



Insurance Company Reporting User Guide Issue 5 Final

Mississippi Department of Public Safety Mississippi Insurance Verification System

February 2025

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1 Introduction

1.1 Background

In 2012, the Mississippi Legislature passed the Public Safety Verification and Enforcement Act requiring the Mississippi Department of Public Safety (DPS), in cooperation with the Mississippi Commissioner of Insurance (MID) and the Mississippi Department of Revenue (DOR) to establish an accessible common-carrier based motor vehicle insurance verification system to be used by law enforcement agencies to identify uninsured motorists. In 2015, the Act was revised to address specific interagency systems and certain legal limitations. After the revision, the State issued an RFP in October 2015. In March 2016, the State awarded the contract to HDI Solutions, LLC (HDI) to develop and implement its **DRIVe** solution to fulfill the requirements of the Mississippi Vehicle Insurance Verification System (MSVIVS).

1.2 Requirements

The Act requires the **DRIVe** solution to send requests to insurance companies to verify motor vehicle liability insurance using IICMVA web services standards. It also requires the system to receive monthly insurance data file transfers from insurance companies issuing liability policies in Mississippi. For small insurance companies not able to participate in web services, HDI has developed a method to receive the required data.

The procedures for the insurance companies required to participate in the MSVIVS program will be outlined within this document.

1.3 Exemptions

The following vehicle types are excluded from the Mississippi program:

- Vehicles covered under commercial auto coverage
- Vehicles qualified for a fleet registration
- Vehicles that are part of a self-insured corporate or individual fleet registered under Section 27-19-66, or self-insured under Section 63-15-53
- Vehicles included on an insurance binder that has not been entered into the system at the time the verification system is accessed
- Vehicles exempt from proof of insurance requirements under Section 63-15-4 (1)
- Vehicles with a gross weight of 16,000 pounds or greater
- Motor vehicles for which a bond or certificate of deposit of money or securities in at least the minimum amounts required for proof of financial responsibility is on file with the State

- Implements of husbandry

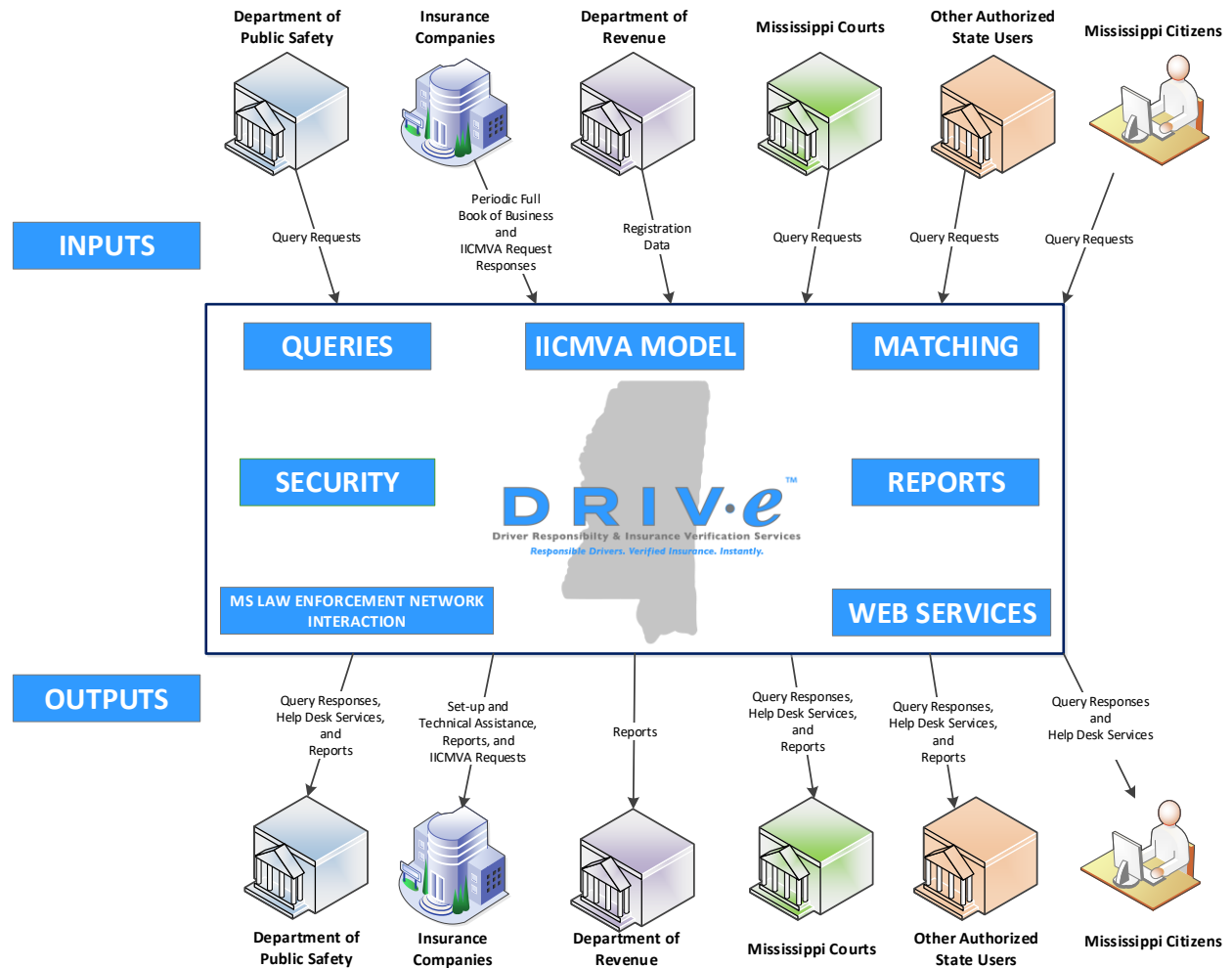
1.4 Pilot Program and Go-Live

The Department of Public Safety and HDI have established a go-live date of September 5, 2017. The pilot program was conducted until that date when the program was officially implemented to a live system.

2 Mississippi DRIVE System

2.1 System Overview

A diagram outlining the **DRIVE** solution for the MSVIVS program is provided below.



3 Insurance Company Enrollment and Information Changes

3.1 Enrollment Procedures

An insurance company must submit an Insurance Company Profile Form for each NAIC (see Appendix A) before testing with HDI. The following information must be included on the Company Profile Form:

- Insurance Company Name
- NAIC
- Address
- Number of Vehicles
- Number of Policies
- Business Contact Information
- Technical Contact Information
- Format Type
- Clarification on Supporting Broadcast VIN-Only Queries

Insurance companies utilizing a third-party reporting service must also submit a form. Contact information must be included for both the insurance company and the third-party reporting service.

Once the completed form is returned, HDI will communicate with the company contacts to collect the necessary connectivity information for web services, discuss the testing process and timeframe for data transfer and web services, and answer any questions about the program. HDI will also assign a Provider Control Code (PCC) to each insurance company or unique NAIC. This code will be used to differentiate the source of the data that is submitted to HDI.

3.2 Insurance Company Information Changes

3.2.1 Name Changes

Insurance company name changes must be submitted to HDI within 30 days of the change. To submit this information, please provide an updated Insurance Company Profile Form for each NAIC (see Appendix A).

3.2.2 Contact Information Changes

Insurance companies must report any contact information changes as soon as possible by emailing scott.brown@hdisolutions.com. The email should include the Provider Control Code for each company with the contact information changes.

4 Insurance Data Transfer

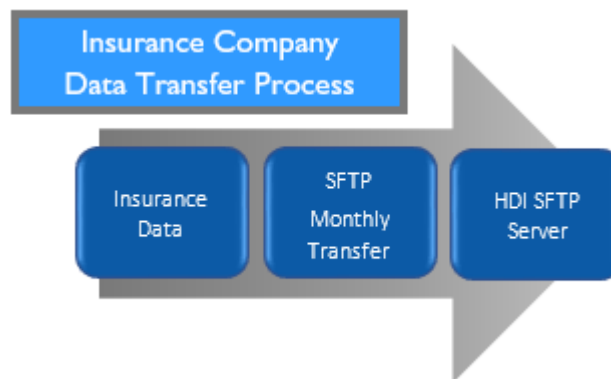
4.1 Overview

The program requires a vendor-maintained database and an IICMVA web services program. Authorized state users access the program through **DRIVe**. **DRIVe** maintains the data submitted by the insurance companies.

Insurance companies are required to submit personal automobile insurance policy records to HDI. The submissions are reported monthly and must be in compliance with the format and technical requirements set forth in this manual.

4.2 Data Transfer Process

The data will be transferred using the format noted below in section 4.4.1 Detail Record to the HDI SFTP site. Upon initial registration with the program, each insurance company will be provided with the specifications, including login information, for the data submission process.



4.3 Small Insurance Companies

HDI will work with limited market share insurance companies writing less than 500 policies annually within the State of Mississippi that are unable to deploy an online web service interface with the system.

These companies should submit a monthly book of business via HDI's SFTP site using the same guidelines outlined below. Because small insurance companies are not required to deploy a web services system, all fields in the data transfer in Section 4.4 below will be mandatory. For further information, please contact HDI by emailing scott.brown@hdisolutions.com.

4.4 Guidelines and Data Format Specifications

Insurance companies doing business in Mississippi are required to report all vehicles covered by their liability insurance policies in Mississippi. Each insurance company will submit a monthly data file based on the IICMVA Insurance Data Transfer Guide. A link to the guide is provided below.

[IICMVA Insurance Data Transfer Implementation Guide - V1.2](#)

The data in each record shall always be recorded in fixed length fields using the 7-bit American Standard Code for Information Interchange (ASCII).

The field name “Mandatory/Optional” is used to identify data which is required (Mandatory) or optionally (Optional) provided by the entity transmitting the file. “Optional” data fields will be transmitted at the discretion of the insurance company, with the exception of small insurers as explained in Section 4.3, based upon the submitting company’s independent business rules.

Companies are encouraged to report all available data, including optional fields. Mandatory fields are required for matching purposes; however, those fields not available to the company should be left blank. Fillers or dummy data should not be submitted for fields where the company does not collect data. Providing the optional fields affords **DRIVE** a better opportunity to match the registration record to an Insurer of Record therefore limiting the need for VIN-only broadcast queries.

Transmission methods and security processes allow for the identification of sender and receiver of data which eliminates the need for a header record. The trailer record was included to allow the receiver to validate all data sent was received. Each record shall consist of a record size of 300 bytes and adhere to the following structures.

Please note that each line (record) of the data file should include a carriage return and line feed.

4.4.1 Detail Record

Field Name	Length	Begin	End	Type	Mandatory /Optional	Description
PROVIDER CONTROL CODE (PCC)	5	1	5	N	M	Provider Control Code assigned by HDI
POLICY TYPE	2	6	7	AN	M	'VS' = Vehicle Specific 'NS' = Non Vehicle Specific
NAIC	5	8	12	N	M	NAIC Code
POLICY NUMBER	30	13	42	AN	M	Policy Number
EFFECTIVE DATE	8	43	50	N	M	Effective Date – YYYYMMDD format
VIN	25	51	75	AN	O	VIN (only optional for non-vehicle specific policy)
LAST NAME OR ORGANIZATION	40	76	115	AN	O	
PREFIX NAME ABBR	3	116	118	AN	O	
MIDDLE NAME	20	119	138	AN	O	
FIRST NAME	40	139	178	AN	O	
SUFFIX NAME	3	179	181	AN	O	Abbreviated Name Suffix (JR, SR, etc.)
FEIN	9	182	190	AN	O	

Field Name	Length	Begin	End	Type	Mandatory /Optional	Description
ADDRESS	50	191	240	AN	O	
CITY	35	241	275	AN	O	
STATE	2	276	277	AN	O	
ZIP	5	278	282	N	O	
COMMERCIAL POLICY INDICATOR	1	283	283	AN	O	Y for Commercial Policy
FILLER	17	284	300	AN	O	Space Filled

Please note that the COMMERCIAL POLICY INDICATOR was added to the Insurance Data Transfer Guide on January 3, 2017. Insurance companies who wish to use the previous format are welcome to do so. This would simply mean leaving off the COMMERCIAL POLICY INDICATOR field. If an insurance company will be using the COMMERCIAL POLICY INDICATOR field, this will need to be communicated to the HDI contacts listed in Section 7.1 before the next submission period.

4.4.2 Trailer Record

Field Name	Length	Begin	End	Type	Mandatory /Optional	Description
Type	2	1	2	AN	M	'TR'=Trailer
Record Count	12	3	14	N	M	Record count not including Trailer Record
Process Date	8	15	22	N	M	Date the file was created – YYYYMMDD format
Filler	260	23	300	AN	M	Space Filled

4.5 Frequency

New insurance companies are required to be in compliance within 30 days of writing personal automobile insurance in Mississippi.

Insurance companies are required to submit data monthly on all current personal automobile insurance policies in Mississippi.

4.6 Reporting Period

Insurance companies are required to submit data no later than 5:00 PM CT on the first Tuesday of each month.

4.7 Data Submission Procedures

An insurance company must submit one or more data files. Each file submitted must only contain records for one Provider-Control-Code (PCC).

In order for all file submissions to be properly processed for each reporting period, the following data submission procedures must be followed:

- For each reporting period, the submission window closes at 5:00 PM CT on the first Tuesday of each month. The submission window opens on the previous Wednesday at 8:00 AM CT. This will usually be the last Wednesday of the previous month but may be the first Wednesday of the current month if the first Tuesday falls on the 7th.
- All files submitted with proper file naming conventions will be either received or rejected as they are processed during the submission period. The receipt or rejection notification will be sent as soon as possible, and this is accomplished through the Acceptance Report and the Rejection Report detailed in Section 4.11 below. Submission staff will follow up directly with companies that submit files not conforming to the requirements (i.e., companies receiving a rejection notice).
- Companies that have not submitted a usable file by Monday afternoon will be notified that a usable file must be received by 5:00 PM CT on Tuesday, in order for their data to be included in the current processing period.
- If a company has no policies to report for a particular reporting period, a zero-record file must still be submitted. The filename will note the zero record count and the data within the file should only be a trailer record.

4.8 File Naming Convention

The following outlines the file naming convention used for data submission:

- The file name must consist of the Provider Control Code, Period Processing Date, File Number, Total Record Count, and reporting format delimited by underscores.
- The date format must be YYYYMMDD, and the File Number must be unique among a set of files submitted for a single company and indicate the total number of files sent.
- The date included in the file name indicates the first day of the reporting period for the submission.
- Below is an example. If the Provider Control Code is 12345, the next processing period begins November 6, 2016, and the company split one million records equally between two files, the file names should be:

12345_20190227_1of2_500000.pgp

12345_20190227_2of2_500000.pgp

4.9 File Structure

One record should be generated for each customer, vehicle, and policy combination. If there are multiple customers or multiple vehicles on the same policy, then the insurance company will need to provide one record for each. Each line of the file will consist of a single record. The last line of the file will be the trailer record.

- Below is an example of two customers and two vehicles on the same policy (where * represents spaces). The fifth record is the trailer record.

```
12345VS100011295153707*****201702189U7ZY66V4N
A667927*****COOK*****E*
*****RYAN*****
```

```
*****5544*5TH*AVE*****S  
TARKVILLE*****MS39759*****  
  
12345VS100011295153707*****201702188N5AH63Y9E  
R373129*****COOK*****E*  
*****RYAN*****  
*****5544*5TH*AVE*****S  
TARKVILLE*****MS39759*****  
  
12345VS100011295153707*****201702189U7ZY66V4N  
A667927*****COOK*****A*  
*****KAREN*****  
*****5544*5TH*AVE*****S  
TARKVILLE*****MS39759*****  
  
12345VS100011295153707*****201702188N5AH63Y9E  
R373129*****COOK*****A*  
*****KAREN*****  
*****5544*5TH*AVE*****S  
TARKVILLE*****MS39759*****  
  
TR00000000000420170605*****  
*****  
*****  
*****  
*****
```

4.10 File Compression and Encryption

Encryption of the data files via PGP is required. HDI will provide its public PGP key to the insurance companies. (Please note that using your own public PGP signature will cause the file to be rejected.) The expected file extension is 'pgp.' PGP encryption also compresses. If additional compression is required, HDI will address this with the insurance company on an individual basis.

4.11 Reports

4.11.1 Acceptance Report

An Acceptance Report will be provided to the insurance company once all data has been successfully processed in a file. It will include unmatched data, data compliance summaries, and will be reported to the insurance company via the receipt of a file in the insurance company's Reports SFTP folder.

The file naming convention for the Acceptance Report file is:

```
12345_20190227_1of1_500000_ACC.txt
```

Companies submitting multiple files will receive an Acceptance Report for each file submitted. It is recommended that companies review the Acceptance Reports to ensure that HDI has received the number of records per file.

The Acceptance Report will provide the total number of records processed, the total number of unmatched records, the match rate for each individual file submitted, and the total number of fields with missing data. Insurance companies may reference the Data Compliance Report to determine which records contain missing fields at the policy level.

The format of the information provided in the report will be name-value pairs delimited by the '=' character. An email will be sent to inform the insurance company of the availability of the report.

Example:

```
RecordsProcessed=75129
UnmatchedRecords=322
MatchRate%=99.57
ProviderControlCodeMissing=0
PolicyTypeMissing=0
NAICMissing=0
PolicyNumberMissing=0
PolicyEffectiveDateMissing=0
VehicleVINMissing=0
LastNameOrgMissing=0
PrefixNameAbbr=425
MiddleNameMissing=150
FirstNameMissing=2
SuffixNameMissing=340
FEINMissing=75129
AddressMissing=0
CityMissing=0
StateMissing=2
ZIPMissing=0
```

4.11.2 Rejection Report

In the event that a file cannot be successfully processed due to decryption, decompression, field format, or poor overall data quality, a Rejection Report will be sent to the insurance company via the receipt of a file in the insurance company's Report SFTP folder. An email will be sent to inform the insurance company of the availability of the report.

The file naming convention for the Rejection Report file is:

```
12345_20190227_1of1_500000_REJ.txt
```

The format of the data will be name-value pairs delimited by the '=' character.

Example:

```
DecryptionError=true
CompressionError=true
FileFormatError=true
```

If the file is accepted, a Rejection Report will not be generated.

4.11.3 Data Compliance Report

Records reported with missing fields or fields formatted incorrectly are tracked at the record level. While the Acceptance Report provides the total number of records with required missing fields, the Data Compliance Report provides which records contain missing fields at the record level. In the Data Compliance Report (provided separately from the Acceptance Report), the specific index of a missing or incorrectly formatted field within a record and the error code will be appended to the end of the original record and returned to the insurance company. The following error code is applicable to missing fields:

Error Code	Description
100	Field not present
101	Field format incorrect

Each error indicator will be of the format [X^#] where X is the index of the field and # is the error number. For example, if field number 12 were omitted, the error code appended to the end of the record would be [12^100]. A bracketed error indicator for each missing field element will be appended directly to the end of the original record. Due to the addition of a potentially endless number of errors, these error records will be a variable length record beginning at this last 'error field.'

The file naming convention for the Data Compliance Report file is:

12345_20190227_of1_500000_COM.pgp

Sample Data Compliance Report

(Missing policy number; this is highlighted as + in this example, where * and + both represent spaces.)

```
12345VS10001+++++201703011B3AS26C13
D121940*****BULLOCK*****H*
*****ALEXIS*****
*****521*SE*WALL*AVE*****
LAUREL*****MS39440*****
[4^100]
```

If there are no data compliance issues, a Data Compliance Report will not be generated.

4.11.4 VIN Rejection Report

The VIN rejection file will include all unmatched 17-character VINs not conforming to the VIN standard established, or was matched using fuzzy logic matching, including commercial policies. The contents of the report file will include three fixed-length fields. Each record will comprise one line of the report.

Results

- Policy (fixed length 30)
- VIN (fixed length 25)
- Validation Error (fixed length 3)

Criteria which will be used to verify valid VINS (validation errors):

- 200 – **Alphanumeric Validation:** A VIN must contain alphanumeric characters only. Number: 0-9 and Letters: A-Z with some exceptions as listed below.
- 201 – **Last 4 Digits Validation:** The last 4 characters of the VIN must be numeric values.
- 202 – **Filler Validation:** A VIN must not have fillers (E.g., 2222222222222222)
- 204 – **Letters Validation:** A VIN must not contain the letters I, O, or Q. They are never to be used in a VIN.
- 205 – **Check Digit Validation:** The ninth character of the VIN (Check Digit) must be a number between 0-9 or the letter X.
- 206 – **Checksum Validation:** Each VIN must pass the checksum test based on the check digit (character in the 9th position).
- 207 – **Fuzzy Match Validation:** Indicates that while HDI matched the insurance VIN to the registration VIN, fuzzy logic was utilized to make this match. The VIN match was not a perfect match.

The file naming convention for the VIN Rejection Report file is

12345_20190227_1of1_500000_VIN.pgp

Sample VIN Rejection Report (where * represents spaces)

```
XYZ234567*****2222222222222222*****202  
PQR456789*****1DV9832RQ9K325646*****204
```

4.11.5 Unmatched Policies Report

Policy records which have not been matched to a corresponding registration record will be included in the Unmatched Policies Report. In the Unmatched Policies Report, an error code will be appended to the end of the original record and returned to the insurance company. The following error code is applicable:

Error Code	Description
300	Policy record not matched to a registration

The error indicator will be of the format [#] where # is the error code number. A bracketed error indicator will be appended directly to the end of the original record.

The file naming convention for the Unmatched Policies Report file is:

12345_20190227_1of1_500000_UNM.pgp

Sample Unmatched Policies Report

(* represents spaces.)

```
12345VS100019512634870*****201603011B3AS26C13
D121940*****BULLOCK*****H*
*****ALEXIS*****
*****521*SE*WALL*AVE*****
LAUREL*****MS39440*****
[300]
```

4.12 Data Transfer Testing

All insurance companies are required to participate in a testing phase. Insurance companies are expected to complete internal testing of their systems prior to engaging in the testing process with HDI. If an insurance company is reporting through a third-party reporting entity, that reporting entity must successfully complete the testing process for each insurance company. Following a successful testing process, the insurance company or reporting entity will be certified by HDI to begin monthly data submissions.

Testing should be conducted with “real” data. The insurance company or reporting entity must complete the following testing phases:

1. Connectivity and Transmittal Testing
 - a. Insurance company tests access to vendor system. This will be the connectivity testing where a small sample file will be uploaded to a designated SFTP site.
 - b. Test transmission of data. This will be an actual sample file conforming to the naming convention with at least one record included. This should happen in the insurance company’s development phase prior to the completion of their extract coding to ensure that they are sending the correct data.
 - c. Test adherence to file naming convention (file validation).
 - d. Test insurance company’s ability to receive confirmation message/file.
2. Validation Testing
 - a. Send sample file (500 records or a full book of business).
 - b. Test data format for errors.
 - c. Test insurance company’s ability to receive acceptance message/file.
3. Error Receipt Testing
 - a. Test insurance company’s ability to receive compliance detail files.
4. Full System and Performance Testing
 - a. Test insurance company’s full file.

- b. Determine upload times per file size.
- c. Test insurance company reports.

5 Web Services

5.1 Overview

The program requires a vendor-maintained database and an IICMVA web services program. Authorized state users access the program through **DRIVE**.

An authorized user will submit a request to verify insurance through the **DRIVE** system. **DRIVE** will locate the registration record in question and will determine if an Insurance company Of Record (IOR) exists. If an IOR is associated with the record, then a directed query will be sent to the IOR. If an IOR is not associated with the record, then a VIN-only broadcast query will be sent to all participating insurance companies. A VIN-only broadcast query will also be sent to all participating insurance companies if an IOR does not confirm the directed query request. The **DRIVE** system will respond to the requestor with the result from the insurance verification query.

HDI will work with limited market share insurance companies insuring less than 500 vehicles within the State of Mississippi that are unable to deploy an online interface with the system.

5.2 Guidelines

Insurance companies doing business in Mississippi are required to participate in the IICMVA web services program. Each insurance company will develop, host, and support a web service based on the IICMVA Model User Guide. A link to the guide is provided below.

[IICMVA Model User Guide for Implementing Web Services - V7.0](#)

5.3 Web Service Description Language (WSDL) File

HDI's client is based upon the IICMVA web services model. This includes IICMVA published WSDL files for Java, .NET, and Universal web service implementations. These are the implementations that HDI will expect during a web service verification request. There will be no modifications allowed for this implementation. Each insurance company must use one of the current IICMVA published WSDL files.

Please note that the Universal WSDL is a "wrapper" and will still require implementation of the XML Web Service Schemas listed below.

5.4 XML Web Service Schema

HDI uses an XML Web Service Schema that is defined within the WSDL. As described above, insurance companies will be required to use one of the IICMVA published WSDL files (either 00200510 or 00200809). Those files can be provided by HDI upon request.

Responses from insurance companies must conform to the WSDL/Schema version selected.

5.5 Simple Object Access Protocol (SOAP)

HDI's client web service will use SOAP 1.1 message structure. The SOAP request and response message details are located in the IICMVA User Guide.

5.6 Security Certificates

HDI will exchange SSL certificates with the insurance companies in order to ensure secure access. This information will be exchanged using the insurance company contacts that are provided in the Insurance Company Profile Form. The insurance company technical contact will be consulted to ensure secure communication. No web services traffic will be permitted without the SSL certificates in place.

5.7 Verification Requests and Responses

5.7.1 Verification Requests

DRIVE will send a verification request to the appropriate insurance company in the format as described above. The following data elements will be provided in the verification request message:

- Tracking Number
- NAIC
- Vehicle Identification Number (VIN)
- Policy Number (if not available, "UNKNOWN" will be provided)
- Verification Date (current date or date in the past)

Please note that insurance companies are required to maintain at least six months of history for verification purposes.

5.7.2 Verification Responses

Once a verification request is submitted, **DRIVE** will expect to receive a valid response within 2000 milliseconds. **DRIVE** will not send requests that would require an invalid response. The following data element and response codes are required in the verification response:

- ResponseCode
 - **CONFIRMED** – a request is confirmed when the coverage is present, and the policy is in effect on the verification date provided.
 - **UNCONFIRMED** – a request is not confirmed when the coverage is not present, or the policy is not in effect on the verification date provided.

HDI also requests the following data elements be provided in the verification response:

- UnconfirmedReasonCode (Please see Appendix B)
- TrackingNumber (ID Number provided in the Verification Request)

- UniqueKey (Policy Number)

5.7.3 VIN-Only Broadcast Verification Requests and Responses

In the event that the Insurer of Record is unknown as a result of the data transfer matching process or a specific Insurer of Record is unable to confirm a verification request, **DRIVE** will submit a verification request to all insurance companies that accept broadcast verification requests. This request may include only the VIN. This is known as a “VIN-Only Broadcast” or “Unknown Carrier Request.”

The following data elements will be provided in the VIN-only broadcast verification request:

- Tracking Number
- NAIC
- Vehicle Identification Number (VIN)
- Policy Number (if not available, “UNKNOWN” will be provided)
- Verification Date (current date or date in the past)

Once a verification request is submitted, **DRIVE** will expect to receive a valid response within 2000 milliseconds. **DRIVE** will not send requests that would require an invalid response. The following data element and response codes are required in the verification response:

- ResponseCode
 - **CONFIRMED** – a request is confirmed when the coverage is present for the vehicle in the request.
 - **UNCONFIRMED** – a request is not confirmed when the coverage is not present for the vehicle in the request.
 - **UNCONFIRMED with REASON CODES** – an insurance company can also confirm coverage for the vehicle in the request by responding “UNCONFIRMED” and including reason code “10” or “VIN3” with the response.

Companies are encouraged to report all available data, including optional fields in the data transfer. Providing the optional fields affords **DRIVE** a better opportunity to match the registration record to an Insurer of Record therefore limiting the need for VIN-only broadcast queries.

5.8 Web Services Testing

All insurance companies are required to participate in a testing phase. Insurance companies are expected to complete internal testing of their systems prior to engaging in the testing process with HDI. If an insurance company is utilizing a third party for web services, the third party must successfully complete the testing process. Following a successful testing process, the insurance company or third party will be certified by HDI for web services.

Web services testing requires that the insurance company has already completed the necessary requirements for data transfer. Testing should be conducted with “real” data. The insurance company must complete the following testing phases:

1. Connectivity Testing
 - a. This will be connectivity testing of endpoints to ensure that the insurance company URL and endpoints are reachable.
 - b. HDI will conduct a SOAP protocol test to determine connectivity.
2. Verification Request and Response Testing
 - a. HDI will generate test queries from the real data provided. This includes data generated for the purpose of receiving unconfirmed reason codes.
3. Security Testing
 - a. HDI will check authentication between the **DRIVE** system and the insurance company systems.

6 Maintenance

6.1 Maintenance Windows

It is the goal of HDI and the **DRIVE** system to provide a high-availability service. To that purpose, HDI recommends a maintenance window between 12:00 AM CT and 4:00 AM CT each Sunday. The purpose of defining this time period in advance is to allow HDI to prepare for potential disruptions.

Any maintenance or expected system downtimes outside of this defined maintenance window will require a 48-hour advance notice to HDI staff. An email will need to be sent to scott.brown@hdisolutions.com, tim.hardwick@hdisolutions.com, and david.philpott@hdisolutions.com to notify HDI personnel of any potential disruption of service outside the expected maintenance window.

7 Contact Information and Resources

7.1 Contacts

Insurance Company Contact Information Changes and Maintenance Notices

Scott Brown – Primary Contact

334.350.5703

scott.brown@hdisolutions.com

Tim Hardwick – Technical Contact

334.350.5702

tim.hardwick@hdisolutions.com

7.2 Resources

Insurance Industry Committee on Motor Vehicle Administration (IICAMVA) Website:

<http://www.iicmva.com/>

8 Document Information

8.1 Copyright Notice and Trademarks

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8.2 Disclaimer

HDI Solutions, LLC has made every effort to ensure the accuracy of the information in this document at the time of printing. However, information may change without notice.

8.3 Version History

The Version History records the publication history of this document. See the Change Log for more details regarding the changes and enhancements included in each version.

Publication Date	Version Number	Comments
07/22/2016	Issue 1	Initial Publication
07/14/2017	Issue 2	Second Publication – Clarification Updates
04/24/2019	Issue 3	Third Publication – Yearly Updates
07/29/2022	Issue 4	Fourth Publication – Format Updates
02/14/2025	Issue 5	Fifth Publications – Zero-record file requirements; profile form for mandatory fields; HDI address and phone numbers; IICMVA documentation links

Table 1 – Document Version History

Appendix A: Insurance Company Profile Form

The insurance company profile form is provided on the following page.



Insurance Company Profile Form

Please submit one completed form for each NAIC reporting insurance data. Please note the form must be submitted to HDI prior to the testing phase. Required fields are marked with an asterisk (*).

Insurance Company Information			
Company Name *		Company NAIC *	
Company Address *			
Number of Vehicles		Number of Policies	
Primary Business Contact Information		Secondary Business Contact Information	
Name *		Name *	
Title *		Title *	
Phone *		Phone *	
Fax		Fax	
Email *		Email *	
Email Notification for Reports? (Y/N) *		Email Notification for Reports? (Y/N) *	
Primary Technical Contact Information		Secondary Technical Contact Information	
Name *		Name *	
Title *		Title *	
Phone *		Phone *	
Fax		Fax	
Email *		Email *	
Email Notification for Reports? (Y/N) *		Email Notification for Reports? (Y/N) *	

***Action Requested:**

Provide Access (fill out below) Remove Access Contact Information Update

Interface Selection (choose one):

Format 1: Web Service Model and Reporting Format 2: Small Insurers

If Format 1 was selected above, please select the WSDL that this company will utilize:

Universal Java 1.1 (00200809) Java 1.0 (00200510) .NET (00200510)

If Format 1 was selected above, please clarify if this company currently supports VIN-only broadcast queries:

Yes No

Submit completed form to: helpdesk@msvivs.net

Mississippi Vehicle Insurance Verification System Contact Information

Scott Brown

Phone: 888.778.0133

Project Manager

Fax: 866.252.8597

HDI Solutions, LLC

Email: helpdesk@msvivs.net

Appendix B: Unconfirmed Reason Codes

Response Codes

ASC X12 Schema Version 00200510⁶

Description	Code Value
Incorrect Data Format	1
Missing Unique Key	2
Missing NAIC Code	3
Missing VIN	4
Missing Verification Date	5
Unauthorized Requestor	6
System Cannot Locate Unique Key – Information	7
System Found Unique Key – No coverage on Date Requested	8
System Found Unique Key – VIN Cannot Be Verified	9
System Found VIN – Unique Key Cannot Be Verified	10
System Cannot Locate Policy Information – Manual Search In Progress	11
System Unavailable	12

ASC X12 Schema Version 00200809⁷ (Current)

Description	Code Value
Incorrect Data Format	IDF
NAIC Code Not Submitted	NAIC1
System Cannot Locate NAIC	NAIC2
Policy Key Not Submitted	PKEY1
System Cannot Locate Policy Key Information	PKEY2
System Found Policy Key – Coverage on Verification Date Cannot Be Confirmed	PKEY3
System Found Policy Key – VIN Cannot Be Verified	PKEY4
System Cannot Locate Policy Information - Manual Search in Progress	POL1
System Unavailable	SYSU
Unauthorized Requestor	UREQ
Coverage on Verification Date Cannot Be Confirmed	VDT1
Verification Date Not Submitted	VDT2
System Cannot Locate VIN	VIN1
System Found VIN – Coverage on Verification Date Cannot Be Confirmed	VIN2
System Found VIN – Policy Key Cannot Be Verified	VIN3
VIN Not Submitted	VIN4

	Codes and descriptions that would be used when responding if the requesting party failed to provide data for mandatory elements.
	Codes and descriptions that could be used after processing the request which resulted in an unconfirmed response.
	Code and description indicating that some technical problem caused the system to be unable to return a response.

⁶ Accredited Standards Committee X12, Insurance Subcommittee, ASC X12N. “Requests Codes” Coverage Response V00200510. < <http://xml.x12.org> >.

⁷ Accredited Standards Committee X12, Insurance Subcommittee, ASC X12N. “Requests Codes” Coverage Response V00200809. < <http://xml.x12.org> >.