

Asset Management Reporting System Insurance Claims

Properties with 13 or more units are required to notify MHDC by email within 24 hours when an event occurs that requires the filing of an insurance claim. In addition, a Notification of Loss (NOL) must be entered in the Asset Management Reporting System (AMRS) for each NOL. Both the email(s) and the NOL(s) should include the following information:

- Event date
- Type
- Description
- Amount of the loss
- Insurance provider
- List of the units and the building(s) affected

STEP 1 – Entering a Notification of Loss

Entering a Notification of Loss (NOL) in AMRS is the first step toward providing information on a loss to MHDC. AMRS will automatically assign a number to each NOL. To begin this process, click on the Notification of Loss/Insurance Claims module on the navigation bar on the left:



This will open a summary of your managed properties by name with any previously filed NOLs and their current status:

Choose a Property: Insurance Claim Requests (109 rows)							EXPORT
Property #	Property Name	Total # Claims	Claims Approved	Claims Denied	Claims Pending	Actions	
330	Project - 330 (MHDC #330)	0	0	0	0		
667	Project - 667 (MHDC #667)	0	0	0	0		

Click the pencil icon under “Actions” to the right of the property you wish to create a new Notification of Loss for. A page will open showing all NOLs submitted for that property. Click **+ ADD** to create a new NOL:

Notifications of Losses (0 rows)														EXPORT
Property Name	Property #	Type Of Loss	Type Description	Date Of Loss	Total Amount Claimed	Notification Status	# Checks	# Claims	Claims Approved	Claims Denied	Claims Pending	Unread Messages	Actions	

The input screens for entering the details for the new NOL will open.

Enter the following information about the loss:

- Date of the loss
- Type of loss (example: Fire)
- Name of the insurance company
- Amount of the loss
- Description of the event (ex: tenant left stove unattended)
- Items and Units affected

Notification Of Loss Not Submitted

Date of Loss: 01/01/2020



Type Of Loss: Fire

Amount Claimed: \$ 2,000.00

Insurance Provider: Progressive

Description: Tenant left Stove Unattended

Items (1 rows) HIDE/SHOW + ADD EXPORT

Items	Units Affected	Actions
Stove	15A	 



Click **SAVE** then click **SUBMIT** to send the NOL to MHDC. As you exchange correspondence with the insurance company click on the pencil icon again to update the NOL and uploading additional information as a PDF into the NOL.

STEP 2. Receipt of Insurance Proceeds

Insurance checks received by the property must be endorsed and sent to MHDC for deposit in an Insurance Claim account. Email a copy of the check to the St. Louis office as a PDF. The original check should be sent to the Kansas City office, and it is strongly recommended that a tracking number is obtained. Please provide the property name and MHDC number along with each check, and clearly indicate the NOL number each check should be associated with. Once insurance proceeds have been deposited in an Insurance Claim account, MHDC can process payments to vendors as repairs are made to the property.

STEP 3. Entering a Claim – Request for Payment

A Claim Request is a request from the property to use insurance proceeds to pay a vendor. A separate claim request is to be entered for each invoice from a vendor. To begin the process, click on the Notification of Loss/Insurance Claims module on the navigation bar on the left:



(1). Select the correct property and the NOL for which a claim request is needed. Page down and select the **ADD** button on the upper right corner of the screen. AMRS will automatically assign a number to each claim request.

Claim Requests Total Requested \$0.00 Total Approved \$0.00 **ADD**

Uploaded Files (0 rows) EXPORT Upload Documents

File Name	Actions

SAVE **SUBMIT NOTIFICATION**

A page like the one below will open. Click the **+ADD** button on the right side of the screen and a dialogue box will open. The details of the claim request must be entered here. A separate claim is to be entered for each payment. When finished be sure to click **SAVE**.

Request #973 Not Submitted Requested Amount \$0.00 Approved Amount \$0.00

Insurance Claim Request Item

Details Vendor Amount Claimed Amount Approved Actions

Description: Stove Replacement

Units Affected: 15a

Claim Amount: \$1,200.00

Invoice Number: 15123

Invoice Date: 01/07/2020

Check Number: 512

Vendor Name: Art's Appliance & Furniture

Vendor Address: 420 Hwy 24 W

Vendor City: Moberly

Vendor State: MO

Vendor Zip: 65270

Pay Vendor Directly: Yes No

SAVE

+ ADD

Support must be uploaded for each claim request using the upload button inside each claim. There should be one PDF per claim request that includes all of the following at a minimum:

- Current invoice(s). MHDC does not pay from estimates.
- W9 if a new vendor
- Before and after photos
- Any insurance documents not previously provided

(2) To upload support, please click the plus sign next to **Upload Documents**:

Uploaded Files (1 rows)

EXPORT

Upload Documents

File Name	Actions
15AInvoiceandChecks	

UPLOAD

When you have identified the documents, you want to upload click **“UPLOAD”** then click **“SAVE”** to save your work.

Upload Documents

UPLOAD

SAVE SUBMIT

(3) Repeat this step for every claim request. When you are ready to submit your claim request to MHDC for review, click **“SUBMIT”**. *Claims that are not submitted are not yet visible to MHDC and cannot be reviewed for payment.*