#### How to Use Customize Assignment Entry

**Introduction** Customize Assignment Entry is the CCC ONE<sup>®</sup> Workflow – Claims Management feature that allows you to customize the fields that are available to Assignment Entry users in your office. You can use the Customize Assignment Entry screen to select the fields that will appear on the Customized Assignment Entry View. Please note that not all fields are customizable.

**Note:** This feature can be enabled at the Home Office, Regional, and/or Claim Office level based on your business requirements.





Create a	Step	Action
Section	1	Click the Add button located under the Sections box. The Add/Edit Section window appears.
	2	Use the text box to enter a <b>Section Name</b> . <b>Note:</b> The Section Name may not exceed 20 characters.
	3	Click the <b>Save</b> button to save the new Section Label. <b>Note:</b> Once the Section Label is created and saved, you can add fields to that Section. Add/Edit Sections Section Name 2 Save

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Saving Changes to Customized Assignment Entry	When adding a new Section, you will see two sets of Save and Cancel buttons. The Save and Cancel buttons located under the Section Name text box saves or cancels changes made to Section names only. However, those buttons will not save or cancel those changes to the Customized Assignment Entry View permanently. This is true for all active windows that display additional Save or Save Changes buttons.		
-	Click Sav Entry Vie	e to retain additions or changes to the Customized Assignment w, click Cancel to undo changes made.	
Moving Sections	The order in which the Section Names appear in the Sections box is the order in which you create the Sections. The table below outlines the steps needed to change the Section order:		
	Step	Action	
	1	In the Sections box, click the	
		Move. Assignment Entry Loss Adjuster 1 2 Vehicle	

Action
In the Sections box, click the Section name you wish to move. Assignment Entry Loss Adjuster 1 2 Vehicle I Add Edit Remove
Click the <b>Up</b> or <b>Down</b> arrow to move the selected Section.
<b>Note:</b> When you move Sections, the selected fields and the order of those fields in the Sections do not change.

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Field	Definition
Key Data	In the Sections box, click the Section name you wish to move.
	Fields are <b>Insurance Company</b> and <b>Claim Reference ID</b> .
Assignment Entry Required Fields	The CCC ONE <sup>®</sup> Workflow – Claim Management application requires certain fields to be included in addition to the Key Data Fields. In order to save your Customized Assignment Entry selections, these fields must be included in your customized list:
	<ul> <li>Claim Office</li> <li>Claim Parties         <ul> <li>Role</li> <li>Company Name</li> <li>Last Name</li> <li>Individual / Company</li> </ul> </li> <li>Appraiser         <ul> <li>Appraiser Type</li> <li>Appraiser Name</li> </ul> </li> </ul>
User Customizable Fields	The remaining list of fields can be added to the Customized Assignment Entry View as needed. Based on your business needs, you determine whether they are required or optional based.
	<b>Note:</b> For some of the fields, there are sub-fields. For each sub-field, you can:
	<ul> <li>Require the field.</li> <li>Make it optional but viewable in the Customized Assignment Entry View.</li> <li>Make the sub-field hidden from the Customized Assignment Entry View.</li> </ul>
	A complete list of fields and sub-fields can be found at the end of this job aid.

Assignment Entry Fields There are three (3) types of fields in Customize Assignment Entry. They are:







Moving Fields<br/>within aThe order in which the fields appear in the Fields in Section box is the<br/>order in which the fields will appear in the Customized Assignment Entry<br/>View. The table below outlines the steps needed to change the order of<br/>Fields within a Section:StepAction1In the Sections box click the Section name in which you





Making Fields Required	Fields in th unless you	e Customized Assignment Entry View are considered Optional make them Required.		
	Note: This application	does not include those fields that are required by the and automatically set to Required.		
	Step	Action		
	1	Click the Field name in the Fields in Section box.		
	2	Click the Edit Field Options button.		
	3	The Field Parameter window displays.		
		Edit Field Options Appraiser Type Required Appraiser Name Required Appraiser Address Required Phone Number Required © Optional Hidden 5 Cance Save		
	4	Click the <b>Required</b> radio button.		
	5	Click the <b>Save</b> button.		
		<b>Note:</b> You must click the Save button located at the bottom of the screen before exiting Customize Assignment Entry to permanently save your changes.		



HidingSome fields have sub-fields associated with them. When you click theSub-FieldsEdit button, all associated sub-fields are displayed. You can hide sub-<br/>fields from the customized view.

**Note:** You cannot change the order of the sub-fields. You can only hide them from the Customized Assignment Entry View. The following table outlines how to hide sub-fields:

Step	Action
1	Click the Field name in the Fields in Section box and then click the <b>Edit Field Options</b> button.
	Appraiser Deductible  Edit Field Options
2	The <b>Edit Field Options</b> window appears. All sub-fields appear in the order they will be displayed in the customized view.
	Edit Field Options  Appraiser Type Required  Appraiser Name Required  Appraiser Address Required  Phone Number Required  Optional  Hidden Cance Save
3	Click the <b>Hidden</b> radio button to hide the sub-field on the Customized Assignment Entry View.
4	Click the <b>Save</b> button. <b>Note:</b> You must click the Save button located at the bottom of the screen before exiting Customize Assignment Entry to permanently save your changes.



Customizable Assignment Entry Fields The following table lists the fields and subfields available within CCC ONE<sup>®</sup> Workflow – Claims Management. Those fields that are system required fields are indicated:

Field Name	Required	Sub-Field Name	Required
3 <sup>rd</sup> Party Claim		3 <sup>rd</sup> Party Claim	
Reference ID		Reference ID	
Adjuster		Adjuster	
		Last Name	
		First Name	
		Code	
		Phone Number	
Agent		Last Name	
		First Name	
		ID	
		License	
		Agent Type	
		Phone Number	
		Address 1	
		Address 2	
		City	
		State/Province	
		Postal Code	
Appointment Date		Appointment Date	
		Appointment Time	
Appraiser	X	Appraiser Type	X
		Appraiser Name	X
		Appraiser Address	
		Phone Number	
Assigned By		Assigned By	
Catastrophe Code		Catastrophe Code	
Claim Office	X	Claim Office	X

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Customizable	Field Name	Required	Sub-field Name	Required
Assianment	Claim Parties	X	Role	Х
Entry Fields.			Company Name	Х
continued			Company Contact Last	
continuou			Name	
			Company Contact First	
			Title	
			Last Name	
			First Name	
			Individual/Company	X
			Party Phone	
			Address Type	X
			Address 1	
			Address 2	
			City	
			State/Province	
			Postal Code	
			Email	
			Driver's License Number	
			State/Province	
			Expiration Date	
			Social Security Number	
			Claim Party Injured?	
			Statement	
	Claim Unit		Claim Unit	
	Coverage Code		Coverage Code	
	Daily Cost		Daily Cost	
	Date Assigned		Date Assigned	
	Date Reported		Date Reported	
	Date of Loss		Date of Loss	
			Time of Loss	
	Deductible		Deductible	
			Deductible Type	
	Endorsement Notes		Endorsement Notes	
			(notes field)	



Customizable	Field Name	Required	Sub-field	Required
Entry Fields,	Facts of Loss		Facts of Loss (notes field)	
continued	Impact Area(s) of		Primary Impact Area	
	Damage		Secondary Impact Area	
	2		Tertiary Impact Area	
	Injuries?		Injuries?	
	Inspection		Inspection	
	Requirements		Requirements	
			(notes field)	
	Instructions to		Instructions to	
	Estimator		Estimator	
			(notes field)	
	Insurance Carrier		Insurance Carrier	
			Enter Other	
	Is The Vehicle		Is The Vehicle	
	Driveable?		Driveable?	
	Loss Reference ID		Loss Reference ID	
	OK to Pay?		OK to Pay?	
	Place of Loss		Place of Loss	
			Description	
			Address 1	
			Address 2	
			City	
			State/Province	
			Postal Code	
	Policy Dates		Policy Start Dates	
			Policy Expiration Dates	
	Policy Extension		Policy Extension	
	Postal Code Where		Postal Code Where	
	Vehicle Principally		Vehicle Principally	
	Garaged		Garaged	
	Rental Car in Use?		Rental Car in Use?	
	Request for		Request for	
	Supplement		Supplement	
	Theft?		Theft?	
	Type of Loss		Type of Loss	
	Underwriting		Underwriting	
	Company		Company	

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Customizable	Field Name	Required	Sub-field Name	Required
Assignment	Vehicle		VIN Vehicle Type	
Entry Fields,			Year	
continued			Make	
			Model	
			Body Style	
			Vehicle Engine	
	Vehicle Condition		Vehicle Condition	
	Vehicle Exterior		Vehicle Exterior	
	Color		Color	
	Vehicle Impact Notes		Vehicle Impact Notes (notes field)	
	Vehicle Interior Color		Vehicle Interior Color	
	Vehicle License		Vehicle License	
	Expiration Date		Expiration Date	
	Vehicle License Plate		Vehicle License Plate	
	Venicle License State		Venicie License State	
	Vehicle Location		Vehicle Location	
			Name	
			Address 1	
			Address 2	
			City Otata (Decening of	
			State/Province	
			Postal Code Phone Number	
	Vehicle Odometer		Vehicle Odometer	
	Vehicle Prior		Vehicle Prior	
	Damage Notes		Damage Notes (notes	
			field)	
	Vehicle Production		Vehicle Production	
	Date		Date	
	Vehicle is Total		Vehicle is Total	
	Loss?		Loss?	



Version History

Version Number	Revision Date	Description
1.0	11/17/2021	Version History added.

