**Annex II**

**S.19.01 - Non-life Insurance Claims Information**

**General comments:**

This Annex contains additional instructions in relation to the templates included in Annex I of this Regulation. The first column of the next table identifies the items to be reported by identifying the columns and lines as showed in the template in Annex I.

This annex relates to annual submission of information for individual entities.

Claims development triangles show the insurer’s estimate of the cost of claims (claims paid and claims provisions under Solvency II valuation principle) and how this estimate develops over time.

Three set of triangles are required regarding claims paid, best estimate of claims provisions and RBNS claims.

This template shall be reported for each Line of Business (LoB) as defined in Annex I of the Delegated Regulation (EU) 2015/35 and material considering the following specifications:

1. reporting by LoB: it is required to report LoBs 1-12 (as reported in S.17.01) for both direct and accepted proportional reinsurance (to be reported together) and LoBs 25-28 for accepted non-proportional reinsurance;
2. If the total gross best estimate for one non-life line of business represents more than 3% of the total gross best estimate of the claims provision the information shall be reported with the following split by currencies in addition to the total for the line of business:
3. Amounts in the reporting currency;
4. Amounts for any currency that represents more than 25% of the gross best estimate of the claims provisions in the original currency from that non-life line of business; or
5. Amounts for any currency that represents less than 25% of the gross best estimate of the claims provisions in the original currency from that non-life line of business but more than 5% of total gross best estimate of the claims provisions in the original currency.
6. If the total gross best estimate for one non-life line of business represents less than 3% of the total gross best estimate of the claims provision no currency split is required, only the total for the line of business shall be reported.
7. The information by currency shall be reported in the original currency of the contracts unless otherwise specified.

Undertakings are required to report data on an accident year or underwriting year basis, in accordance with any requirements of the National Supervisory Authority. If the National Supervisory Authority has not stipulated which to use then the undertaking may use accident or underwriting year according to how they manage each line of business, provided that they use the same year consistently, year on year.

The default length of run-off triangle is 15+1 years for all LoBs but the reporting requirement is based on the undertakings’ claims development (if length of the claims settlement cycle is shorter than 15 years, undertakings are required to report according to the internal shorter development).

Historical data, starting from the first time application of Solvency II, are required for claims paid and RBNS claims but not for Best Estimate of Claims Provision. For the compilation of the historical data for claims paid and RBNS claims the same approach concerning the length of triangle for the on-going reporting will be applied (i.e. the shorter between 15+1 years and the undertakings’ claims settlement cycle).

All or part of an obligation moves from S.19.01 into S.16.01, when both of the conditions below are met:

1. All or part of the obligation has been formally settled as an annuity; and
2. a best estimate of an obligation formally settled as an annuity can be established using life techniques.

Formally settled as an annuity typically means that a legal process has ordered that the beneficiary is to receive payments as an annuity.

The sum of provisions in templates S.16.01 and S.19.01 for one non-life LoB represents the total claims reserves originating from this LoB.

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|  | **ITEM** | **INSTRUCTIONS** |
| Z0010 | Line of Business | Identification of the line of business reported. The following closed list shall be used:  1 – 1 and 13 Medical expense insurance  2 – 2 and 14 Income protection insurance  3 – 3 and 15 Workers' compensation insurance  4 – 4 and 16 Motor vehicle liability insurance  5 – 5 and 17 Other motor insurance  6 – 6 and 18 Marine, aviation and transport insurance  7 – 7 and 19 Fire and other damage to property insurance  8 – 8 and 20 General liability insurance  9 – 9 and 21 Credit and suretyship insurance  10 – 10 and 22 Legal expenses insurance  11 – 11 and 23 Assistance  12 – 12 and 24 Miscellaneous financial loss  25 – Non-proportional health reinsurance  26 – Non-proportional casualty reinsurance  27 – Non-proportional marine, aviation and transport reinsurance  28 – Non-proportional property reinsurance |
| Z0020 | Accident year or Underwriting year | Report the standard used by the undertakings for reporting of claims development. One of the options from the following closed list shall be used:  1 – Accident year  2 – Underwriting year |
| Z0030 | Currency | Identify the ISO 4217 alphabetic code of the currency in which the obligation is denominated.  This item shall be filled in with “Total” when reporting the total for the line of business. |
| Z0040 | Currency conversion | Identify if the information reported by currency is being reported in the original currency (default) or in the reporting currency (otherwise specified). The following close list shall be used:  1 – Original currency  2 – Reporting currency  Only applicable when reporting by currency. | |
| C0010 to C0160/ R0100 to R0250 | Gross Claims Paid (non-cumulative) –Triangle | The Gross Claims Paid, net of salvage and subrogation, excluding expenses, in a triangle showing the developments of the gross claims payment already made: for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year) report the payments already made corresponding at each development year (which is the delay between the accident/underwriting date and the payment date).  The data are in absolute amount, non-cumulative and undiscounted.  The amount includes all the elements that compose the claim itself but excludes any expenses. |
| C0170/ R0100 to R0260 | Gross Claims Paid (non-cumulative) – In current year | Total “Current year” reflects the last diagonal (all data referred to last reporting year) from R0110 to R0250.  R0260 is the total of R0110 to R0250. |
| C0180/ R0100 to R0260 | Gross Claims Paid – Sum of years (cumulative) | Total “Sum of years” contains the sum of all data in rows (sum of all payments referred to the accident/underwriting year), including total. |
| C0200 to C0350/ R0100 to R0250 | Gross undiscounted Best Estimate Claims Provisions – Triangle | Triangles of undiscounted best estimate of claims provisions, gross of reinsurance for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year). The best estimate for claims provision relates to claims events occurred before or at the valuation date, whether the claims arising from these events have been reported or not. The data are in absolute amount, non-cumulative and undiscounted. |
| C0360/ R0100 to R0260 | Gross Best Estimate Claims Provisions – Year end (discounted data) | Total “Year end” reflects the last diagonal but on a discounted basis (all data referred to last reporting year) from R0110 to R0250.  R0260 is the total of R0110 to R0250 |
| C0400 to C0550/ R0100 to R0250 | Gross Reported but not Settled Claims (RBNS) – Triangle | Triangles for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year) of provisions in respect of claim events that have happened and been reported to the insurer, but have not yet been settled, excluding IBNR (incurred but not reported claims). These may be case-by-case reserves estimated by claim handlers and do not need to be on a best estimate Solvency II basis. The RBNS shall be measured using consistent reserve strength over time.  The data are in absolute amount, non-cumulative and undiscounted.  The amount includes all the elements that compose the claim itself but excludes any expenses. |
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| C0560/ R0100 to R0260 | Gross Reported but not Settled Claims (RBNS) – Year end (discounted data) | Total “Year end” reflects the last diagonal (all data referred to last reporting year) from R0110 to R0250.  R0260 is the total of R0110 to R0250. |
| C0600 to C0750/ R0300 to R0450 | Reinsurance Recoveries received (non-cumulative) – Triangle | Triangles for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year) of payments, reported in the “Gross Claims Paid (non-cumulative)”, covered by a reinsurance contract.  The amounts shall be considered after the adjustment for the counterparty default.  The amount includes all the elements that compose the claim itself but excludes any expenses. |
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| C0760/ R0300 to R0460 | Reinsurance Recoveries received (non-cumulative) – In current year | Total “Current year” reflects the last diagonal (all data referred to last reporting year) from R0310 to R0450.  R0460 is the total of R0310 to R0450.  The amount includes all the elements that compose the claim itself but excludes any expenses. |
| C0770/ R0300 to R0450 | Reinsurance Recoveries received – Sum of years (cumulative) | Total “Sum of years” contains the sum of all data in rows (sum of all payments referred to the i-accident/underwriting year), including total. |
| C0800 to C0950/ R0300 to R0450 | Undiscounted Best Estimate Claims Provisions – Reinsurance recoverable – Triangle | Provisions referred to the amounts recoverable from reinsurance contracts and special purpose vehicles. In the triangle is required to reported undiscounted data, while the column “Year end” will contain data on discounted basis.  The amounts shall be considered after the adjustment for the counterparty default. |
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| C0960/ R0300 to R0460 | Best Estimate Claims Provisions – Reinsurance recoverable – Year end (discounted data) | Total “Year end” reflects the last diagonal but a on discounted basis (all data referred to last reporting year) from R0310 to R0450.  R0460 is the total of R0310 to R0450. |
| C1000 to C1150/ R0300 to R0450 | Reinsurance RBNS Claims – Triangle | Triangles for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year) of reinsurance share of provisions, reported in the “Gross Reported but not Settled Claims (RBNS)“, covered by a reinsurance contract.  The amount includes all the elements that compose the claim itself but excludes any expenses. |
| C1160/ R0300 to R0460 | Reinsurance RBNS Claims – Year end | Total “Year end” reflects the last diagonal (all data referred to last reporting year) from R0310 to R0450.  R0460 is the total of R0310 to R0450. |
| C1200 to C1350/ R0500 to R0650 | Net Claims Paid (non-cumulative) – Triangle | Triangles for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year) of claims paid (net of salvage/subrogation) and reinsurance.  The amount includes all the elements that compose the claim itself but excludes any expenses. |
| C1360/ R0500 to R0660 | Net Claims Paid (non-cumulative) – In current year | Total “Current year” reflects the last diagonal (all data referred to last reporting year), from R0510 to R0650.  R0660 is the total of R0510 to R0650 |
| C1370/ R0500 to R0660 | Net Claims Paid – Sum of year (cumulative) | Total “Sum of years” contains the sum of all data in rows (sum of all payments referred to the accident/underwriting year), including total. |
| C1400 to C1550/ R0500 to R0650 | Net Undiscounted Best Estimate Claims Provisions – Triangle | Triangles for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year) of Best Estimate of Claims Provisions, net of reinsurance. |
| C1560/ R0500 to R0660 | Net Undiscounted Best Estimate Claims Provisions – Year end (discounted data) | Total “Year end” reflects the last diagonal but on a on discounted basis (all data referred to last reporting year) from R0510 to R0650.  R0660 is the total of R0510 to R0650 |
| C1600 to C1750/ R0500 to R0650 | Net RBNS Claims – Triangle | Triangles for each of the accident/underwriting years from N-14 (and prior) and all previous reporting periods to – including - N (last reporting year) of Claims Outstanding net of salvage/subrogation and reinsurance.  The amount includes all the elements that compose the claim itself but excludes any expenses. |
| C1760/ R0500 to R0660 | Net RBNS Claims – Year end | Total “Year end” reflects the last diagonal (all data referred to last reporting year) from R0510 to R0650.  R0660 is the total of R0510 to R0650. |
| **Inflation rates (only in the case of using methods that take into account inflation to adjust data)** | | |
| C1800 to C1940/ R0700 | Historic inflation rate – total | In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report by year, and for the 15 years, historic inflation rate used to adjusted historical paid losses triangles. |
| C1800 to C1940/ R0710 | Historic inflation rate – external inflation | In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, historic external inflation: which is the “economic” or “general” inflation, i.e. the increase of the price of goods and services in an specific economy (e.g. Consumer Price Index, Producer Price Index, etc. |
| C1800 to C1940/ R0720 | Historic inflation rate – endogenous inflation | In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, historic endogenous inflation: which is an increase of claim costs specific of the line of business under consideration. |
| C2000 to C2140/ R0730 | Expected inflation rate – total | In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report by year, and for the 15 years, expected inflation rate used to adjusted historical paid losses triangles. |
| C2000 to C2140/ R0740 | Expected inflation rate – external inflation | In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, expected external inflation: which is the “economic” or “general” inflation, i.e. the increase of the price of goods and services in an specific economy (e.g. Consumer Price Index, Producer Price Index, etc. |
| C2000 to C2140/ R0750 | Expected inflation rate – endogenous inflation | In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, expected endogenous inflation: which is an increase of claim costs specific of the line of business under consideration. |
| C2200/ R0760 | Description of inflation rate used | In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report narrative description of inflation rate used. |