

National specific template Log NS.10 – projection of future cash flows (best estimate – non-life: liability claim types)

General Comment

This template is to be completed by insurance and reinsurance firms that carry out any of the following lines of business (LoBs) as defined in the Delegated Act Annex 1:"Lines of Business":

- LoBs 4 and 16 Motor vehicle liability insurance and proportion reinsurance
- LoBs 6 and 18 Marine, aviation and transport insurance and proportional reinsurance
- LoBs 8 and 20 General liability insurance and proportional reinsurance
- LoB 26 Non-proportional casualty reinsurance
- LoB 27 Non-proportional marine, aviation and transport reinsurance

Purpose

The purpose of this template is for insurance and reinsurance firms to report best estimate cash-flows relating to bodily injury claims and latent claim obligations of non-life business.

In order to maintain a consistent format with which firms are familiar, the information required on this template follows the information (re)insurance firms are required to report under Article 8 (ff) of the Delegated Act, as specified in the template S.18.01.b "Projection of future cash flows based on best estimate of nonlife business", according to instructions of Annex II, but with the following additional items of information:

- 'Best estimate claims provision (gross) cash out-flows future benefits' is to be reported for specific claim types defined in this LOG.
- Actual historical cash out-flows of payments to policyholders & beneficiaries are to be reported for specified claim types.
- This template requires cash flows for specified categories of business to be reported see below (whereas S.18.01.b refers to the firm's whole portfolio of non-life obligations).

Cash flows to be reported

Though the main purpose of this template is for best estimate future cash flows to be reported, the template also requires reporting of actual historical cash flows for the purpose of giving a context to the best estimate future cash flows.

- In rows R0110 to R0150 firms are to report actual historical cash flows in each of the five financial years immediately preceding the reference date.
- In rows R0210 to R0500 firms are to report the best estimate future cash flows in each of the 30 financial years immediately following the reference date.
- In row R0510 firms are to report the best estimate of total future cash flows to be paid beyond 30 years after the reference date, as a single undiscounted amount.
- In row R0610 firms are to report the best estimate of total future cash flows from the reference date, as a single undiscounted amount.

Thus if the reference date is 31/12/2016:

- In rows R0110 to R0150 firms are to report actual historical cash flows in each of the financial years 2012, 2013, 2014, 2015 and 2016 respectively..
- In rows R0210 to R0500 firms are to report best estimate future cash flows in each of the 30 financial years 2017 to 2046 respectively.



- In row R0510 firms are to report best estimate of total future cash flows to be paid beyond in the 2047 and subsequent financial years.
- In row R0610 firms are to report best estimate of total future cash flows from 31/12/2016.

The cash flows to be reported in each column pertain to specified cash flow items or claim types. Instructions are set out below on what is to be included in the cash flow items 'historical cash outflows - past benefits' and 'Best estimate claim provision (gross) – cash out-flows - future benefits'.

'Historical cash out-flows - past benefits' (reported in cells rows R0110 to R0150 and columns C0310 to C0410):

- are defined as amounts of actual payments to policyholders or beneficiaries.
- include costs incurred by policyholders in defending plaintiff claims,
- are net of any contribution from other insurers,
- are gross of reinsurance,
- can include claim management expenses directly attributable to individual claims (aka allocated loss adjustment expenses) if the firm's data is such that separating these expenses from actual payments to policyholders and beneficiaries is unduly burdensome.

'Best estimate claim provision (gross) – cash out-flows - future benefits' (reported in rows R0210 to R0610 and columns C0210 to C0610):

- are defined as amounts of all the expected payments to policyholders and beneficiaries as defined in article 78(3) of the Solvency II Directive relating to contracts used in the calculation of the claim provision,
- include costs incurred by policyholders in defending plaintiff claims,
- are net of any contribution from other insurers (e.g. where parties to an accident are insured by more than one insurer or insurers have an agreement to share claim costs),
- are gross of reinsurance.

Definitions of which cash flow items are claim types to be included in each column are provided in the table in this LOG.

Where the firm writes only a share of a contract giving rise to an insurance obligation, it should report only that share of the future cash-flows relating to that contract.

Reporting of cash flows by financial year

The allocation of future cash flows to individual financial years reported in this template for a claim type, category of business, insurance / reinsurance, currency subdivision should be the same as how those cash flows are allocated to individual financial years for the purpose of reporting future cash flows on template S.18.01.b as specified in the Implementing Technical Standard on Reporting. To illustrate this point with a hypothetical example:

If for the purpose of reporting S.18 best estimate claim provision gross cash out-flows for future benefits from health hazard deafness claims denominated in GBP arising from UK Employers' liability insurance business are included with other best estimate claim provision gross cash out-flows for future benefits and the total of these cash flows are allocated to future years as: 3.20% in each of years 1 to 30 and 4.00% for years 31+, then in this template for:

- Currency = GBP
- Category of business = UK Employers' liability



• Insurance or inwards reinsurance business = insurance,

The amounts reported at:

- Column C0360, rows R0210 to R0500 should be 3.20% of the amount reported at column C0360 row R0610.
- Column C0360, row R0510 should be 4.00% of the amount reported at column C0360 row R0610.

Latent Claim Obligations

Latent claims are defined as claims that are reported several years after the policy was written or several years after the occurrence of the event (because several years elapsed before occurrence of the event was known).

Whether a claim is deemed a latent claim will be a matter of judgment by the individual (re)insurance firm.

Annuities stemming from non-life contracts (aka Periodic Payment Order part of claims - PPOs)

Cash flows relating to annuities stemming from non-life insurance contracts (where the contract has settled with an annuity payment) are to be excluded from this template as these cash flows are included in template S.13.01.b as specified in the Implementing Technical Standard on Reporting. However, cash flows relating to annuities stemming from non-life accepted reinsurance contracts are to be included in this template. (Though these cash flows are also included in S.13.01.b they are included in the 'Accepted reinsurance' column of that template, therefore they are to be reported on this template so they can be separately identified.)

Categories of business to be reported

(Re)insurance firms are required to report this template for each of the following categories of business:

- a) Motor Vehicle Liability business, cash flows reported in GBP
- b) UK Employers Liability business, cash flows reported in GBP
- c) UK General Liability and MAT business, but excluding UK Employers' Liability business, cash flows reported in GBP
- d) US General Liability and MAT business, cash-flows reported in USD
- e) EU (non-UK) General Liability and MAT business, cash-flows reported in EUR
- f) Australian General Liability and MAT business, cash-flows reported in AUD
- g) Other General Liability and MAT business (i.e. other than UK, US, EU states or Australia), reported in GBP
- h) Other categories of business from which bodily injury or latent claims have arisen, reported in GBP.

In the above:

- Motor Vehicle Liability business is defined as: Motor vehicle liability insurance (i.e. line of business 4 in Annex 1 of the Delegated Act), and proportional and non-proportional reinsurance obligations which relate to insurance obligations included in line of business 4.
- UK Employers Liability business is defined as: Contracts of insurance against the risks of the persons insured incurring liabilities to their employees for injury, illness or death arising out of their employment during the course of business, where the insured has entered into the contract in order



to meet the requirements of the Employers' Liability (Compulsory Insurance) Act 1969 and various related regulations.

 General Liability and MAT business is defined as: Marine, aviation and transport insurance and General liability insurance (i.e. lines of business 6 and 8 in Annex 1 of the Delegated Act), and proportional and non-proportional reinsurance obligations which relate to insurance obligations included in lines of business 6 or 8, where the jurisdiction governing claim settlement is the country mentioned above.

Excel tabs to be included in the submission of this template.

The submission of this template is to comprise of an Excel workbook of 16 tabs. Each tab being for a combination of one of the eight categories of business listed above and selected at row ZR0310, and one of the two categories of insurance / reinsurance selected at row Z0320. As stated under '*Cash flows to be reported*' above, some tabs might have a "Null return" selected at row Z0350.

The cash flows reported in a tab must arise from contracts in the category of business selected at row R0031 and in the category of insurance / reinsurance selected at row R0032.

Instruction Table

The first column of the next table identifies the items to be reported by identifying the columns and rows as shown in the template.

CELL(S)	ITEM	INSTRUCTIONS
Z0010 to Z0350	Basic Information	
Z0010	Undertaking name	Legal name of the undertaking. Needs to be consistent over different submissions This must be the same as the identification code reported in template S.01.02 as specified in the Implementing Technical Standard on Reporting
Z0020	Undertaking Identification code	Identification code of the undertaking, using the following priority: - Legal Entity Identifier (LEI) - Identification code attributed by the PRA This must be the same as the undertaking identification code reported in template S.01.02 as specified in Implementing Technical Standard on Reporting
Z0030	Type of code of undertaking	Type of ID Code used for the "Undertaking Identification code" item.One of the options in the following closed list shall be used:1 - LEI2 - Specific codeThis must be the same as the type of code of undertaking reported in template S.01.02 as specified in Implementing Technical Standard on Reporting
Z0040	Reporting reference date	Identify the ISO 8601 (yyyy-mm-dd) code of the date identifying the last day of the reporting period
Z0080	Reporting submission date	Identify the ISO 8601 (yyyy-mm-dd) code of the date when the report to the supervisory authority is made
Z0090	Type of undertaking	Identify the type of the reporting undertaking. The following closed list



CELL(S)	ITEM	INSTRUCTIONS
		of options shall be used to identify the activity of the undertaking: 1 - Composite undertakings
		3 - Non-Life undertakings This must be the same as the type of undertaking reported in the template S.01.02 as specified in Implementing Technical Standard on Reporting
Z0100	Regular/Ad-hoc submission	Identify if the submission of information relates to regular submission of information or ad-hoc. The following closed list of options shall be used: 1 - Regular reporting 2 - Ad-hoc reporting
Z0110	Currency used for reporting	Identify the ISO 4217 alphabetic code of the currency of the monetary amounts used.
Z0210	Initial submission or re-submission	Identify if it is an initial submission of information or a re-submission of information in relation to a reporting reference date already reported. The following closed list of options shall be used: 1 – Initial submission 2 – Re-submission
Z0 <u>0</u> 310	Category of business	 From the drop down box select one of: Motor Third Party Bodily Injury UK Employers Liability Other UK General Liability US General liability EU General Liability (excl UK) Australia General Liability Other General Liability Other General Liability Other categories of business from which bodily injury or latent claims have arisen
Z0 <u>0</u> 3 20	Insurance or inwards reinsurance business	 From the drop down box select either: Insurance, or Inwards reinsurance. Insurance and inwards reinsurance business must be reported on separate tabs
Z0330	Causes of cash out- flows / benefits – Health Hazard: other	List the top causes of other health hazard latent claims payments which have been included in claim provision / cash out-flows / future benefits / health hazards: other in column C0400.
Z0340	Causes of cash out- flows / benefits - Other latent or very long tail claims	List the top causes of other latent or very long tail claims payments which have been included in claim provision / cash out-flows / future benefits / other latent or very long tail claims in column C0410.
Z0 <u>0</u> 3 5 0	Null return for combination of	From the drop down box select either: • Cash flows reported, or



CELL(S)	ITEM	INSTRUCTIONS
	category and insurance / inwards reinsurance	 Null return If the firm has no cash flows for a category of business / insurance or inwards reinsurance combination, it should select "Null return", Otherwise it should select "Cash-flows reported". If the firm has selected "Cash-flows reported" for a category of business / insurance or inwards reinsurance combination but has no cash flows for a particular cash-flow item in that combination, the column on the template can be left blank for the cash flow item in
Z0360 C0110 to	Cash flows not reported due to S.18	question. Cash flow items not required to be reported on Implementing Technical Standard Reporting template S.18.01.b need not be reported on this template. However, a brief description should be provided of the cash flow items not reported on this template for this reason.
C0140	Best estimate premiun	n provision (gross)
C0110, R0210 to	Best estimate Premium provision (gross) : cash out- flows / future benefits	Column C0110 is to be reported only if the category of business selected (row R0031Z0010) is Motor Third Party Liability business, UK Employers Liability business or UK Other General Liability business. Report amounts of expected payments to policyholders and
		 beneficiaries as defined in Article 78(3) of the Solvency II Directive, used in the calculation of Premium provisions, Where the category (selected in Z0<u>0</u>310) is UK Employers Liability business, the amounts should represent all cash out-flows - future
		benefits in the premium provision for this category. Where the category (selected in Z0 <u>0</u> 3 10) is Motor Third Party Liability business or UK Other General Liability business , the amounts should represent only large bodily injury claims (*) for the category in question.
R0610		(*) For the purpose of this template a Large Bodily Injury claim is defined as a claim on an insurance policy where:
		 a person is claiming compensation for being injured as a result of an accident that was not his or her fault; the claim on the insurance policy does not fall into any of the health hazard, psychological or other very long tail claims types defined in this LOG file; the accident is known to have occurred with a narrow period of time, or the accident would normally be deemed to be a "sudden occurrence" (as opposed to being sustained over a prolonged period of time); the estimated ultimate cost of the claims is equal to or greater than a Large Threshold of £100,000.
C0120, R0210 to	Best Estimate Premium provision	Column C0120 is required to be reported only if the category of business selected (row $\underline{ZR}00\underline{1031}$) is UK Employers Liability



CELL(S)	ITEM	INSTRUCTIONS
R0610	(gross) - cash out- flows - future expenses and other cash out-flows	business . Report amounts of expenses that will be incurred in servicing insurance and reinsurance obligations as defined in Article 78(1) of the Solvency II Directive and other cash-flow items such as taxation payments which are charged to policyholders used in the calculation of Premium provisions
C0130, R0210 to R0610	Best estimate Premium provision (gross) - cash in-flows - future premiums	Column C0130 is required to be reported only if the category of business selected (<u>Z0010</u> row R0031) is UK Employers Liability business . Report amounts of all the future premiums stemming from existing policies, correspondent to Cash in-flows - Future premiums used in the calculation of Premium provisions.
C0140, R0210 to R0610	Best Estimate Premium provision (gross) - cash in-flows - Future other cash in- flows	Column C0140 is required to be reported only if the category of business selected (<u>Z0010</u> row R0031) is UK Employers Liability business . Report amounts of recoverables from salvages and subrogations (cash-in flows) not including investment returns, used in the calculation of Premium provisions.
C0210 to C0710	Best estimate claim provision (gross) – cash out-flows	
C0210, R0210 to R0610	Best Estimate Claim Provision (gross): cash out-flows : Future benefits - annuities stemming from non-life reinsurance contracts	Report the amounts of expected payments to policyholders and beneficiaries arising from annuities stemming from non-life inwards reinsurance contracts.
C0220, R0210 to R0610	Best Estimate Claim Provision (gross): cash out-flows : Future benefits - other Large bodily injury	Report the amounts of expected payments to policyholders and beneficiaries arising from large bodily injury claims (as defined for column C0110 above) not arising from annuities stemming from non- life reinsurance contracts.
C0310, R0110 to R0150	Historical cash out- flows - past benefits - health hazards : asbestos : mesothelioma	Report the historical cash out-flows for benefits or claim payments to policyholders or beneficiaries that arose from exposure to asbestos causing mesothelioma (but see instruction to C0340, R0110 to R0150 below).
C0310, R0210 to R0610	Best estimate claim provision (gross) -cash out-flows - Future benefits – health hazards : asbestos : mesothelioma	Report the amounts of expected payments to policyholders and beneficiaries arising from contracting of mesothelioma (but see instruction to C0340, R0110 to R0610 below).



CELL(S)	ITEM	INSTRUCTIONS
C0320, R0110 to R0150	Historical cash out- flows – past benefits - health hazards : asbestos : non- mesothelioma cancers	Report the historical cash out-flows for benefits or claim payments to policyholders or beneficiaries that arose from exposure to asbestos causing non-mesothelioma cancers (but see instruction to C0340, R0010 to R0150 below).
C0320, R0210 to R0610	Best Estimate claim provision (gross) - cash out-flows - Future benefits – health hazards : asbestos : non-mesothelioma cancers	Report the amounts of all expected payments to policyholders and beneficiaries arising from contracting of non-mesothelioma cancers attributable to exposure to asbestos (but see instruction to C0340, R0110 to R0610 below).
C0330, R0110 to R0150	Historical cash out- flows - past benefits - health hazards / asbestos / non- malignant	Report the historical cash out-flows for benefits or claim payments to policyholders that arose from exposure to asbestos causing non-malignant health conditions (but see instruction to C0340, R0010 to R0150 below).
C0330, R0210 to R0610	Best Estimate claim provision (gross) - Future benefits – health hazards : asbestos : non- malignant	Report the amounts of expected payments to policyholders and beneficiaries arising from contracting of non-malignant diseases attributable to exposure to asbestos (but see instruction to C0340, R0110 to R0610 below).
		Report the historical cash out-flows for benefits or claim payments to policyholders or beneficiaries that arose from exposure to asbestos and are not categorised by the firm as mesothelioma, non-mesothelioma cancers or non-malignant.
C0340, R0110 to R0150	Historical cash out- flows – past benefits - payments - health hazards : asbestos : not categorised	The below also applies to the instruction for (C0340, R0210 to R0610) Firms report their asbestos related payments to policyholders or beneficiaries split between the three asbestos categories above (mesothelioma, non-mesothelioma cancers and non-malignant) where possible. However, where firms cannot split their future payments between these categories, they should include all payments that cannot be allocated to any of these three categories column C0340 (the not-categorised column). As an example if the firm splits its asbestos payments into mesothelioma and other, it should report in the mesothelioma column
C0340, R0210 to R0610	Best Estimate claim provision (gross) - Future benefits - health hazards: asbestos: not	C0310 and the other in column C0340. Report the amounts of expected payments to policyholders and beneficiaries that are attributable to exposure to asbestos but have not been categorised by the firm as mesothelioma, non-mesothelioma cancers or non-malignant.



CELL(S)	ITEM	INSTRUCTIONS
	categorised	
C0350, R0110 to R0150	Historical cash out- flows – past benefits - health hazards : asbestos : ALL	Column C0350 is derived as C0350 = C0310 + C0320 + C0330 +C0340
C0350, R0210 to R0610	Best Estimate claim provision (gross) - Future benefits - health hazards: asbestos: ALL	Column C0350 is derived as C0350 = C0310 + C0320 + C0330 +C0340
C0360, R0110 to R0150	Historical cash out- flows – past benefits - health hazards : deafness	Report the historical cash out-flows for benefits or claim payments to policyholders that arose from persons suffering from loss of or reduced hearing.
C0360, R0210 to R0610	Best estimate claims provision (gross) - cash out-flows - Future benefits health hazards : deafness	Report the amounts of expected payments to policyholders and beneficiaries arising from deafness (or reduced hearing).
C0370, R0110 to R0150	Historical cash out- flows - past benefits - health hazards : vibration	Report the historical cash out-flows for benefits or claim payments to policyholders that arose from painful or disabling condition of the fingers, hands or arms as a result of using vibrating tools (this condition is known as hand-arm vibration syndrome (HAVS) or vibration white finger (VWF)).
C0370, R0210 to R0610	Best estimate claims provision (gross) - cash out-flows - Future benefits - health hazards : vibration	Report the amounts of expected payments to policyholders and beneficiaries arising from painful or disabling condition of the fingers, hands or arms as a result of using vibrating tools (this condition is also known as hand-arm vibration syndrome (HAVS) or vibration white finger (VWF)).
C0380, R0110 to R0150	Historical cash out- flows – past benefits - health hazards : pollution	Report the historical cash out-flows for benefits or claim payments to policyholders that arose from damage caused by or exposure to pollution.
C0380, R0210 to R0610	Best estimate claims provision (gross) - cash out-flows - Future benefits - health hazards : pollution	Report the amounts of expected payments to policyholders and beneficiaries arising from damage caused by or exposure to pollution.
C0390, R0110 to R0150	Historical cash out- flows – past benefits - health hazards : psychological	Report the historical cash out-flows for benefits or claim payments to policyholders that arose from mental harm. The below also applies to instruction for (C0390, R0210 to R0610)



CELL(S)	ITEM	INSTRUCTIONS
	conditions	An example of psychological injury is those suffered as a result of physical or sexual abuse.
		Payments relating to fear of future manifestation of physical harm (e.g. when a person has been exposed to hazardous substances but no disease has yet manifested in the person) are not included in this category – these payments are to be included within the relevant category (e.g. exposure to pollution should be included in the pollution category).
		Mental harm of stress would not normally be included in the psychological benefit type because stress claims typically exhibit a short lag between occurrence and notification. However, where the firm regards stress claims as latent claims in the management of its business, mental harm of stress should be included.
C0390, R0210 to R0610	Best estimate claims provision (gross) - cash out-flows - Future benefits – health hazards : psychological	Report the amounts of expected payments to policyholders and beneficiaries that arising from mental harm.
		Report the historical cash out-flows for benefits or claim payments to policyholders that arose from health hazard conditions attributable to exposure other than asbestos, noise, vibration, pollution, psychological.
C0400,	Historical cash out- flows – past benefits - health hazards : other	The below also applies to instruction for (C0400, R0210 to R0610)
R0110 to R0150		Examples of health hazards that might be included in column C0400 are exposure to: Blood Plasma (AIDS), Breast implants, Diethylstilboestrol (DES), Electromagnetic fields (EMF), Lead paint, Tobacco, Silica, Beryllium, and Agent Orange.
		In row R0033 list the main causes of the payments reported under this health hazard other claim type.
C0400, R0210 to R0610	Best estimate claims provision (gross) - Future benefits - health hazards : other	Report the amounts of expected payments to policyholders and beneficiaries arising from health hazard conditions attributable to exposure to substances other than asbestos, noise, vibration, pollution or psychological.
C0410, R0110 to R0150	Historical cash out- flows – past benefits -	Report the historical cash out-flows for benefits or claim payments to policyholders that arose from claims which the firm considers to be latent or highly long-tail claims and are not covered under the other categories specified for columns C0310 to C0400 above.
	other latent or very long tail claims	<i>The below also applies to instruction for (C0410, R0210 to R0610)</i> The distinction between 'other latent or very long tail claims' reported in column C0410 and 'health hazards / other' reported in column C0400
		is that: 'health hazards / other' is for health hazard related payments that



CELL(S)	ITEM	INSTRUCTIONS
		 do not belong to any of the claim types defined in this LOG, whereas 'other latent or very long tail claims' is for non-health hazard latent claim related payments. In row R0034 list the main causes of payments reported under this
		other latent or very long tail claims claim type.
C0410, R0210 to R0610	Best estimate claims provision (gross) - cash out-flows - Future benefits - other latent or very long tail claims	Report the amounts of expected payments to policyholders and beneficiaries that relate to claims which the firm considers to latent or highly long tail claims and are not covered under the other categories specified for columns C0310 to C0400 above.
		Column C0510 is to be reported only if category of business (row R0031) selected is Motor Vehicle Liability or UK Employers Liability .
C0510, R0210 to R0610	Best estimate claims provision (gross) - cash out-flows - Future benefits - other	 Report the amounts of expected payments to policyholders and beneficiaries that relate to claims which are not covered under the other categories specified for columns C0210 to C0410 i.e. claims that are not: latent or very long tail in the firm's view, or large bodily injury claims. In other words, "minor" personal injury claims below the large claim threshold.
C0610, R0210 to R0610	Best estimate claims provision (gross) - cash out –flows - Future benefits : TOTAL	Column C0610 is to be reported only if category of business (row R0031) is UK Employers Liability. Derived as: C0610 = C0210 + C0350 + C0360 +C0370 +C0380 +C0390 +C0400 +C0410 +C0510
		Report the amounts of expenses that will be incurred in servicing insurance and reinsurance obligations (see Article 78(1) of the Solvency II Directive) and other cash-flow items such as taxation payments which are charged to policyholders used in the calculation of claims provision.
C0710, R0210 to R0610	Best Estimate Claims Provision (gross) - cash out-flows - Future Expenses and other cash out-flows	 Where the category of business selected in row R0031 is UK Employers' Liability, the amounts should represent all cash out-flows: future expenses and other cash flows in the claims provision for this category. Where the category of business selected in row R0031 is other than UK Employers' Liability, the amounts should represent only those future expenses and other cash out-flows in the claims provision that are directly attributable to claims for which future benefits are reported in columns C0210 to C0510.



CELL(S)	ITEM	INSTRUCTIONS
C0810 to C0820	Best estimate claim provision (gross) – cash in-flows	
C0810, R0210 to R0610	Best Estimate Claims Provision – cash in- flows - Future Premiums	Column 0810 is only to be reported if the category of business selected (<u>Z0010row R0031</u>) is UK Employers' Liability . Report the amounts of all Future premiums stemming from existing policies, correspondent to Cash in-flows - Future premiums used in the calculation of Claims provisions.
C0820, R0210 to R0610	Best Estimate Claims Provision – cash in- flows – future other cash in-flows	Column 0820 is only to be reported if the category of business selected in <u>Z0010</u> row R0031 is UK Employers' Liability . Report the amount of recoverables from salvages and subrogations (cash-in flows) not including investment returns, used in the calculation of Claims provisions.

1. Motor vehicle liability

In the instructions (near the bottom on page 3) category of business (a) is 'motor vehicle liability'. On the template at item Z0310 the first option available for selection is "Motor Third party Bodily Injury" and columns C0110 to C0140 and C0510 are referred as relating to "Motor TPBI". When submitting NS.10, "Motor Third party Bodily Injury" and "Motor TPBI" should be taken to mean Motor vehicle liability. (Where motor vehicle liability is lines of business 4 and 16 and that part of 26 that relates to 4, as defined in the Delegated Act Annex 1:"Lines of Business".) For avoidance of doubt when the template is completed for category of business Motor vehicle liability, the column 'Future benefits : other' (C0510) might include third party damage claims.

2. Large bodily injury claims

The definition of large bodily injury claims (set out under item C0110 in the instructions) excludes annuities stemming from non-life contracts (i.e. excludes settled PPO claims). [The cash flows from annuities stemming from non-life are reported on Solvency II reporting template S.13.01 and at column C0210 on this template, therefore they are not needed in column C0220.]

3. Annuities stemming from non-life reinsurance contracts (column C0210)

This column only applies to insurance and reinsurance undertakings engaged in both life and non–life insurance activity. (Undertakings engaged in only non-life (re)insurance activity will report cash-flows relating to annuities stemming from non-life reinsurance contracts on template S.13.01 and so are not asked to report the same information on this template.)