# Contents

# Navigating ProducerEngage

When you first enter ProducerEngage, you land on the "**Policies**" page. You will then be able to move around ProducerEngage with these tabs.



## Accounts Page

### Accounts - Recently Viewed

Let's walk through ProducerEngage from left to right. Once you land on the "**Policies**" page, click on "**Accounts**". You will be brought to all your **Recently Viewed** accounts which are linked to the agency that is signed into ProducerEngage.

## Accounts - Recently Created

If you have created any new accounts, they will be viewable in the "**Recently Created**" tab.



## Accounts - Personal Accounts

The "**Personal Accounts**" tab shows only personal accounts for the agency.

## Accounts - Commercial Accounts

The "**Commercial Accounts**" shows all the commercial accounts for the agency. If you click on the account name, which is a blue hyperlink, it will take you to the account details.
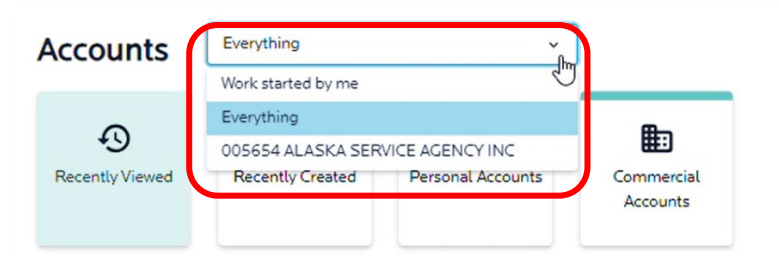


## Accounts - Filtering

You can filter the accounts on the "**Accounts**" page with this dropdown.

# Accounts - Summary

When you click into one of your accounts, regardless of whether it's personal or commercial, this is what you will see on the "**Summary**" landing page.



| Product | Policy Number | Effective Date | Expiration Date | Total Premium | Quote Summary | Status | Transaction Type | Version | |
|---|---|---|---|---|---|---|---|---|---|
| Workers Compensation | 1061129061 | Jul 10, 2024 | Jul 10, 2025 | $41,016.00 | - | Quoted | New Submission | * Version 1 - Quoted | 🗑 |
| Commercial Auto | 1061144887 | Jul 31, 2024 | Jul 31, 2025 | - | - | Draft | New Submission | * Version 1 - Draft | 🗑 |
| Commercial Auto | 1061143069 | Jan 30, 2024 | Jan 30, 2026 | $1,282.00 | - | Draft | Renewal | * Version 1 - Draft | 🗑 |
| Commercial Auto | 1061151919 | Jul 17, 2024 | Jul 17, 2025 | - | - | Draft | New Submission | * Version 1 - Draft | 🗑 |
| Workers Compensation | 1061151920 | Jul 23, 2024 | Jul 23, 2025 | - | - | Draft | New Submission | * Version 1 - Draft | 🗑 |

| Product | Policy Number | Effective Date | Expiration Date | Total Premium | Status | Change/Cancel |
|---|---|---|---|---|---|---|
| Commercial Auto | 1061121717 | Jan 30, 2024 | Jan 30, 2025 | $1,282 | In Force | ⌄ |

## Accounts - Contacts

Following with the tabs, the next is **"Contacts"**. Here you will see this contact information.



## Accounts - Documents

Under the "**Documents**" tab, you will see any documents that have been added to this account.

You can minimize each section. The screenshot below shows the Billing Documents but there are general Account Documents that have been minimized. **Click on the arrow** to see the documents.

There are three actions you can take on documents: **Upload, Print, or Send via Email**.

## Accounts - Claims

On the "**Claims**" tab, you will see the **number of claims** within the account.



## Accounts – Billing & Payment

The "**Billing & Payment**" tab shows the billing information on the account, including type of payments, primary payer, due date, and payment method. You can also **Make a Payment** and **Edit Billing** details on this screen.

Here is the **Payment Schedule** on the account, showing what is due and what is planned for the future.

| Bill Date ⌄ | Due Date ⌄ | Status ⌄ | Amount Billed ⌄ | Due ⌄ |
|---|---|---|---|---|
| 05/05/2024 | 05/30/2024 | Due | $534.47 | $434.47 |
| 06/05/2024 | 06/30/2024 | Due | $106.79 | $106.79 |
| 07/05/2024 | 07/30/2024 | Carried Forward | $0.00 | $0.00 |
| 08/05/2024 | 08/30/2024 | Carried Forward | $0.00 | $0.00 |
| 09/05/2024 | 09/30/2024 | Planned | $320.37 | $320.37 |
| 10/05/2024 | 10/30/2024 | Planned | $106.79 | $106.79 |
| 11/05/2024 | 11/30/2024 | Planned | $106.79 | $106.79 |
| 12/05/2024 | 12/30/2024 | Planned | $106.79 | $106.79 |

## Accounts – Billing Activity

The next tab is **"Billing Activity"** for this account. On this screen, you can see the billing activity on different policies of this account.

You will notice the **policy numbers are blue text (hyperlinks)**. The next sections will show the steps that follow after clicking on the policy number.



| Transaction Date | Effective Date | Invoice Stream # | Product | Policy # | Description | Change Summary | Amount | Billed/Due Balance | Total Balance |
|---|---|---|---|---|---|---|---|---|---|
| 04/15/2024 | 01/30/2024 | 1061698610001 | Commercial Auto | 1061121717-1 | New Business | - | $1,282.00 | $0.00 | $1,282.00 |
| 05/05/2024 | 05/05/2024 | 1061698610001 | - | - | Billed - Invoice # 1100009043 | - | $534.47 | $534.47 | $0.00 |
| 06/05/2024 | 06/05/2024 | 1061698610001 | - | - | Billed - Invoice # 1100009044 | - | $106.79 | $641.26 | $0.00 |
| 06/05/2024 | 06/30/2024 | 1061698610001 | Commercial Auto | 1061121717-1 | Cancellation Notice | - | $0.00 | $0.00 | $0.00 |
| 06/13/2024 | 06/13/2024 | 1061698610001 | Commercial Auto | 1061121717-1 | Online CC Payment | - | -$100.00 | $641.26 | $1,182.00 |

# Policies Tab

## Policies - Summary

The policy information is outlined below. Similar to the "**Documents**" page, you can see details of the policy in the sections that have arrows by them. **Click on the arrows** to open them up.

On the bottom of the **"Policies Summary"** tab, you will see all transactions or any audits that have been completed on the policy.

## Policy Transactions

| Transaction Number ⌄ | Transaction Status ⌄ | Type ⌄ | Period Status ⌄ | Premium ⌄ | Effective Date ⌄ | Transaction Summary ⌄ |
|---|---|---|---|---|---|---|
| 1061153904 | Deleted | Policy Change | Deleted | $1,282.00 | Jul 30, 2024 | PolicyChange |
| 1061145941 | Rescinded | Cancellation | Rescinded | $442.00 | Jun 30, 2024 | Cancellation |
| 1061149010 | Deleted | Policy Change | Deleted | $1,282.00 | Jun 27, 2024 | PolicyChange |
| 1061143070 | Deleted | Policy Change | Deleted | $1,282.00 | May 10, 2024 | PolicyChange |
| 1061121717 | Bound | Submission | In Force | $1,282.00 | Jan 30, 2024 | Submission |

## Audit Details

| Period Start ⌄ | End Date ⌄ | Type ⌄ | Audit Method ⌄ | Process Start ⌄ | Due Date ⌄ | Status ⌄ | Total Cost ⌄ |
|---|---|---|---|---|---|---|---|

## Policies - Contacts

Under the "**Contacts**" tab within "**Policies**", you will find the Policy Contacts, Account Contacts, and Associated Contacts related to the policy.

## Policies - Documents

The "**Documents**" tab within "**Policies**" holds the policy documents. You can **Upload, Print, or Send** any of these documents by selecting your document of choice. Click the hyperlink (blue text) of the document to view it. **However, once you add a document, you cannot delete it.**



## Policies - Billing

On the "**Billing**" tab on the "**Policies**" page, you'll see the policy period and status of the policy. You can go to the Account Billing by clicking the "**View Account Billing**" link.

# Claims Tab

On the "**Claims**" tab, you will land on the "**Recently Viewed**" box. This will show you all the claims that have been recently viewed by you. The "**Recently Created**" box will show you any claims that are newly created.

**Open Claims:**
You will be able to see all claims submitted with each of your accounts, the date of loss, status of the claim, whether it has been paid, and the net incurred. Blue text indicates hyperlinks. You will be able to go into that claim's Account, Policy Number, and Claim Number.

**Closed Claims:**
You will be able to see all closed claims with each of your accounts, the date of loss, status of the claim, whether it has been paid, and the net incurred. Blue text indicates hyperlinks. You will be able to go into that claim's Account, Policy Number, and Claim Number.

## Claims

Everything

| | | | |
|---|---|---|---|
| Recently Viewed | Recently Created | Open Claims | Closed Claims |

### Open Claims
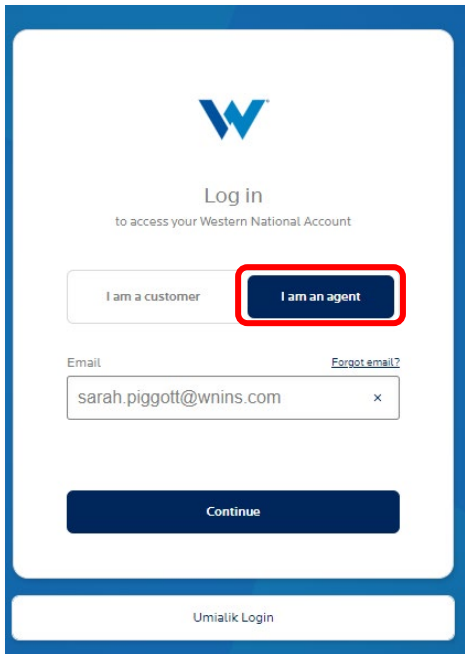
| Product ⌄ | Account ⌄ | Policy Number ⌄ | Claim Number ⌄ | Date Of Loss ⌄ | Status ⌄ | Paid ⌄ | Net Incurred ⌄ |
|---|---|---|---|---|---|---|---|
| Commercial Package | A106178130 | 1061160754 | 4100020997 | 10/22/2024 | Open | $0 | $40,000 |
| Homeowners | A106182816 | 1061176303 | 4100021019 | 10/24/2024 | Open | $0 | $1,272 |
| Homeowners | A106182816 | 1061176303 | 4100021021 | 10/24/2024 | Open | $0 | $1,471 |
| Homeowners | A106182816 | 1061176303 | 4100021024 | 10/24/2024 | Open | $327 | $1,300 |
| Homeowners | A106182816 | 1061176303 | 4100021027 | 10/24/2024 | Open | $0 | $1,055 |
| Homeowners | A106182816 | 1061176303 | 4100021030 | 10/24/2024 | Open | $103 | $1,015 |
| Workers' Compensation | A106179027 | 1061167569 | 4100021038 | 10/25/2024 | Open | $0 | $0 |
| Commercial Auto | A106179605 | 1061163909 | 4100021042 | 10/25/2024 | Open | $0 | $0 |
| Commercial Package | A106177128 | 1061154922 | 4100021077 | 10/04/2024 | Open | $0 | $0 |

# Starting a Quote

## In *AgentsOnline*

Click on "**I am an Agent**".

Enter your email address and password. Then click "**continue**".



You will be brought to the main screen of *AgentsOnline*. Select" **Write New Business**" or **"Start a Quote"**. Both actions will get you to the next screen.

# In ProducerEngage

Enter the **Name, Business Address**, and **Contact Information**, including print preferences.

With commercial lines, you must enter in the **NAICS Code**, **NAICS Description,** and **Organization Type**. If you don't know the NAICS code, you can search by code or description using the magnifying glass search icon.

It's not required to add the **year the business was started, number of employees, and DBAs** to create the account, however, the information will be required to bind any policies. So, if the information is known you can add it on this page. Otherwise, the underwriter will need to add that information.

Click "**Next**" to continue with the quote.

Complete the following: **Licensed Producer**, **Account Contact**, **Account Eligibility**, and select the products you want to quote. Click **"Next"**.

# Commercial Auto

Each page of the quote will walk you through the steps listed in the column on the left side. Answer all the questions and click **"Next"**. Anything with a red asterisk is a required field.

**Policy Details**:

Review and enter the following fields:

- **Effective Date**
- **Name insured**
- **Gross Receipts**
- **Vehicle Type**
- **Class Code**

Enter the **agency of record** and add the **FEIN**. You'll also notice the NAICS information carries over from when you started the quote. Click "**Next**" to continue the quote.

Update the coverages on this page. Add a check mark next to the line coverages you want on the left side. Then mark the coordinating drop downs on the right side. Click "**Next**" to continue with the quote.



Select all the **additional coverages, exclusions & conditions, or additional insureds** that apply. Click "**Next**" to continue with the quote.

The next page is the **Risk Locations**. Add the locations of the vehicles. If there are multiple locations on the account, you can click on "**Add Existing Location**" or "**Add All Existing Locations**" and the information will autofill.

Additionally, if any location is missing information, there will be a red dot and you will have to enter additional information to move forward.

Enter details on the line items that have asterisks for each location. Once completed, click **"Save and Close"**. Then click "**Next**" to move forward.

**LOCATION DETAILS**

| | |
|---|---|
| Non-Specific Location | Yes / **No** |
| Is this the Primary Location? | **Yes** / No |
| Location Code | |
| Location Name | |
| Address Line 1 * | 801 B St |
| Address Line 2 | |
| Zip Code * | 99501-3657 |
| Borough * | Anchorage |
| City * | Anchorage |
| State * | Alaska |
| Phone | (517) 367-5033 |
| | Auto-Fill Territory Code |
| Territory Code * | 101 |

Cancel        Save & Close

The next page is the **State Specific Information** page. A red circle next to the state will indicate that you need to make edits to this page. Click on **"View/Edit"** to make these changes. When completed, the red circle will turn green. Click **"Save/Close"** to apply changes and then click **"Next"** to move forward.

ACCOUNT: LAVENDER CAFE

🚗 Commercial Auto Quote (1061173203)                    Other Active Quotes ∨

ⓘ Get a faster quote! Only fields with red asterisks * are required.

**State Specific Information**

| | | State ∨ | |
|---|---|---|---|
| ☐ | 🔴 | Alaska | View/Edit |

Save & Exit                                        Previous    Next

After clicking **"View/Edit"**, make your selection on this page within **Details**, **Coverages, Additional Coverages, and Exclusions and Conditions**. Click **"Save & Close"** and then **"Next"** to continue with the quote.

The next page is the **Vehicles** page. There are a couple of ways to add a vehicle to the quote:

- If you have several vehicles to add, download the template and fill out the necessary fields: **Action**, **Location**, **Year**, and **VIN**. You will also need to pay attention to the tabs on the bottom of the template, making sure you are adding the correct **vehicle type** to that page. Once the template is complete, save to your desktop and click "**Import Template**".
- You can add a single vehicle to the quote. Click the drop down, **add**, and select your **vehicle type**. When complete, click "**Next**" to move on with the quote.
- To remove a vehicle, mark the check box next to the vehicle and the **delete** button will become actionable.

The next page is the **Covered Vehicles Symbols** page where you will select your auto symbols. **Put a check in the chosen boxes** for your quote. The vehicle group outlines the symbols. To move forward, click "**Next**".

## Covered Vehicles Symbols

| Coverage ⌄ | 1 ⌄ | 2 ⌄ | 3 ⌄ | 4 ⌄ | 5 ⌄ | 6 ⌄ | 7 ⌄ | 8 ⌄ | 9 ⌄ | 19 ⌄ |
|---|---|---|---|---|---|---|---|---|---|---|
| Liability | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| Medical | | ☐ | ☐ | ☐ | | | ☐ | | | |
| UM/UIM | | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | | | |
| Collision | | ☐ | ☐ | ☐ | | | ☐ | ☐ | | |
| Comprehensive | | ☐ | ☐ | ☐ | | | ☐ | ☐ | | |
| Specified Cause of Loss | | ☐ | ☐ | ☐ | | | ☐ | ☐ | | |
| Towing | | | ☐ | | | | ☐ | | | |

The next page is the **Modifiers** page. This is the page you can enter in any debits, credits, liabilities, damage, and justification. To move forward, click "**Next**".

⌄ Alaska

| Category | Maximum Credit | Maximum Debit | Liability | Physical Damage | Justification |
|---|---|---|---|---|---|
| Management: Cooperation with the insurance company, revision of schedules, routes, and practices to conform with insurer recommendations | -15.0% | 15.0% | 0.0% | 0.0% | |
| Employees: Selection, training, supervision experience and basis of remuneration | -15.0% | 15.0% | 0.0% | 0.0% | |
| Equipment Type, (that is, suitability for the work being conducted) condition, servicing, risk's own repair facilities, safety equipment and drivers' reports on conditions | -15.0% | 15.0% | 0.0% | 0.0% | |
| Safety Organization: Periodic meetings, distribution of safety literature, award and penalty system, review of accidents with drivers, safety director, accident reports and records | -15.0% | 15.0% | 0.0% | 0.0% | |
| Dispersion or Concentration of Values Insured: Insured property is, or is not, sufficiently dispersed to minimize the probability of loss from the same cause | -10.0% | 10.0% | | 0.0% | |
| Overall | -15.0% | 15.0% | 0.0% | 0.0% | |

Save & Exit                                                          Previous     **Next**

The next page is the **Drivers** page. Just like the vehicles page, click on the "**Add**" button to add all drivers. Click "**Next**" when complete.



On this page, you will complete the underwriting questions. Click "**Next**" when complete.

On this page, you will be able to manually enter or attach loss history. You will be able to upload a document if you select "**Attached**". On the next screen, you will see the quote and price.



Select either **Attached, Manually Entered,** or **No Loss History** in the drop-down box. When you select **Attached**, you will have two additional boxes to complete before uploading a document with the "**Upload File**" button. When completed, the file will show below. Click "**Next**" to continue with the quote.

Here is the final page of the Commercial Auto quote. You can save, refer to an underwriter, go back, or quote an additional product.

ACCOUNT: GREATEST POPCORN CO

## Commercial Auto Quote (1061179151)

Other Active Quotes ⌄

**QUOTE**

Add Versions

Print Quote Summary

### Commercial Auto
**Quote Pending**

⊗ **3 Items Requiring Underwriter Referral**                                              ›

**Refer to Underwriter**

**Line-Level Coverages**

| Description ⌄ | Value ⌄ |
|---|---|
| **Medical Payments** | |
| Medical Payments Limit | No Coverage |
| **Liability** | |
| Liability Coverage Type | Combined Single Limit |

| Save & Exit | Previous | Back to Account Summary | Quote Additional Product ⌄ |
|---|---|---|---|

# Workers' Compensation

To start your Workers' Compensation quote, begin by answering the qualification questions and choose "**Next**" to continue with the quote.

The next page is the **Policy Details** page. **Complete the details with an asterisk** to move forward. Any other information is optional, but good to have.

The next page is the **Line Level Coverages** page. Select all line-level coverages with the check mark and the corresponding drop downs.

Any **additional coverages** or **exclusions and conditions** can be added below.

The next page is the **Risk Locations** page. If there are multiple locations on the account, you can click on "**Add Existing Location**" or "**Add All Existing Locations**" and the information will autofill.

Additionally, if any location is missing information including **number of employees** per location, there will be a red dot and you will have to enter additional information to move forward. Select **"Save & Close"** to save location information and **"Next"** to continue with the quote.

**LOCATION DETAILS**

| | |
|---|---|
| Non-Specific Location | Yes / **No** |
| Is this the Primary Location? | Yes / No |
| Location Code | |
| Location Name | |
| Address Line 1 * | -- Required for Quote -- |
| Address Line 2 | |
| Zip Code * | -- Required for Quote -- |
| County * | -- Required for Quote -- |
| City * | -- Required for Quote -- |
| State * | -- Required for Quote -- |
| Phone | |
| Number of Employee * | |
| Employer (If other than primary named insured) ? | Please Select |

Cancel          Save & Next Location          Save & Close

The next page is the **State Specific Information** page. Click the **"View/Edit hyperlink"** on the policy state to add details including **Covered Employees.** When complete, click **"Next"** to continue with the quote.

Complete the underwriting questions and click "**Next**" to move to the next screen.

ACCOUNT: LAVENDER CAFE

### 🦶 Workers Compensation Quote (1061187298)

Other Active Quotes ∨

ℹ️ **Get a faster quote!** Only fields with red asterisks • are required.

**Underwriting Questions**

Do/Have past, present, or discontinued operations involve(d) storing, treating, discharging, applying, disposing or transporting of hazardous material? (e.g. landfills, wastes, fuel tanks, etc) ⓘ

Yes | **No**

Any work performed underground or above 15 feet? ⓘ

Yes | **No**

Is applicant engaged in any other type of business? ⓘ

Yes | **No**

Is there any volunteer or donated labor? ⓘ

Yes | **No**

Do employees travel out of state? ⓘ

Yes | **No**

Do any employees perform work for other businesses or subsidiaries? ⓘ

Yes | **No**

Any undisputed and unpaid workers compensation premium due from you or any commonly managed or owned enterprises? ⓘ

Yes | **No**

Do you lease employees to or from other employers? ⓘ

Yes | **No**

Save & Exit

Previous | **Next**

Complete the Risk Analysis page by adding loss history manually or by uploading a document. **Click the drop-down box.**



Select either **Attached, Manually Entered,** or **No Loss History** in the drop-down box.

When you select "**Attached**", you will have two additional boxes to complete before uploading a document with the "**Upload File**" button. When completed, the file will show below. Click "**Next**" to continue with the quote.

ACCOUNT: GREATEST POPCORN CO

## 🐀 Workers Compensation Quote (1061171224)

ℹ️ Loss History is required for all claims with a prior carrier in the past 5 years. Please manually enter the prior loss information or upload a loss run.

**User Entered Information**

**Loss History**

| | |
|---|---|
| Loss History Type * | Attached ⌄ |
| Number of losses in past 5 years * | |
| Total Incurred * | $ |

**Attached Loss Runs**

| Name | Upload File |
|---|---|

No rows found

Save & Exit                                          Previous      **Next**

You have completed the quote. The price, status of the quote, and all the quote information will be on this page. To issue the policy, click on the **"Issue Policy"** button underneath the quote.



The next page you will land on is the Account Summary. You will have to select each pending transaction you would like to issue and then click on "**Issue Approved Quotes**". In this example, we are only issuing the **Workers' Compensation** quote that is marked.

This next screen will ask if you would like to quote any other line of business. If you are moving forward with just the one quote, click "**Next**".



On this screen, you will be able to "**Proceed to Issue**" the quote and pay as well as **edit the billing details**.

If you want to **edit the billing details**, this screen will pop up. Go through each drop down and select your choice.



If you make any changes, you should see them on the next screen. You can now "**Pay & Issue**".

When you select **"Pay & Issue"**, you will see this pop up. If you select **"Yes"**, you will get the **Down Payment Setup** box (the next image).



Select your minimum due or pay a different amount. Then choose your payment method, click **"Pay & Issue"**.

Enter the credit card information you are using and click "**Continue to Review Payment**".

Payment Options          Payment Information          Review Payment

# Please enter your card information

Asterisks (*) indicate required fields.

**Cardholder Name** *

Lavendar Cafe

**Card Number** *                    **CVV** * ❓
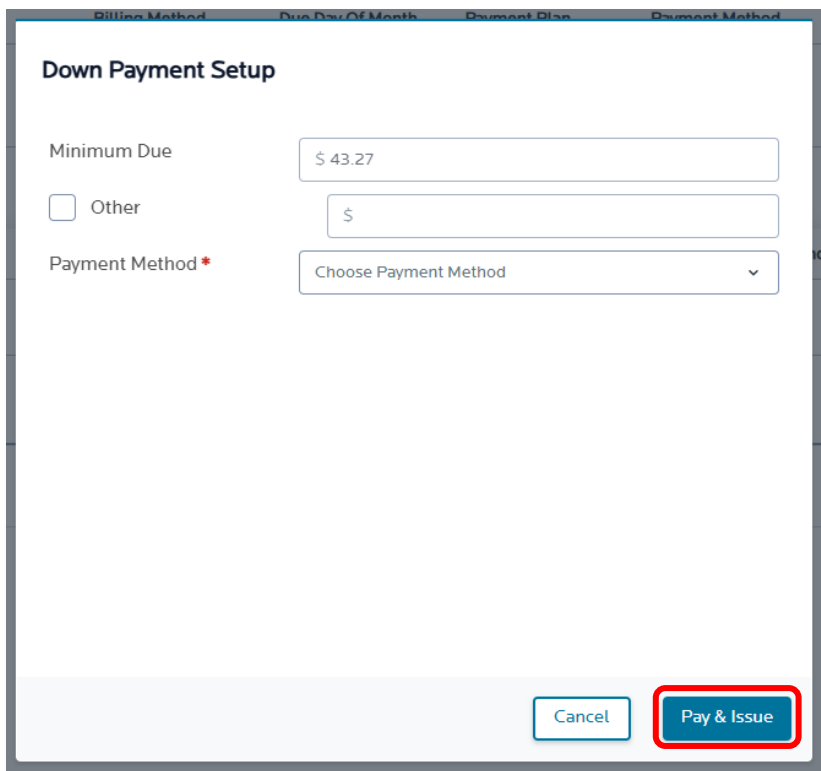
4111111111111111                    006

VISA  MasterCard  AMERICAN EXPRESS  DISCOVER

## Expiration Date

**Month** *                    **Year** *

November        ∨         2028        ∨

**Billing Address** *

1535 F Street

**Country** *

United States        ∨

**City** *          **State** *          **Zip** *

Anchorage    Alaska    ∨    99501

**Email**

spiggott@mimillers.com

**Continue to Review Payment ❯**   |   Go back to Payment Options

**Payment Summary**

| Policy # | Amount |
|---|---|
| OTF-023b248d-57e4-4294-a1ba-b33bf7c4e802 | $43.27 |
| **SUBTOTAL** | $43.27 |
| **SERVICE FEE** * | + $0.00 |
| **GRAND TOTAL** | **$43.27** |

*A non-refundable service fee of $0.00 is included in your total.

Review the information you entered, agree to the terms and conditions, and click "**Process Payment**".



You will have to click on "**I'm not a robot**" and review the information you entered, agree to the terms and conditions, and click "**Process Payment**" again.

Once the payment goes through, you will see this message. You can click on the hyperlink to get a receipt.



**Print and save** the pdf receipt to your computer for your files or send it to your client.

You can find the existing bill on this landing page. You can also find the documents here.

## Payment Setup & Documents

**Account** Lavender Cafe

A106179491

Policies can bill on one invoice if the due day of month, payment method, and primary payer are the same. The quoted policy will be added to an existing bill account when possible. Please review the billing parameters. You can make changes by clicking the pencil icon to the right of the quoted policy row.

### Quotes

| Bill Account# | Policy | Premium | Billing Method | Due Day Of Month | Payment Plan | Payment Method | Primary Payer | Down Payment | Edit Billing |
|---|---|---|---|---|---|---|---|---|---|
| | Workers Compensation 1061187298 | $6,420.00 | Direct Bill | 13 | Monthly CL | Bill | Lavender Cafe | $537.35 | ✏️ |

### ˅ Existing Bill Account

| Bill Account# | Policy | | Billing Method | Due Day Of Month | Payment Plan | Payment Method | Primary Payer | ˅ |
|---|---|---|---|---|---|---|---|---|
| 1061794910001 | Workers Compensation 1061173206 | | Direct Bill | 13 | Monthly CL | Bill | Lavender Cafe | |

### Documents

˅ Workers Compensation Quote (1061187298)

**Retain in Agency**                                    **Submit to Western National**

☐ Workers Compensation New Business Policy Quote Packet

˅ AutoPay Auth Form

[ Select All ] [ Print Selected ] [ Send via Email ]

[ Proceed to Issue ]

« Make a Payment  « Back to All Quotes  « Back to Account Summary