

### S.21.03. – Non-life underwriting mass risks (old TP-E7B)

#### 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 undertakings.

The template is retrospective and should be filled by every non-life insurer (including Non-SLT Health) only for the direct business and only for the Non-life Lines of Business (LOBs).

The underwriting risk portfolio is the distribution, in (predefined) brackets, of the sum insured of each and every single underwriting risk which have been accepted by the undertaking (i.e. mass risks). The underwriting risk portfolio is per LOB. However, whereas some LOBs are reportable on a compulsory basis for all member states, the individual member states may also require compulsory basis reporting for further LOBs where deemed to be relevant. For certain LOBs, the template would not be applicable. (See also item Line of business).

The sum insured relates to each and every individual underwriting risk, only looking at the main coverage of the policy per LOB, and means the highest amount that the insurer can be obliged to pay out. This means:

- If the sum insured of the additional cover for “Theft” is lower than the sum insured of the main cover for “Fire and other damage” (both belonging to the same LOB), the highest sum insured must be taken.
- A policy cover comprising a number of buildings across the country/car fleet etc must be broken down.
- If the risk has been accepted on a co-insurance basis, the insured sum indicates the maximum liability of the reporting non-life insurer.
- In case of joint liability through co-insurance, the part belonging to a defaulting co-insurer must be included in the sum insured as well.

	ITEMS	INSTRUCTIONS
Z0010	Line of business	<p>Identification of the line of business reported.</p> <p>First category: Lobs that are compulsory for all member states:</p> <ul style="list-style-type: none"> <li>• Other motor insurance;</li> <li>• Marine, aviation and transport insurance;</li> <li>• Fire &amp; other damage to property insurance;</li> <li>• Credit &amp; Suretyship insurance.</li> </ul> <p>Second category: Lobs that are compulsory at the discretion of each individual NSAs:</p> <ul style="list-style-type: none"> <li>• Motor vehicle liability insurance;</li> <li>• General liability insurance;</li> <li>• Medical expenses insurance;</li> <li>• Income protection insurance;</li> <li>• Worker’s compensation insurance;</li> <li>• Miscellaneous financial loss;</li> <li>• Legal expenses insurance;</li> <li>• Assistance.</li> </ul> <p>The following closed list shall be used:</p> <ol style="list-style-type: none"> <li>1 - Medical expense insurance</li> <li>2 - Income protection insurance</li> <li>3 - Workers' compensation insurance</li> <li>4 - Motor vehicle liability insurance</li> <li>5 - Other motor insurance</li> <li>6 - Marine, aviation and transport insurance</li> <li>7 - Fire and other damage to property insurance</li> <li>8 - General liability insurance</li> </ol>

		<p>9 - Credit and suretyship insurance</p> <p>10 - Legal expenses insurance</p> <p>11 - Assistance</p> <p>12 - Miscellaneous financial loss</p>
C0020/R0010-R0210 (A1-A21)	Start sum insured	<p>Start amount of the interval within which the sum insured of the individual underwriting risk belongs and needs to be aggregated.</p> <p>In case the reporting currency is in Euros, one of the following 5 base options for the distribution of the underwriting risks can be used:</p> <p>1 - 20 brackets of 25,000 plus 1 extra bracket for Sum Insured &gt; 500,000.</p> <p>2 - 20 brackets of 50,000 plus 1 extra bracket for Sum Insured &gt; 1 million.</p> <p>3 - 20 brackets of 250,000 plus 1 extra bracket for Sum Insured &gt; 5 million.</p> <p>4 - 20 brackets of 1 million plus 1 extra bracket for Sum Insured &gt; 20 million.</p> <p>5 - 20 brackets of 5 million plus 1 extra bracket for Sum Insured &gt; 100 million.</p> <p>However, an undertaking should use undertaking specific brackets, in particular when Sum Insured &lt; 100,000 to guarantee that the level of detail is sufficient to provide adequate insight in the distribution of the claims incurred.</p> <p>For policies where there is no Sum Insured defined in the policy the undertaking should do their own estimations or use default values.</p> <p>The option chosen needs to be used consistently over the reporting periods, unless the distribution of claims changes significantly.</p> <p>For different reporting currencies National Supervisory Authorities need to define the equivalent options for the amounts to be used in the 20 brackets.</p>
C0030/R0010-R0200 (B1-B20)	End sum insured	End amount of the interval within which the sum insured of the individual underwriting risk belongs and needs to be aggregated.
C0040/R0010-R0210 (C1-C21)	Number of underwriting risks	The number of underwriting risks whose sum insured falls within the start amount and end amount of the applicable bracket.
C0040/R0220	Number of underwriting risks – Total	Total number of underwriting risks reported in all brackets.
C0050/R0010-R0210 (D1-D21)	Total sum insured	The aggregated amount of the sum insured, on a gross basis and using the reporting currency, of all the individual underwriting risks, whose sum insured falls within the start amount and end amount of the applicable bracket.
C0050/R0220	Total sum insured – Total	Total of the aggregated amounts of the sum insured, on a gross basis and using the reporting currency, of all the individual underwriting risks reported in all brackets.
C0060/R0010-R0210 (E1-E21)	Total annual written premium	The aggregated amount of the written premium of the underlying underwriting risks.
C0060/R0220	Total annual written premium – Total	Total of the aggregated amounts of the annual written premium reported in all brackets.

