International Complaints Handling at Lloyd's: Canada

di re U U U in th vo R pr T T	Reportable Complaint means any reproach or issatisfaction expressed either in writing or verbally, in espect of a service or product offered by Lloyd's nderwriters related to a policy or claim issued by Lloyd's nderwriters Canada and could not be resolved mediately , nor a plan agreed with the party to resolve are matter at initial contact, to the satisfaction of the party bicing the concern. eportable complaints will follow the tier one/tier two rocesses. he Market must apply judgment when determining if a complaint is reportable. In a case when it is unclear or there doubt, the complaint must be treated as a reportable complaint
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Definition of a consumer	A consumer means all current and prospective customers
	of insurance products.

Application of Lloyd's procedure and local complaint regulations	Federal - The Office of the Superintendent of Financial Institutions (OSFI) regulates and supervises all banks and federally incorporated or registered trust and loan companies in Canada, as well as insurance companies.
	All federally regulated financial institutions are required by the <i>Insurance Companies Act</i> to have dedicated procedures as well as personnel in place to deal with consumer complaints.
	The <i>Insurance Companies Act</i> S.C. 1991, c. 47 is the primary legislation governing all federally incorporated or registered insurance companies in Canada.
	Reporting of complaints is not specifically addressed in all jurisdictions other than a general requirement that insurers have a duty to furnish the superintendent on his request for full information.

Policyholders' Complaint Protocol and Regulatory	A prompt acknowledgement of the complaint, where possible within two business days of receipt.
Reporting Requirements	
Process CC-000-2)	In total, the insurer has 56 calendar days from acknowledgement of the complaint by Lloyd's Canada Service Desk, managing agent or their representative, whichever is earliest to when the final position letter is issued to the insured by the Lloyd's Complaints team.
	In the case of Lloyd's and where the insured writes to the Lloyd's Canada office, Lloyd's Canada will refer the insured's complaint to the broker who placed the business

at Lloyd's. The applicable Market participant (coverholder, TPA, managing agent) is instructed to respond directly to the insured, with a copy to Lloyd's Canada (info@lloyds.ca) within 20 Calendar days.
A closing loop e-mail is sent to the insured by Lloyd's Canada within one to two business days after receiving the stage one response. The file is closed 10 business days after sending the closing loop e-mail.
Should the insured remain dissatisfied with the stage one response, the Lloyd's Canada office will refer the complaint, along with the stage one position, to the Lloyd's Complaints team, who will review the complaint and reply directly to the insured with a final response letter.
When a complaint is referred to the Lloyd's Complaints team, it will have the balance of the 56 calendar days to provide a final response letter to the insured. However, if there are unforeseen circumstances where the Lloyd's Complaints team are not in a position to provide a final response letter within the 56 days, it must advise the insured that the file continues to be in progress. If the insured is not satisfied with Lloyd's Complaints team's final response letter, the insured has the right to have the complaint reviewed by the General Insurance OmbudService (GIO) (refer below for details) and Québec clients, may also refer to the Autorité des marches financiers (AMF) (refer below for details).

External Dispute Resolution (EDR) scheme and eligibility	 General Insurance OmbudService (GIO) Toll free number: 1-877-225-0446 www.giocanada.org The General Insurance Ombudsman Service is an independent organisation, created in 2002, with the sole purpose of helping Canadian consumers resolve disputes or concerns with their home, auto or business insurers. The GIO deals with complaints relating to home, automobile, commercial and accident and sickness for any federally licensed company in Canada that is a member of the GIO. For Québec clients, the alternative dispute resolution body is: Autorité des marches financiers (AMF): The AMF is the body mandated by the government of Québec to regulate the province's financial markets and
	The AMF is the body mandated by the government of Québec to regulate the province's financial markets and provide assistance to consumers of financial products and services.

	Toll free number: 1-877-525-0337 Québec: (418) 525-0337 Montréal : (514) 395-0311 www.lautorite.qc.ca If policyholders have a complaint specifically about Lloyd's Underwriters' complaints handling procedures, policyholders may contact the Financial Consumer Agency of Canada (FCAC). The FCAC ensures federally regulated financial entities comply with consumer protection measures, promotes financial education and raises consumers' awareness of their rights and responsibilities. The FCAC does not get involved in individual disputes.
Local Regulatory Reporting Requirements	The provincial regulators regulate market conduct and the licensing and supervision of insurance intermediaries, such as agents, brokers and adjusters. The Canadian Council of Insurance Regulators (CCIR) represent the provincial/territorial insurance regulatory authorities. It is an inter-jurisdictional association of insurance regulators. The mandate of the CCIR is to facilitate and promote an efficient and effective insurance regulatory system in Canada to serve the public interest. They work together to develop solutions to common regulatory issues. Through the CCIR Annual Statement, insurers are required to file information related to their governance, practices and policies with respect to the fair treatment of consumers. Insurers are required to complete/file Annual Statement by May 1. The Insurance Companies Act of Canada requires licensed insurers to have a complaints procedure and join an independent organization to mediate complaints that have not been resolved to the satisfaction of the consumer through the insurer's own internal procedures. To comply with these requirements, Lloyd's is a member of the General Insurance OmbudService (GIO). In this regard, every Lloyd's underwriting member carrying on Canadian business and every managing agent acting on their behalf is required to conform to and abide by GIO standards. The GIO is the dispute resolution body for all Canadian jurisdictions, with the exception of Québec.

	According to the Financial Consumer Agency of Canada (FCAC), the insurer has 90 days from the time the Lloyd's Canada office forwards the complaint to the intermediary, to when the final position letter is issued to the insured by the Lloyd's Complaints team.
	Relative to FCAC, further information is available on Crystal, refer to Processing and Servicing of Risks and Complaints.
	The OmbudService for Life & Health Insurance (OLHI) is an independent complaint resolution and information service for consumers of Canadian life and health insurance. It includes resolving insurance complaints about disability, employee benefits, travel, and investment products such as annuities and segregated funds. OLHI's operations are overseen by the Canadian Council of Insurance Regulators (CCIR), as well as their independent Board of Directors.
Lloyd's Complaint Notice	The Lloyd's Underwriters' Policyholders' Complaint Protocol for Canada is LSW 1542F and is published on the Lloyd's Wordings repository in English and French. It is also referenced in the Pre-contractual notification and Insurance documents sections of Crystal.