

HCAI Integration Settings Update Form

Instructions

IMPORTANT – this form only applies to existing integrating insurers or insurers that are opting to integrate with HCAI for the first time.

- What:** This form should be used by Ontario Auto Insurers that are already enrolled with HCAI and wish to integrate with HCAI. This form may also be used by existing integrators who wish to update their integration settings in the production environment.
- Who:** This form should be completed by an individual with the authorization to request changes to the insurer's HCAI integration settings in the production environment.
- When:** This form can be used at any time. For insurers that are opting to integrate with HCAI for the first time, a production certificate will be issued and emailed to the insurer's Digital Certificate Owners within 5 business days upon receipt of a completed HCAI Integration Settings Update Form. For insurers that are currently integrating with HCAI and are requesting a change to their existing integration settings in the production environment, a new digital certificate will **not** be issued.
- How:** One copy of this form should be submitted for **each** insurance company (regardless of whether it is a parent or child insurer) that opts to integrate with HCAI or is requesting a change to their integration settings in the production environment.
1. Please complete the form. All fields are mandatory.
 2. Sign the form.
 3. Send the completed form to HCAI Processing by:
 - a. **Fax** – (416) 497-6505; OR
 - b. **Email** – InsurerSupport@HCAIinfo.ca
 - c. **Mail** to the HCAI Processing address (located at the top of this page)
 4. HCAI Insurer Support will review the submitted form and initiate a request internally.
 5. If this is a first-time integration request, a test insurer with user accounts will be set up in the most recent HCAI test environment.
 6. If this is a first-time integration request, a digital test certificate to be used in the test environment and a digital certificate for the production environment will be e-mailed to the insurer's Digital Certificate Owners.

For questions, please email: insurersupport@hcaiinfo.ca

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1. Please indicate your request:

- My company is already integrated. We would like to update our integration settings.
- My company is not yet integrated. We would like to activate our integration settings and obtain a digital certificate.

2. Please provide the following legal details about the Insurer Organization:

	Example	TO BE COMPLETED BY INSURER
LEGAL NAME OF COMPANY	ABC Insurance Co.	
IBC ID	099	
DEPARTMENT	Information Services	
CITY	Toronto	
PROVINCE	Ontario	
COUNTRY	Canada	

3. Name and title of up to two people who will be the Digital Certificate Owners for your organization.

Note: skip this section if you are already integrated with HCAI.

Please note that these individuals will also be sent the annual renewal of your test and production digital certificates. If your company is already integrated with HCAI, you will already have a digital certificate. That digital certificate will remain valid even if you change your integration settings.

Digital Certificate Owner #1

Full Name: _____
 Title: _____
 Email: _____
 Phone: _____

Digital Certificate Owner #2

Full Name: _____
 Title: _____
 Email: _____
 Phone: _____



3. System Integration Information

Please select your desired integration settings. If you are already integrated with HCAI, we will not make changes to the existing integration settings for the insurer specified above unless indicated below.

- | | Enable | Disable |
|------------------------------------|-----------------------|-----------------------|
| • Claim-Claimant Feed and Extracts | <input type="radio"/> | <input type="radio"/> |
| • Insurer All-Data Extract | <input type="radio"/> | <input type="radio"/> |

Authorization for HCAI production integration settings changes:

Name:	_____
Title:	_____
Email address:	_____
Signature:	<input type="text"/>
Date:	_____