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## Q&A for the filing of the Annual Statement on Market Conduct (ASMC) and for the Complaint Report tool

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### General questions:

Would the industry complaints database be available to all insurers? Is any information shared at a high level – types and numbers of complaints filed?

CCIR shares select information from the Annual Statement on Market Conduct (ASMC) with stakeholders through the public reports issued. Refer to the [CCIR website](#) for more information.

**Identification tab** – Question 020, what client number are you referring to?

The AMF ten-digit client number. It appears in the top of the email inviting insurers to do the ASMC. It is right under the subject. In the text, it indicates: "You will also need your client number for identification purposes (in the form itself). This number can be found on the top of this email".

**Identification tab** – Question 100 for Property and Casualty Insurance form only, "Are you offering new insurance contracts (including renewals)?" What is the interpretation of "new insurance contracts"?

Engaged in new insurance business, means you are still active in the sales of insurance, including renewals.

**Tab 2.0 Governance** – Question as to whether fair treatment of consumers (FTC) practices are documented. What entails such documentation?

The FTC principles are duly incorporated into the company's policies and processes, which are formally documented, for example, in the strategic plan, code of ethics, business processes, compliance tools, and so on.

**Tab 4.0 / 4.0-6.5 Products** – Since CCIR recommended not to add product modified per province but by product, if we only offer one product in one province, do we not list it in the chart?

If this product offered is modified during the Reference Period, please list it under column (01) Name of the product offered and you can in parentheses put the name of the province/s where it is offered (e.g., Automobile (NB) and Automobile (QC) should be reported as Automobile (NB, QC).

**Tab 6.0 / 8.0 Distributors** – Column (01) "Name of the Top 10 Distributors". We would like to understand the intent behind now requiring the names of the brokers to be disclosed and what is the need for this information?

Historically we have not requested the names; this was discussed at the time and a decision was made to postpone the collection by a few years. Regulators use this data to better understand the market and the relationships between its participants. The CCIR is aware this is confidential information, just like the majority of the data required in the ASMC.

**Tab 6.0 / 8.0 Distributors** – Column (10) "First Refusal Right over Distributor". We would like clarification as to whether this concerns a typical right of first refusal procedure, when a broker intends to sell his business, should he have the opportunity to buy the business on the same conditions as those for which the broker is ready to sell to a third party?

Yes. The first refusal right is a clause included in certain shareholders' agreements between an insurer and a firm/broker. This clause obliges the shareholder who wishes to sell or otherwise dispose of his shares to first offer them to the insurer (their co-shareholder) before making an offer to third parties.

**Complaint Entry** – "Distribution channel", what are the choices to select if the complaint concerns group insurance (offered by an employer)?

Would it be possible to get a list of what is covered by the three options offered?

1. Direct or Exclusive Channel
2. Independent Channel
3. Other Distribution Channels.

The different Distribution Channels definitions are available via the link to the form or the web page: [https://lautorite.qc.ca/fileadmin/lautorite/formulaires/professionnels/assureurs/definitions-declaration-annuelle-assurance-personnes\\_an.pdf](https://lautorite.qc.ca/fileadmin/lautorite/formulaires/professionnels/assureurs/definitions-declaration-annuelle-assurance-personnes_an.pdf)

**Complaint Entry** – If "settled" means coming to a mutual agreement, how should we categorize/report complaints where we have issued a final position letter but never heard back from the customer?

You can report as "settled" if internally your company would consider it as settled.

## **Tab 10.0 / 12.0 Protection of personal information - What is the definition of "breach"?**

As mentioned in the specific instructions Tab 10 of the Annual Statement on Market Conduct (ASMC) form: "Breaches" refers to incidents and occurrences based on applicable privacy legislation and provincial insurance legislation regardless of the number of individuals impacted by the breach".

More generally, regardless of all applicable privacy and provincial insurance laws, a personal information data breach means a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorized disclosure of, or access to, personal data transmitted, stored or otherwise processed.

### **ASMC Property & Casualty questions:**

**Identification tab** - On the identification page of the CCIR Annual Statement form, it is asked if we offer liability insurance. Checkbox for question 111 (02). From our understanding, we should refer to the definitions used by the Quarterly Return / Annual Supplement - P&C. Do these definitions apply only to commercial liability insurance products or do they also apply to personal liability insurance?

The definitions of the Quarterly Return / Annual Supplement are only used to specify the nature of the data expected in section 5.0 Premiums, Commissions and Claims of the Annual Return.

The Annual Statement only covers personal data, so it excludes commercial data. This notice appears at the top of the page of most tabs with the exception of the complaints tab (9.6) where it is possible to enter a complaint relating to business insurance, in particular if, on the identification page, confirm you offer both types of insurance (personal and business).

On page 7 of the definitions relating to the Annual Statement, available here: [https://lautorite.qc.ca/fileadmin/lautorite/formulaires/professionnels/assureurs/definitions-declaration-annuelle-assurance-dommages\\_an.pdf](https://lautorite.qc.ca/fileadmin/lautorite/formulaires/professionnels/assureurs/definitions-declaration-annuelle-assurance-dommages_an.pdf), it is specified businesses insurance, professionals and commercial establishments. Insurance lines are used to cover commercial risks as opposed to personal lines, which cover personal risks. Examples include commercial general liability (CGL), workers compensation, and commercial property insurance. Consequently, the portion of commercial liability insurance should not be added in the different tabs of the Annual Statement, even if the definitions proposed by the Quarterly Return / Annual Supplement - P&C encompass these subcategories of liability.

**Tab 8.0 Claims** – Rows 010, 020 and 050, how do we determine when a claim is opened? When claims reopen, or are closed / withdrawn at the customer's request with no payments made, should these be included in reporting?

Specific instructions are included at the top of the "Claims" tab. For re-opened claims, enter it, making sure you do not create duplicates for the same reference period. You do not have to report claims withdrawn by the customer.

**Tab 8.0 Claims** – To determine what the "opened" or "reported" date is, the instructions do not specify whether we should use the date the claim is first reported to the company, or the date there is a financial activity posted for the claim (for example, a reserve being set for the claim). Do you have a preferred trigger date to be used for "opened / reported" claims?

The specific instruction on the top page mentions: "A claim is considered opened or reported when the insurer opens the claim's file". So, when an insured first reports a claim then the insurer creates a file for that claim, the claim is considered open the day of the first report.

### **ASMC Life & Health questions:**

**Tab 3.0 Policies – Under Group Policies**, Column 04, "Number of Policies Cancelled or Terminated due to Contract". As lapses are reported in tab 9.5, should tab 3 capture only those terminated contracts (not renewed by customer) or if lapses are also to be included?

We require all types of cancellations or terminations, all the cancellations resulting from the insurer and all the cancellations resulting from the insured.

**Tab 3.0 Policies** – Column 06, "Number of Customer Initiated Cancellations Excluding the "Free Look" Period (including Lapses)". By adding "(including Lapses)", is a failure to pay premiums is considered as a customer initiated cancellation, even if the customer has not contact the insurer (e.g., via email, letter or telephone call)?

Yes. Lapses are considered as insured cancellations and must be included in the column 06. Tab 9.5 on Lapses requests only data on the first and second year's lapses. The Tab 3 includes all lapses occurred in the reference period.

**Tab 3.0 Policies** – In the reference period, an insurer acquired a block of policies from another Canadian life insurer via an assumptive reinsurance agreement. Should these new policies be included in the Annual Statement data?

No. Reinsurance data should not be included.

**Tab 10.0 Claims** – Should claims incurred but not reported (IBNR) be reported in this tab?

Claims should be reported on the same basis as reported in the Quarterly Return / Annual Supplement.

**Tab 10 Claims** – Row 060, "As primary insurer, average days to final payment" does not include periodic payments (ex. Long-term disability) or payments made in installments – which products does this refer to?

Confirm this is the date from receipt of full claim to last payment date.

It is applicable to all products with periodic or installments payments, especially Accident & Sickness products.

To calculate the average days, use the date where the claim has been opened and the date of final payment. See the specific instructions Tab 10, "A claim is considered opened". Do not take into account claims with periodic or installments payments.

**Tab 10 Claims** – Row 030, "Number of claims closed with an indemnity payment during the period", should Short-term disability and Long-term disability be separated or combined?

We request data by insurance category breakdown by "Individual" or "Group", not by type of product (e.g. short-term or long-term disability).

**Tab 10.0 Claims** – Row 040, Claims denied during the period. For a policy offering cover of \$ 100, 000 with a rider of \$ 50, 000 for accidental death benefit. If the base is paid, but the accidental death benefit is not, should this be counted as a denial or not?

Since the insurer has paid the base, so it is not considered a denial. There is nothing to report on line 040 for this claim. The amount paid in benefits would therefore be of \$ 100,000 on line 035.

**Tab 10.0 Claims** – When an insurer underwrites a secondary coverage, the claim can only be paid when it is fully processed by "First payer", the primary insurer. Then, "Second payer", the secondary insurer review and process the claim. These claims can dramatically inflate the "Average days the final payment" data. How should we report this information?

When applicable, limit the "average days to final payment" to claims processed as a First payer and add your data for secondary coverage in the General comments box.

### **Complaint Report tool questions:**

Is the Complaint Report tool mandatory?

The use of the complaint reporting tool is now mandatory for entering and transmitting your complaints. You must therefore enter your complaints for the current period, i.e. from January 1 to December 31, and update your open complaints from a previous period before May 1.

What is the effective date for reporting complaints through the tool?

Your complaints for the current period, i.e. those from January 1 to December 31, as well as those appearing in the system as still open from a previous period, can be sent to the AMF via your complaint report as of March 1 and no later than May 1, 11:59 pm (ET). Whether or not you have any reportable complaints, the transmission of your complaint report must be done via the Complaint Report tool available in the AMF's E-Services.

Is the tool just for Quebec complaints or for all of Canada?

The Complaint Report tool is for all complaints across Canada, not only Quebec complaints. The Annual Statement on Market Conduct and the associate Complaint Report tool is a CCIR initiative from all the provincial and territorial insurance regulators,

CCIR's members. AMF is the designated service provider for all CCIR regulators. Therefore, the AMF collects the complaints reports and data from the Annual Statement in the name of all these regulators.

Are we able to upload a complaint file rather than inputting one at a time in the new tool?

Unfortunately, not. The tool replaces the previous ASMC Excel sheet.

- Previously Section 9.6 of the P&C ASMC;
- Previously Section 11.6 of the Life and Health ASMC

Is there an instruction manual available for the tool?

Yes, the "Complaint Report" User's Guide is available on the AMF web page:  
[https://lautorite.qc.ca/fileadmin/lautorite/professionnels/obligations/SRP\\_2.0-Guide\\_Utilisateur2023\\_ang.pdf](https://lautorite.qc.ca/fileadmin/lautorite/professionnels/obligations/SRP_2.0-Guide_Utilisateur2023_ang.pdf).

How is "no complaint" report submitted to the Complaint Report tool?

To report "no complaint" (or if you have complaint), you must connect the Complaint Report tool, verify the information step 1 – Complaint Entry.

Go to step 2 – Complaint report transmission and click on the "Validate information" for the reference period from January 1 to December 31.

At the bottom of the page "Validate information and transmit the complaint report" is a reporting / confirmation checkbox: I certify that all information has been provided in accordance with the reporting requirements of the Complaint Report and is complete, accurate and current.

Check the box and use "transmit the complaint report" button.

A message box will appear: Some complaints do not contain a closing date. Be sure to include as much information as possible before submitting your latest complaint report to AMF. If, all is good, proceed with Continue button.

Finally, you obtain a confirmation number for the transmission of your Complaint Report .

The Complaint Report tool replaces the Complaint Report System (CRS) reporting tool correct?

For insurers, the tool replaces the Excel tab (9.6 P&C and 11.6 L&H) from the Annual Statement on Market Conduct, which had replaced in 2017 the Complaint Report System (CRS), the method used back then to report complaints.

Is the Complaint tool link embedded in the Market Conduct Survey or is it in the same area on the AMF site?

The Complaint reporting tool is not integrated via a link in the Annual Statement on Market Conduct Excel form. The tool is available in the AMF's E-Services under "Complaint Management".

Is the Complaint Report tool only accessed for annual reporting or can an insurer access and maintain data throughout the reporting year?

The Complaint reporting tool is accessible throughout the year for complaint entry. Reporting (transmission of the complaint report) is done once a year by May 1st. An insurer can now access the tool and maintain information on its complaints throughout the year via the tool. It can even re-import the captured complaints (csv format) to its own register.

The AMF can only see the complaints entered and reported by the insurer. Those outside the disclosure period or not reported yet are visible only to the insurer.

Can users of the Complaint Report tool always access their data in future at any time?

Yes, the tool allows you to view data entered (new complaints) or converted (open complaints without an end date from a previous reporting period) in the complaint reporting tool at any time.

Is the "Complaint Record Identification Code" systematically generated when the complaint is added to the tool?

No, the tool uses your own complaint numbering/reference. However, we suggest you use a unique alpha-numeric sequence for your complaints. Avoid using a single numeric sequence that is the same for each year so as not to create duplication. We recommend using the complaint year number followed by the complaint number (e.g. 2022-1). This will make it much easier to find and update your complaints in the tool.

What if there is a merger between two insurers, how do I report complaints?

In the case of a merger, open complaints will have to be added manually to the resulting or the new entity. Ensure the resulting entity has access. If in doubt, contact: [Infoform.pc-mc@lautorite.qc.ca](mailto:Infoform.pc-mc@lautorite.qc.ca)

Will the complaints Reporting section (9.6 P&C and 11.6 L&H) of the Excel-based Annual Statement on Market Conduct disappear?

Yes, this section no longer exists in the Excel version of the 2022 Annual Statement on Market Conduct (downloadable January 1). The Complaint Report tool accessible via the AMF's E-Services under "Complaint Management" will replace this section in the Annual Statement.

Do we need to manual input the complaints in the tool and capture the complaint information on the Excel worksheet?

No, the tabs relating to Complaint Reporting (9.6 P&C) or (11.6 L&H) have been entirely removed from the Annual Statement on Market Conduct Excel form. These sections are being replaced by the Complaint Report tool. The section (9.0 P&C) or (11.0 L&H) on Complaint Examination is however maintained (5 questions).



How do we add new E-Services users so they can add in complaints?

If your company is clicSEQUR, you must request your access to the AMF's E- via a clicSEQUR representative within your own company. This person can provide access. If you are unsure of your access, you can contact us at the following: [Infoform.pc-mc@lautorite.qc.ca](mailto:Infoform.pc-mc@lautorite.qc.ca).

If your company has no business and no right to practice in Quebec, you must contact by email the AMF in order to obtain a specific "Authorized clients only" access at the following: [Infoform.pc-mc@lautorite.qc.ca](mailto:Infoform.pc-mc@lautorite.qc.ca):

To report complaints, if we already have access to the AMF's E-Services, do we still have to make a new access request?

No, normally your access to the AMF's E-Services allows you to access the "Complaints Report" tool. However, if this is not the case, please check with your company's clicSEQUR access manager to see if you have specific access to the functional block (036) Complaint Management.

If we have a right to practice for insurance and brokerage, how do I report complaints?

Some entities might have several legal requirements with the AMF (i.e. Credit assessment agents, Financial services cooperatives, Firms, representatives and independent partnerships, etc.). In this case, the insurer and the Firms, representatives, and independent partnerships from the same company will have more option in their Complaints Report tool. They will have to select from Complaint entry dropdown menu for which requirement the complaint should be reported. The dropdown menu options for entering your complaint will then be displayed based on this first selection. The menus are different according to legal obligation.

### **Filing and E-services questions:**

When will we receive the Annual Statement?

The fillable Excel version of the Annual Statement has been available from January 1 through your AMF E-Services account in your client file under "Market Conduct".

What do we do if we receive the following error when opening the downloaded Annual Statement Excel?

*ERROR: "Workbook contains one or more links that cannot be updated". To change the source of links, or attempt to update values again, click Edits Links; To leave the links as is, click Continue.*

If you encounter this type of error Do not select Edits Links as this will make it no longer possible to upload the completed file thru E-Services. The file will be rejected, and you will have to download and fill it again. Use the Continue button or simply close the box by clicking on the "X" on the top right. If not yet done, save the file and fill it normally.



We completed the Annual Statement. How do we submit it?

If you completed the form, it means you downloaded it via E-Services. To submit the form, log in to E-Services and go to Client File / Disclosure Schedule. The Annual Statement on Market Conduct disclosure will be available in there. Click on the [blue hyperlink](#) disclosure and follow the steps to attach your Excel document. Once done, you will receive a confirmation number and an email in Client File / Secured Message Inbox.

Here is a link to perform the Annual Statement disclosure in E-services:  
[https://lautorite.qc.ca/fileadmin/lautorite/formulaires/professionnels/assureurs/guide-utilisation-pratiques-commerciales-sel\\_an.pdf](https://lautorite.qc.ca/fileadmin/lautorite/formulaires/professionnels/assureurs/guide-utilisation-pratiques-commerciales-sel_an.pdf)

How do we change the Market Conduct contact?

If you wish to add one or more "Contact person – market conduct" for your company, you can now do so via the AMF's E-Services in the "Client file" / "Manage business relationships" section. This will ensure all identified contacts will receive communications on the "Annual Statement".

How do we change the E-Services contact?

For a "clicSÉCUR" access, contact the internal authorized contact person of your company to access the AMF E-services.

For an "Authorized clients only" access or if you are not sure of your type of access, contact the AMF Information Centre 1-877-525-0337

To obtain a new "Authorized clients only" access, modify an email or telephone number linked to your access, you must contact us at the following: [Infoform.pc-mc@lautorite.qc.ca](mailto:Infoform.pc-mc@lautorite.qc.ca).

I forgot my password for the AMF E-Services, how can I change or recover it?

For a "clicSÉCUR" access, contact the internal authorized contact person of your company.

For an "Authorized clients only" access, connect to E-Services with your "Authorized clients only", click on [Can't access your account?](#) and follow the steps.

The password change is the only modification you can make on your own.