensive or liability amount/reserve are disclosed

### Section 2.9.23

The following text has been added:

This means that:

- Manually determined reserves are **not** disclosed:
  - For claims at cover level Driver (without claim at other cover levels) = the cover level is disclosed, claim amount paid/manually determined reserves are not disclosed
  - For claims at cover level Roadside assistance (without claim at other cover levels) = the cover level is disclosed, claim amount paid/manually determined reserves are not disclosed
  - For claims at cover level Glass (without claim at other cover levels) = the cover level is disclosed, claim amount paid/manually determined reserves are not disclosed
  - For claims at cover level Driver, Roadside assistance and/or Glass (without claim at other cover levels) = the cover levels are disclosed, claim amount paid/manually determined reserves are not disclosed
- The total manually determined reserve is disclosed:

- For claims at cover level Comprehensive, Driver and/or Roadside assistance and/or Glass = cover levels are disclosed and claim amount paid/manually determined reserves are disclosed (full claim amount)
- For claims at cover level Liability, Driver and/or Roadside assistance and/or Glass = cover levels are disclosed and claim amount paid/manually determined reserves are disclosed (full claim amount)
- The exception to the 2 previous bullets is that the company does not hold data about the glass claim or roadside assistance amount because the service is purchased externally and therefore cannot be disclosed. In these cases, the cover levels and comprehensive or liability amount/reserve are disclosed

All changes are marked in yellow in the document.

### 3.2 Appendix 1 Rest Api

VINnumber is amended to VINNumber on page 18

Two new server checks have been added on page 22:

- The request is checked for correct data types
- Test bit production must not be initiated unless submitting to a robot company (VIR000000) or own company

3 extra return codes have been added on page 23:

400	Bad request	28	Test bit not allowed
400	Bad request	36	Invalid Request datatype
503	Service Unavailable	254	Service currently unavailable

All changes are marked in yellow in the document.



### 4 Version 2.0 Draft D – June 2019

Version 2.0 final will be published on the implementation date.

#### 4.1 Guide for Online Claim History for business, agriculture, and vehicle

Version 2.0 will be published on the implementation date.

The changes consist in:

- Sections 2.1.1 + 2.4: implementation date is delayed for some time until the companies finish the testing of their solutions
- Section 2.1.3: this section is removed as F&P will not in future perform semiannual consent checking
- Section 2.4: the following clarification is added:

A request on CVR No. on ind/prd 004/001, 004/002 and 001/001 (reg. no. AAXXXXXX) will return claim history for all claims on ind/prd 004/001 and 004/002 and claims for the specific car with reg. no. AAXXXXXX. This example shows that the information regarding object identification/type only relates to Vehicle and not the other product groups.

If claim history/bonus is required for two specific cars, 2 requests will be required:

- 001/001 Reg. no. AAXXXXXX
  - 001/001 Reg. no. BBXXXXXX
- Section 2.8.24: the following clarification is added:

The marking for prejudicial claim (yes/no) must only be entered for closed cases – where a claim is open, the field is returned blank.

All changes are marked in yellow in the document.

#### 4.2 Appendix 1 Rest Api

- General: test examples and API end points have been amended Section 3: a couple of addresses related to tokens have been amended.
- Section 4: API end points and IP addresses have been added and it has been clarified that fields with no value can be either excluded or a null value can be entered.
- HistoryRequest – output:
  - Industry group 001 has been added where relevant
  - CustomerName can have up to 128 characters and not just 3 as originally stated
  - Arrears is not a required field – but it must be completed (true/false) for industry group 001 vehicle
  - VehicleBonus – Industry ProductGroup is always ind/prd 001/001
  - ClaimLevel is not a required field, but must be completed for industry group 001 vehicle
- Section 6: subsection added regarding technical test report

All changes are marked in yellow in the document.

### **5 Version 2.0 Draft C – December 2018**

Version 2.0 final will be published with implementation date 25 June 2019.

#### **5.1 Guide for Online Claim History for business, agriculture, and vehicle**

Version 2.0 will be published with implementation date 25 June 2019.

The changes primarily consist in the ability to exchange claim history for industry group 001 Vehicle and exchange bonus information for industry/product group 001/001 Motor vehicles.

The web solution will be discontinued as of 25 June 2019. After this, the Claim History solution will be exclusively an online solution. It will, however, still be possible to view (reading access) the web log to see what has been sent and received for one's own company.

All changes are marked in yellow in the document.

#### **5.2 Appendix 1 Rest Api**

The document replaces previous Appendix 1 regarding XML web service and therefore has completely new content. The solution format is changed from SOAP to REST.

Testing can be carried out in SOAP until 25 June 2019 after which Rest Api will be used exclusively for the Claim History solution. OAuth2 is used as security for calls to F&P. When F&P calls the companies, selection can be made between OAuth2 or JWT.

The web solution (offline companies) shall be discontinued as of 25 June 2019. After this, the Claim History solution will be exclusively an online solution.

#### **5.3 Appendix 3 Personal information regulations**

The claim history solution has been assessed in relation to the General Data Protection Directive and changes marked in yellow in the document.

#### **5.4 Appendix 4 Consent**

Several legal amendments have been made in the document and the industry group 001 Motor vehicles has been added.

All changes are marked in yellow in the document.

## **6 Version 1.0 – SEPTEMBER 2017**

Version 1.0 final will be published with implementation date 4 September 2017.

### **6.1 EDI guide Claim History for business and agriculture**

Version 1.0 final will be published with implementation date 4 September 2017.

### **6.2 Appendix 1 XML Web service**

Version 1.0 final will be published with implementation date 4 September 2017.