

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

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.

The annuity claims provision to be reported only in S.16.01 is the amount of the annuity when established for the first time using life techniques. All claims payments made in respect of this claim (annuity payments or lump sum payments) following this will be reported in S.16.01 only.

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.

Are required 3 set of triangles regarding claims paid, best estimate of claims provisions and RBNS claims.

This template shall be filled for each Line of Business (LoB) and material currency according to the following criteria:

- 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 13-16 for accepted non-proportional reinsurance for a total of 16 LoBs;
- reporting by currency:
  - if BE of Claims Provision for a specific Line of business (taking into account all currencies) makes up less than 3% of total gross BE of Claims Provision, then it is not required to report separately the triangles for this LoB for different currencies but only total in reporting currency;
  - if BE of Claims Provisions for a specific LoB (taking into account all the currencies) makes up more than 3% of total gross BE of Claims Provision, then it is required to report separately the triangles for this LoB for the total (in reporting currency) and for each currency (in the original currency by default unless the NSA requires it in the solvency II reporting currency) that makes up:
    - either more than 25 % of LoB
    - or more than 5 % of gross BE of claims provisions.

Undertakings are required to report data on accident year or underwriting year basis, according to the convention eventually (if any) required at national level by the National Supervisory Authority responsible for the supervision. If no national convention exists then the undertaking may use accident or underwriting year according to how they manage each line of business. This shall be applied consistently over time.

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).

In case of transfer of portfolio or other merger and acquisition operations, undertakings are required to restate the historical data submitted in the first reporting date after the transfer/M&A in order to present consistent data.

The template is interlinked to Life template S.16.01 and the LOGs for both templates shall be read in conjunction, in particular regarding the issues of reporting of the IBNR and of the conditions for the transfer of provisions to S.16.01.

The annuity claims provision to be moved to template S.16.01 is the amount of the annuity when established for the first time using life techniques. All claims payments made in respect of this claim (annuity payments or lump sum payments) following this will be reported in S.16.01 only.

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.

**ITEM**

**INSTRUCTIONS**

ITEM		INSTRUCTIONS
Z0010 (A00)	Line of Business	Identification of the line of business reported. The following closed list shall be used: 1 - Medical expense insurance 2 - Income protection insurance 3 - Workers' compensation insurance 4 - Motor vehicle liability insurance 5 - Other motor insurance 6 - Marine, aviation and transport insurance 7 - Fire and other damage to property insurance 8 - General liability insurance 9 - Credit and suretyship insurance 10 - Legal expenses insurance 11 - Assistance 12 - Miscellaneous financial loss 13 - Proportional medical expense reinsurance 14 - Proportional income protection reinsurance 15 - Proportional workers' compensation reinsurance 16 - Proportional motor vehicle liability reinsurance
Z0020 (A03)	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	Total LoB or by currency	Identify if the data refers to the total of the Lob or to the additional split by currency. One of the options in the following closed list shall be used: 1 – Total amount of LoB for all currencies 2 – By currency
Z0040 (A01)	Currency	Identify the ISO 4217 alphabetic code of the currency of the obligation.  This item shall be left blank when reporting the total for the line of business.

C0010 to C0160/ R0100 to R0250 (A1)	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.
C0170/ R0100 to R0260 (A2)	Gross Claims Paid (non-cumulative) – In current year	Total “Current year” contains the sum of the last diagonal (all data referred to last reporting year), including total.
C0180/ R0100 to R0260 (A3)	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 (P1)	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 (P2)	Gross Best Estimate Claims Provisions – Year end (discounted data)	Total “Year end” for each year, on discounted basis, including total.
C0400 to C0550/ R0100 to R0250 (AE1)	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.
C0460/ R0100 to R0260 (AE2)	Gross Reported but not Settled Claims (RBNS) – Year end (discounted data)	Total “Year end” for each year, including total.
C0600 to C0750/ R0300 to R0450 (A17)	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

C0760/ R0300 to R0460 (A18)	Reinsurance Recoveries received (non-cumulative) – In current year	Total “Current year” contains the sum of the last diagonal (all data referred to last reporting year), including total.
C0770/ R0300 to R0450 (A19)	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 (P17)	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.
C0960/ R0300 to R0460 (P18)	Best Estimate Claims Provisions – Reinsurance recoverable – Year end (discounted data)	Total “Year end” for each year, on discounted basis, including total.
C1000 to C1150/ R0300 to R0450 (AE17)	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.
C1160/ R0300 to R0460 (AE18)	Reinsurance RBNS Claims – Year end	Total “Year end” for each year, including total.
C1200 to C1350/ R0500 to R0650 (A20)	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
C1360/ R0500 to R0660 (A21)	Net Claims Paid (non- cumulative) – In current year	Total “Current year” contains the sum of the last diagonal (all data referred to last reporting year), including total.
C1370/ R0500 to R0660 (A22)	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 (P20)	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 (P21)	Net Undiscounted Best Estimate Claims Provisions – Year end (discounted data)	Total “Year end” for each year, on discounted basis, including total.
C1600 to C1750/ R0500 to R0650 (AE20)	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.
C1760/ R0500 to R0660 (AE21)	Net RBNS Claims – Year end	Total “Year end” for each year, including total.

**Inflation rates (only in the case of using methods that take into account inflation to adjust data)**

C1800 to C1940/ R0700 (A23)	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 (A24)	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 (A25)	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 (A26)	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 (A27)	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 (A28)	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

(A29)		inflation rate used.
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