



Questions and answers on the "Complaint report" associated with the Annual Statement on Market Conduct (ASMC)

Reporting complaints via the "Complaint report":

- **Q.** Is the complaint reporting tool mandatory?
- R. Yes, 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 the previous period before May 1.
- **Q.** The complaint reporting tool replaces the Complaint Reporting System (CRS) tool, correct?
- **R.** For insurers, the tool replaces the Excel tab (9.6 P&C and 11.6 L&H) from the ASMC, which replaced the Complaint Reporting System (CRS) in 2017.
- **Q.** Do we need to manually input the complaints in the tool and capture the complaint information on the Excel worksheet?
- R. The tabs relating to the ASMC, i.e. the Complaint Reporting (9.6 P&C) or (11.6 L&H) have been entirely removed from the Excel form. These sections have been replaced by the Complaint report accessible via the Autorité des marchés financiers' (the "AMF") E-Services under "Complaints Management".
 Section (9.0 P&C) or (11.0 L&H) of the form dealing with the Complaint Examination is maintained.

- **Q.** What is the effective date for reporting complaints through the tool?
- **R.** 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 reporting tool available in the AMF's E-Services.

- Q. Can users of the complaint reporting tool always access their data in future at any time?
- **R.** 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
- **Q.** Is the complaint reporting tool only accessed for annual reporting or can an insurer access and maintain data throughout the reporting year?
- **R.** 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 1. 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.

- **Q.** Are we able to upload a complaint file rather than inputting one at a time in the new tool?
- **R.** Unfortunately not, the tool replaces the previous ASMC Excel sheet.
- **Q.** Is there an instruction manual available for the tool?
- **R.** Yes, the "Complaint report User's Guide" is available on the AMF web page: https://lautorite.qc.ca/en/professionals/insurers/market-conduct.

- **Q.** How is "no complaint" report submitted to the complaint reporting tool?
- **R.** To report "no complaint" (or if you have complaint), you must connect the complaint reporting tool and, verify the information in step 1 Complaint Entry.

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

At the bottom of the "Validate information and transmit the complaint report" page is a confirmation checkbox: "I hereby certify that all the information in this complaint report has been provided in the manner required therefore and is complete, accurate and up to date."

Check the box and click the "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.

- **Q.** Is the tool just for Quebec complaints or for all of Canada?
- **R.** The complaint reporting tool is used for all complaints across Canada, not only Quebec complaints. The ASMC and the associated Complaint report tool is a Canadian Council of Insurance Regulators (CCIR) initiative from all the provincial and territorial insurance regulators, who are CCIR's members.

The AMF is the designated service provider; therefore, the AMF collects the complaints reports and data from the ASMC in the name of all these regulators.

Q. If the complaint concerns group insurance (offered by an employer), which "distribution channel" should be selected?

Would it be possible to obtain a list of what is covered by the three categories offered:

- 1. Direct or exclusive distribution channel
- 2. Independent distribution channel
- 3. Other distribution channel
- **R.** Definitions of the various distribution channels are available via the link to the form or the web page:

Definitions of Terms Used in the Annual Statement on Market Conduct – Life and Health Insurance (lautorite.gc.ca)

- **Q.** "Agreement reached" means reaching a mutual agreement: how should we classify / report complaints for which we have issued a final position letter without having had a response from the customer?
- **R.** You can indicate "Agreement reached" if your company considers the complaint settled.
- **Q.** What if there is a merger between two insurers, how do I report complaints?
- **R.** 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.gc.ca**
- **Q.** If we have a right to practice for insurance and brokerage, how do I report complaints?
- **R.** 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 options in their complaints reporting 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.

Complaint reporting process:

- **Q.** In addition to the five categories identified during the July 2024 webinar or during the September 19, 2024 information session, must insurers report the total number and nature of complaints handled by the initial examiner?
- **R.** According to the diagram presented during the July 24, 2024 **webinar**:

Not to be reported in the complaints reporting tool: complaints only handled by the initial examiner.

Must be reported in the complaint reporting tool: complaints corresponding to one of the five types of reportable or escalating complaints.

Must not be filled in the insurer's internal register if the customer's request does not meet the definition of a complaint.

Must be filled in the insurer's internal register if the customer's request meets the definition of a complaint.

- **Q.** When will insurers be able to report the total number of complaints listed in your internal complaint tracking register by reason for complaint and class of insurance via the ASMC form?
- **R.** As of January 1, 2025 for insurers able to provide this information, otherwise no later than January 1, 2026.
- **Q.** How do I request an extension if I can't meet CCIR's expectations by December 31, 2025?
- **R.** As announced at the September 19, 2024 information session, the 18-month (transitional) period began in July 2024 and will end on December 31, 2025, so the capture of complaints according to CCIR expectations will take place no later than January 2026 for all insurers. Therefore, if an insurer believes it will not be able to meet CCIR expectations by December 31, 2025, it must contact CCIR within a reasonable period of time to explain its issues.
- **Q.** If a customer's complaint is only about the delay in reviewing their request or the long wait for a customer service representative to answer their call, wouldn't that be considered a complaint, especially if the customer went directly to the ombudsman?
- R. Indeed, we saw at the September 19, 2024 briefing what should not be declared in the complaints report. However, each of these examples can lead to a formal complaint, depending on the situation. Insurers must therefore assess the situation before applying these examples, especially if the situation leads to a formal, escalating complaint.
- **Q.** A customer asks the insurer to reconsider the decision to reject his claim following a loss. This situation can nevertheless become a complaint if, at the end of the claims procedure, the customer is not satisfied and wishes to file a claim. Can you elaborate on this example?
- R. It is up to the insurer to determine the right level.
 When the exchanges between the customer and the insurer are part of a claims handling process, it is not a complaint.
 If, however, at the end of this process, after having exhausted all review avenues specific to the claims process and explained to the customer the reasons for denial, the customer wishes to file a complaint, he or she may do so.
- **Q.** Will CCIR break down the dropdown menu options for the five types of reportable complaints for individual life complaints ONLY, or for all complaints?
- **R.** No, dropdown menu options are available for both life and health insurance (individual and group) and property and casualty insurance (personal and commercial), although certain details may not be applicable both sectors use the same menus.

- Q. One of the five types of complaints that must be systematically disclosed in the Complaint report tool - Breach of confidentiality of customer information - may steps into the privacy officer's role and is part of another regulation. Do I still have to report it?
- R. When a customer is complaining about a Breach of confidentiality, it must be reported in the insurer internal register and in the complaint reporting tool under the heading Breach of confidentiality of customer information.

 The customer is not satisfied and has every right to lodge a complaint to that effect, even if the Breach itself must be reported under another specific law / obligation. The CCIR doesn't want any details of the breach from the insurer. However, we expect the insurer to record this information in the insurer's internal register and complaint notification tool, to assess the situation that gave rise to the complaint and to deal with the situation diligently, in accordance with the guidelines on the CCIR's Conduct of Insurance Business and Fair Treatment of Customers guidance, especially section 6.12 Protection of Personal Information.
- **Q.** Isn't a request for reviewing a claim's decision an appeal?
- **R.** Yes, this is an appeal, a request for review of this claim. However, it is not considered a complaint until the review process has been completed.
- **Q.** How is not responding to a customer an ethical issue?
- **R.** As mentioned at the September 19, 2024 presentation, codes of ethics or conduct are frameworks frequently put in place by insurers to state and communicate their expectations in terms of values, principles, objectives, and strategies related to the Fair Treatment of Customers! Each insurance company determines the appropriate level of ethical principles applicable to the behavior of its personnel, and this is what guides the insurer in the event of a possible breach of ethics.
- **Q.** Do all complaints in Quebec have to be entered in the internal complaints register?
- **R.** All insurers must have internal complaints register. All complaints must be added to the insurer's internal register if they meet CCIR's definition of a complaint.
- **Q.** Could you please confirm what definition of complaint has been retained following the consultation on the type and nature of complaint?
- **R.** We confirm that the definition of complaint in the CCIR's ASMC in use since 2017 will now match the definition included in the **CCIR's Conduct of Insurance Business and Fair Treatment of Customers guidance**.
 - In line with the indications presented at the July 24, 2024 **webinar**, insurers already in a position to apply this new definition can do so now. All insurers will have to apply this definition by January 1, 2026 at the latest.

- **Q.** Is there a way to review the previous information session or webinar?
- **R.** The July 24, 2024 **webinar** and the September 19, 2024 **presentation** on the complaints reporting process are available online on the AMF's **Market conduct webpage**.

Complaint reporting tool:

- **Q.** Is the complaint reporting tool link embedded in the Market Conduct Survey or is it in the same area on the AMF site?
- **R.** The complaint reporting tool is not integrated via a link in the ASMC Excel form. The tool is available in the AMF's E-Services under "Complaint Management".
- **Q.** Is the "Complaint Record Identification Code" systematically generated when the complaint is added to the tool?
- R. 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.

- **Q.** How do we add new E-Services users so they can add in complaints?
- **R.** If your company is clicSÉQUR, you must request your access to the AMF's E-Services via a clicSÉQUR representative within your own company. This person can provide access.

If you are unsure of your access, you can contact us at the following email address: Infoform.pc-mc@lautorite.qc.ca.

If your company has no business and no right to practice in Quebec, you must contact the AMF by email at the following **Infoform.pc-mc@lautorite.qc.ca** to obtain specific "Authorized clients only" access. Be sure to include the full name of the person requiring access, their business mailing address, telephone number and e-mail address.

- **Q.** To report complaints, if we already have access to the AMF's E-Services, do we still have to make a new access request?
- **R.** No, normally your access to the AMF's E-Services allows you to access the "Complaints report".

However, if this is not the case, please check with your company's clicSÉQUR access manager to see if you have specific access to the functional block (036) "Complaint Management".