

Complaint- Handling Procedures

for

SCOR Insurance – Canadian Branch
199 Bay Street, Suite 2800
Toronto
Ontario M5L 1G1

(Version 2.3 – Effective: November 1, 2020)

SCOR Insurance – Canadian Branch Complaint-Handling Procedures

ABOUT THE DOCUMENT

Document Information

Properties

The document properties are:

Owner	Neil Ringrose, Chief Agent
In force from	November 1, 2020
Author	Neil Ringrose, Chief Agent
Reviewed by	Canadian Branch Management Committee (CBMC)
Approved by	Chief Agent

Review process

The Complaints Handling Procedures shall be reviewed at least annually. Changes made to the Complaints Handling Procedures, other than minor or editorial changes, are subject to review by the CBMC and approval by the Chief Agent.

Version & date	Reviewer(s)	Main changes (not applicable to the first version)
Version 1.0 (1/1/2016)	Reviewed by CBMC	<i>Adoption of the Guideline</i>
Version 2.0 (10/09/2018)	Reviewed by CBMC	
Version 2.2	Reviewed by CBMC	Under F: Reporting - Remove PARC on a semi-annual basis
Version 2.3	Reviewed by CBMC	Added the website link to the Branch's Complaints Handling Procedures

Scope

The Complaints Handling Procedures applies to the Branch of SCOR UK Company Limited (SUK) and address only particular items/parameters specific to the Branch.

Applicability

The Complaints Handling Procedures applies to each of the persons referred to herein when fulfilling a function described in the Complaints Handling Procedures, whether he or she is an employee of the Branch or of another SCOR Group entity.

Change requests

Please send your change requests, including a description and reasons for change, directly to the Author of this Guideline

**SCOR Insurance – Canadian Branch
Complaint-Handling Procedures**

A. Index:

A. Index	Page 2
B. Introduction	Page 3
C. Complaints Handling	Page 4
D. Complaints Handling Procedure	Page 5
E. Contact Information	Page 7
F. Reporting	Page 8

**SCOR Insurance – Canadian Branch
Complaint-Handling Procedures**

B. Introduction:

As a Business-to-Business operation, SCOR Insurance – Canadian Branch (“*the Branch*”) conducts itself in a professional manner with sophisticated insurance buyers for large industrial corporate clients. Conduct of all persons representing the Branch to these clients are expected to respond appropriately to any complaint. As the relationships with clients are through direct channels with the Insurance Manager, Risk Manager, Treasurer or CFO of the client corporation and their appointed Insurance Brokers, any complaint received will be transparent and involve the Senior Management of the Branch relative to communication, information and response.

As a formalization to ensure the necessary priority is provided for any customer complaint and to be able to make available to clients the Branch’s complaint-handling procedures, the following guideline procedure is considered in place and effective for the Branch. For reference, the Branch’s Complaint Handling Procedures can also be found at the following link:

<https://www.scor.com/en/scor-insurance-canadian-branch>

C. Complaints Handling

The Branch is committed to dealing with and resolving complaints in a timely manner.

“Complaint” means any written or oral complaint, claim, demand or dispute made by any customer of the Branch, any government, regulatory body or governmental or regulatory agency, consumer protection or advocacy group or other third party against the Branch.

The *Insurance Companies Act (Canada)* (ICA) is the primary legislation that governs all federally incorporated insurance companies and the ICA requires that the Branch establish procedures for handling complaints, designate an employee to be responsible for implementing those procedures and designate an employee to be responsible for receiving and dealing with complaints and file a copy of its procedures with the Commissioner of the Financial Consumer Agency of Canada. The Branch must also abide by the complaint handling requirements of several provincial regulators. In Ontario, the Financial Services Commission of Ontario (FSCO) requires the Branch to establish a complaint handling protocol, to communicate the policy to consumers and staff and to appoint a complaints designate to liaise with the Insurance Ombudsman's Office. In Quebec, the Autorité des marchés financiers (AMF) requires that the Branch handle each complaint in a fair manner, implement a complaint management policy, acknowledge receipt of a complaint to the consumer, transfer the complaint file to the AMF at the consumer's request and prepare and send a semi-annual complaint report to the AMF.

Consistent across all requirements is the appointment of a designate for receiving and handling complaints that cannot be reasonably resolved in the normal course of business and liaise with the appropriate regulatory bodies as required for such complaints. Any such designate must have the resources necessary to handle, communicate and coordinate, be adequately trained and to have the necessary authority to resolve or recommend resolutions to complaints where possible. Please refer to Section E – Contact Information for the Branch Complaint Designee.

The Branch is expected to inform complainants about these procedures, to keep complainants current about the status of their complaints at specific points during the complaint-handling process and to identify and highlight circumstances in which an extension of the timeline may be warranted.

D. Complaints Handling Procedure:

- 1) A party may make a complaint in writing, in person, by email, by telephone or by fax. The party making the complaint (the “complainant”) shall first contact the person with whom he or she had the interaction that gave rise to the complaint. It is suggested that as much information as possible be supplied, including supporting documentation. If the Branch does not have all of the necessary information that it needs, then this will impact the complaint process. At each step, the Branch employee will acknowledge receipt of the complaint.
- 2) If the complaint remains unresolved, the person named in 1) above shall inform his/her immediate manager (the “Manager”). The Manager shall attempt to resolve the complaint.
- 3) If the complaint remains unresolved, the Manager shall offer to escalate the matter to the designate for reportable complaints. Federally, for the Financial Consumer Agency of Canada (FCAC), a “reportable complaint” is one that has escalated at least one level higher than the operational level or was received at a level higher than the operational level (even if then sent to the operational level for resolution).

Note: The complainant may contact the designate for complaints directly.

For a reportable complaint, FCAC has mandated that the Branch must report such complaints to them within 60 days of being elevated above or received above the operational level. Other types of complaints need not be reported to FCAC.

- 4) Within ninety (90) days or less when possible, following receipt of all of the applicable information and documentation relevant to the complaint at the “reportable” level of handling, the complainant shall be provided with a substantive written response to his or her complaint that includes, at a minimum:
 - a. the Branch’s final decision/offer in response to the complaint, including appropriate details and explanations regarding how the final decision was reached; and
 - b. the complainant’s right to escalate the complaint (to those bodies noted below) upon receipt of the Branch’s final decision, if the complaint has not been resolved to the complainant’s satisfaction or if the complaint has not been dealt with within the above said ninety (90) days. If the Branch takes longer than the said ninety (90) days the complainant shall have the right to

**SCOR Insurance – Canadian Branch
Complaint-Handling Procedures**

- c. escalate the matter to the said bodies and the Branch shall advise the complainant of such right.
- 5) If the complaint remains unresolved, the complainant shall be advised how to contact the organizations referred to below.
- 6) The role of the complaints designate is to provide a forum for our customers and other parties to voice concerns following interactions with our employees.
- 7) The complaints designate will assess whether the correct internal process was adhered to, ensure that the party lodging the complaint has been given every opportunity to be fully and fairly heard and provide a written response setting out his/her findings. The complaint designate shall have discretion to refer the matter back (with recommendations if he/she so chooses) to either the first employee that interacted with the complainant or to that employees Manager.

**SCOR Insurance – Canadian Branch
Complaint-Handling Procedures**

E. Contact Information

Complaint Designate:

Murielle Langille
Assistant Vice President
Corporate Secretary
SCOR Canada Reinsurance Company
199 Bay Street, Suite 2800
Toronto, Ontario M6L 1G1
mlangille@scor.com
tel: 416 304 6530
fax: 416 869 9578

The General Insurance OmbudService (GIO):

The GIO is a third-party dispute resolution organization of which the Branch is a member. The GIO's contact information can be found below:

Tel no 1 877 225 0446

Note: the complainant can also complete an online Complaint Form at:

<https://www.giocanada.org/complaint-form/>

Financial Consumer Agency of Canada:

Financial Consumer Agency of Canada
427 Laurier Avenue West, 6th Floor
Ottawa ON K1R 1B9
Tel: 1-866-461-3222
Fax: 1-866-814-2224

**SCOR Insurance – Canadian Branch
Complaint-Handling Procedures**

F. Reporting

The Branch reports to the following entities with respect to reportable complaints:

- FCAC reporting compliance issues and a yearly examination questionnaire.
- AMF on a semi-annual basis;
- FSCO on a semi-annual basis.
- Canadian Council of Insurance Regulators (CCIR) – Annual Statement on Market Conduct, which includes a section on complaints and is due by May 1st, each year.