

#### **FINANCE**

Assistant Deputy Minister
Pensions, Insurance and Financial Institutions and
Superintendent of Financial Institutions

Room 409, Terrace Building 9515 – 107 Street Edmonton, Alberta T5K 2C3

AR#11155

December 20, 2004

# To: All AUTOMOBILE INSURANCE COMPANIES LICENSED IN ALBERTA

# **Attention Chief Executive Officer**

On November 16, 2004 the Finance Minister signed Ministerial Order 03/04, which established the *Complaint Resolution Regulation* AR 259/2004. This Ministerial regulation comes into effect on January 1, 2005.

The Complaint Resolution Regulation requires all insurance companies licensed in Alberta for the class of automobile insurance to establish a complaint resolution process for premium and adverse contractual action disputes. The process must include the means and timeframes in which complaints will be received, processed and considered. Automobile insurers are also required to file a report with the Superintendent of Insurance every six months outlining the number of complaints received and their status.

Insurance companies have already provided the Superintendent of Insurance with a contact person for this complaint process. A listing is on the Alberta Finance website at www.finance.gov.ab.ca/publications/insurance. Insurance companies are also required to notify the Superintendent of any changes to an insurer's complaint liaison officer.

In the near future you will receive more information about the form of complaint report that will be required to be filed on July 1, 2005. A copy of the *Complaint Resolution Regulation* is attached for your information

If you have any questions about his Regulation please contact Arthur Hagan, Deputy Superintendent of Insurance at 780-422-1592.

Dennis Gartner
Superintendent of Insurance

AH/pc



# **INSURANCE ACT**

# COMPLAINT RESOLUTION REGULATION

Alberta Regulation 259/2004

# **Extract**

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# **ALBERTA REGULATION 259/2004**

#### Insurance Act

# **COMPLAINT RESOLUTION REGULATION**

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#### **Definitions**

- 1 In this Regulation,
  - (a) "complaint" means a complaint made under section 14 of the Premiums Regulation;
  - (b) "insurer" has the same meaning that it has in the Premiums Regulation;
  - (c) "policyholder" has the same meaning as it has in section 13(d) of the Premiums Regulation;
  - (d) "Premiums Regulation" means the Automobile Insurance Premiums Regulation (AR 124/2004).

# **Duties of insurers**

- 2 Before January 1, 2005, every insurer must
  - (a) appoint one or more persons to be responsible for receiving and dealing with complaints from policyholders and notify the Superintendent of the name of the person or persons, and
  - (b) establish a complaint resolution process in accordance with this Regulation.

# Responding to complaints

- 3 The person appointed by an insurer to receive and to deal with complaints by policyholders must
  - (a) be reasonably available to respond to policyholder's complaints,
  - (b) facilitate the timely, expeditious and efficient management of complaints, and
  - (c) keep the complaints resolution process of the insurer up-to-date, including notifying the Superintendent of any changes to the person or persons responsible for receiving and dealing with complaints.

# Complaints resolution process

- **4(1)** An insurer must establish and maintain a complaints resolution process, including the following:
  - (a) a written process describing the means by which complaints are received, processed, considered and responded to within the time referred to in subsection (2);
  - (b) the means by which and the times at which policyholders will be notified of the management of their complaint;
  - (c) the opportunity that will be provided to policyholders to explain their complaint and the manner in which the insurer will respond to the policyholder;
  - (d) a written code of ethical conduct for the manner in which complaints are processed, managed and decided;
  - (e) a fair and efficient process for managing complaints that will allow the insurer, in accordance with section 14(2) of the Premiums Regulation, to make an attempt in good faith to resolve the policyholder's complaint.
- (2) Unless the insurer and policyholder agree to extend the time period, the insurer must notify the policyholder in writing of the insurer's decision about the policyholder's complaint within 30 days of the date the insurer receives the complaint.

# Reports

- **5** On or before June 1, 2005, and once every 6 months after that, an insurer must file a written report with the Superintendent covering all the following matters:
  - (a) stating the number of complaints received;

- (b) stating the number of complaints resolved;
- (c) categorizing the general nature of the complaints received and the number in each category;
- (d) providing any other information the Superintendent requests.

# **Publication**

6 An insurer must provide to its policyholders information about the complaint resolution process established in accordance with this Regulation and the person to whom and how complaints may be made.

# **Expiry**

7 For the purpose of ensuring that this Regulation is reviewed for ongoing relevancy and necessity, with the option that it may be repassed in its present or an amended form following a review, this Regulation expires on November 30, 2014.