Chapter 10

Instructions regarding reporting templates

IR.19.01.01 — Non-life insurance claims

General comments

This section relates to annual submission of information for individual entities and third-country insurance undertakings in regard to branch operations.

Claims development triangles show the insurer's estimate of the cost of claims (claims paid and claims provisions calculated in accordance with PRA Rulebook principles) and how this estimate develops over time.

Three set of triangles are required regarding claims paid, undiscounted best estimate of claims provisions and RBNS claims.

For the purpose of this template 'allocated loss adjustment expenses (ALAE)' means: the costs of processing and resolving claims that could be assignable to individual claim (eg legal and adjuster's fees).

This template shall be reported for each line of business, as defined in Technical Provisions – Further Requirements Annex 1, and material considering the following specifications:

- i. Reporting for all lines of business in total.
- ii. Reporting by line of business: it is required to report lines of business 1–12 (as reported in IR.17.01) for both direct and accepted proportional reinsurance (to be reported together) and lines of business 25–28 for accepted non–proportional reinsurance. Firms shall report each line of business, or only the lines of business that represent a coverage of 90% of the gross undiscounted Claims Provisions. In the cases where a firm is reporting a coverage of 90%, the lines of business should be selected as follows:
 - a) Lines of business 4 and 16 (Motor vehicle liability insurance direct and accepted proportional reinsurance combined) must be reported;
 - b) Lines of business 8 and 20 (General liability insurance direct and accepted proportional reinsurance combined) must be reported;
 - c) Line of business 26 (Non-proportional casualty reinsurance) must be reported,
 - d) For all other lines of business (direct and accepted proportional reinsurance combined), using a decreasing order of gross undiscounted Claims Provision until all lines of business reported represents 90% coverage of the firm's gross total undiscounted claims provisions;
- iii. If the total gross best estimate for a non–life line of business reported according to (ii) above represents more than 10% of the firm's total gross undiscounted best estimate of the claims provision the information for that line of business shall be reported with the following split by currencies in addition to the total for the line of business:
 - a) Amounts for any currency that represents more than 25% of the gross undiscounted best estimate of the claims provisions from that non-life line of business; or
 - b) Amounts for any currency that represents less than 25% of the gross undiscounted best estimate of the claims provisions from that non–life line of

business but more than 5% of total gross undiscounted best estimate of the claims provisions.

- iv. If the total gross undiscounted best estimate for a reported non–life line of business represents less than 10% of the total gross undiscounted best estimate of the claims provision no currency split is required, only the total for the line of business shall be reported.
- v. The information by currency shall be reported in the original currency of the contracts unless otherwise specified.

For the purpose of calculating whether a line of business or a currency within a line of business meets the above materiality thresholds for reporting, any negative gross undiscounted claims provisions at the level of the line of business or currencies within a line of business shall be considered with absolute value when calculating the firm's gross total undiscounted claims provisions and when calculating the undiscounted claims provisions for each line of business and for each currency within a line of business.

Firms are required to report data on an accident year or underwriting year basis according to how the business is managed. Firms must report each line of business (and where applicable each currency within a line of business) by accident year or each line of business (and where applicable each currency within a line of business) by underwriting year. Firms are not to report some lines of business by accident year and some by underwriting year.

Historical data are required for claims paid and RBNS claims. For undiscounted Best Estimate of Claims Provision, historical data starting from the firm's first reporting reference date on or after 31 December 2024 are required. This means for undiscounted Best Estimate of Claims Provision the diagonals relating to periods before the firm's first reporting reference data on or after 31 December 2024 are not required. Claims paid and RBNS relating to historical data should include 'allocated loss adjustment expenses'.

For the purpose of this template, 'the period being reported' in the Reporting Part of the Rulebook – Chapter 2A – Article 3(4)(b) means the reporting period ending on the reporting reference date.

All or part of an obligation moves from IR.19.01 into IR.16.01, when both of the conditions below are met:

- i. All or part of the obligation has been formally settled as an annuity; and
- ii. A best estimate of an obligation formally settled as an annuity can be established using life techniques.

Formally settled as an annuity typically means that a legal process has ordered that the beneficiary is to receive payments as an annuity.

In the financial year in which all or part of an obligation has been formally settled as an annuity, only claims actually paid out to the policyholder/beneficiary before the obligation has been formally settled as an annuity are to be included in the claims paid in IR.19.01. In particular, firms are to not include the provision set up for the annuity (which is reported in IR.16.01) in the claims paid in IR.19.01

In the case of a firm accepting business via a transfer-in of a portfolio from the first reporting date after the transfer the firm is required to submit data on this template as if it had always carried on the business transferred-in (ie historical data is to be restated). In the case of a

firm discharging obligations via a transfer-out of a portfolio from the first reporting date after the transfer the firm is required to submit data on this template as if it never had the business transferred-out (ie historical business is to be re-stated). Historical premium data relating to business transfers is to be re-stated on a best endeavours basis.

	ITEM	INSTRUCTIONS
Z0010	Line of Business	Identification of the line of business, as defined in Technical Provisions – Further Requirements Annex 1, reported. The following closed list shall be used: 1 — 1 and 13 Medical expense insurance 2 — 2 and 14 Income protection insurance 3 — 3 and 15 Workers' compensation insurance 4 — 4 and 16 Motor vehicle liability insurance 5 — 5 and 17 Other motor insurance 6 — 6 and 18 Marine, aviation and transport insurance 7 — 7 and 19 Fire and other damage to property insurance 8 — 8 and 20 General liability insurance 9 — 9 and 21 Credit and suretyship insurance 10 — 10 and 22 Legal expenses insurance 11 — 11 and 23 Assistance insurance 12 — 12 and 24 Miscellaneous financial loss insurance 25 — Non-proportional health reinsurance 26 — Non-proportional casualty reinsurance 27 — Non-proportional marine, aviation and transport reinsurance 28 — Non-proportional property reinsurance
Z0020	Accident year or Underwriting year	Report the standard used by the undertakings for reporting of claims development. One of the options from the following closed list shall be used: 1 — Accident year 2 — Underwriting year A firm must use the standard (ie accident year or underwriting year) used for the public disclosure template S.19.01.21 for all of its lines of business and currencies, ie it must not use accident year for some lines of business and underwriting year for other lines of business. Accident year or underwriting year is not applicable for the inflation information in rows R0700 to R0760
Z0030	Currency	Identify the ISO 4217 alphabetic code of the currency in which the obligation is denominated.

	ITEM	INSTRUCTIONS
		This item shall be filled in with 'Total' when reporting the total for the line of business reported in Z0010.
		If Z0010 is '40 — Total all lines of business', the currency reported in this item in 'Total' (ie 'Total all lines of business is not split by currency')
Z0040	Currency conversion	Identify if the information reported by currency is being reported in the original currency (default) or in the reporting currency (otherwise specified). The following close list shall be used: 1 — Original currency 2 — Reporting currency Only applicable when reporting by currency.
C0010 to C0160/ R0100 to R0250	Gross Claims Paid (non–cumulative) – Triangle	The Gross Claims Paid, net of salvage and subrogation, in a triangle showing the developments of the gross claims payment already made: for each of the accident/underwriting years from N–14 (and prior) and all previous reporting periods to — including — N (last reporting year) report the payments already made corresponding at each development year (which is the delay between the accident/underwriting date and the payment date). The data are non–cumulative and undiscounted. The amounts include all the elements that
		compose the claim itself, include 'allocated loss adjustment expense', but exclude all other expenses.
C0170/ R0100 to R0260	Gross Claims Paid (non–cumulative) — In current year	Total 'Current year' reflects the last diagonal (all data referred to last reporting year) from R0100 to R0250. R0260 is the total of R0100 to R0250.
C0180/ R0100 to R0260	Gross Claims Paid — Sum of years (cumulative)	Total 'Sum of all years' contains the sum of all data in rows (sum of all payments referred to the accident/underwriting year), including total.
C0200 to C0350/ R0100 to R0250	Gross undiscounted Best Estimate Claims Provisions — Triangle	Triangles of undiscounted best estimate of claims provisions, gross of reinsurance for each of the accident/underwriting years from N–14 (and prior) and all previous reporting periods to — including — N (last reporting year). The best estimate for claims provision relates to claims events occurred

	ITEM	INSTRUCTIONS
		before or at the valuation date, whether the claims arising from these events have been reported or not.
		The data are undiscounted. The amounts include all the elements that compose the claim itself, are net of salvage and subrogation, include 'allocated loss adjustment expenses', exclude all other expenses, and exclude any future premiums.
		The gross undiscounted best estimate claims provision for each accident/underwriting year (N-14 to N) and for each development year d (0<= d <= 14) is to be the gross undiscounted best estimate claims provision at the end of development year d for that accident/underwriting year. The gross undiscounted claims provision for development '15 & +' is to the gross undiscounted claim provision at the reporting reference date for all accident/underwriting years prior to N-14.
C0360/ R0100 to R0260	Gross Best Estimate Claims Provisions — Year end	Total 'Year end' reflects the last diagonal but on a discounted basis (all data referred to last reporting year) from R0100 to R0250.
C0400 to C0550/ R0100 to R0250	(discounted data) Gross Reported but not Settled Claims (RBNS) — Triangle	R0260 is the total of R0100 to R0250. Triangles for each of the accident/underwriting years from N–14 (and prior) and all previous reporting periods to — including — N (last reporting year) of provisions in respect of claim events that have happened and been reported to the insurer, but have not yet been settled, excluding incurred but not reported claims ('IBNR'). These may be case—by—case reserves estimated by claim handlers and do not need to be on a best estimate Solvency II basis. The reported but not settled claims ('RBNS') shall be measured using consistent reserve strength over time.
		The data are undiscounted. The amounts include all the elements that compose the claim itself, are net of salvage and subrogation, include 'allocated loss adjustment expenses', exclude all other expenses and exclude any future premiums. The gross RBNS for each accident/underwriting year (N to N-14) and for each development year d

	ITEM	INSTRUCTIONS
		(0<= d <= 14) is to be the gross RBNS at the end of development year d for that accident/underwriting year. The gross RBNS for development '15 & +' is to the gross RBNS at the reporting reference date for all accident/underwriting years prior to N-14.
C0560/ R0100 to R0260	Gross Reported but not Settled Claims (RBNS) — Year end	Total 'Year end' reflects the last diagonal (all data referred to last reporting year) from R0100 to R0250. R0260 is the total of R0100 to R0250.
C0570 / R0110 to R0250	Gross Earned Premium – up to and including the reporting reference date	When the currency reported in Z0030 is 'Total', historical Gross Earned Premiums are required for each accident / underwriting year (N-14 to N inclusive) starting from the accident / underwriting year that is the later of: N-14; or When Solvency II first applied to the firm (this
		will typically be: 2016 for individual entities and third country branches of non-Solvency II undertakings; and 2023 for third country branches of Solvency II undertakings). When the currency reported in Z0030 is other than 'Total', historical Gross Earned Premiums are required for each origin year starting from the
		origin year ending on the firm's first reporting reference date on or after 31 December 2024 (subject to the earliest origin year being N-14).
		The gross earned premium as at the reporting reference date for each of the accident/underwriting years from N–14 to and including N.
		In the case of accident year reporting (ie that reported in Z0020 is 'accident year'), gross premiums earned in respect of an accident year are the proportion of gross premiums written as is attributable to risks borne by the insurer during that accident year.
		In the case of underwriting year reporting (ie that reported in Z0020 is 'underwriting year'), gross premiums earned in respect of an underwriting year are the proportion of gross premiums written attributable to that underwriting year that have been earned by the reporting reference date.

	ITEM	INSTRUCTIONS
		The amount includes any commission or acquisition costs deducted before the insurer receives the premium.
C0580 / R0110 to R0250	Estimate of future gross earned premium at the reporting reference date	This is reported only in the case that the standard used by the undertakings for reporting of claims development (ie that reported in Z0020) is 'underwriting year'. Firms are to report the estimate of future gross earned premium from the reporting reference date for each of the underwriting years for which a Gross Earned Premium is reported in C0570.
C1200 to C1350/ R0500 to R0650	Net Claims Paid (non-cumulative) — Triangle	Triangles for each of the accident/underwriting years from N–14 (and prior) and all previous reporting periods to — including — N (last reporting year) of claims paid net of salvage/subrogation and reinsurance. The data are undiscounted. The amounts include all the elements that compose the claim itself, include 'allocated loss adjustment expenses', but exclude all other expenses.
C1360/ R0500 to R0660	Net Claims Paid (non–cumulative) — In current year	Total 'Current year' reflects the last diagonal (all data referred to last reporting year), from R0500 to R0650. R0660 is the total of R0500 to R0650
C1370/ R0500 to R0660	Net Claims Paid — Sum of years (cumulative)	Total 'Sum of years' contains the sum of all data in rows (sum of all payments referred to the accident/underwriting year), including total.
C1400 to C1550/ R0500 to R0650	Net Undiscounted Best Estimate Claims Provisions — Triangle	Triangles for each of the accident/underwriting years from N–14 (and prior) and all previous reporting periods to — including — N (last reporting year) of Best Estimate of Claims Provisions, net of reinsurance.
		The data are undiscounted. The amounts include all the elements that compose the claim itself, are net of salvage and subrogation, include 'allocated loss adjustment expenses', exclude all other expenses, and exclude any future premiums.
		The net undiscounted best estimate claims provision for each accident / underwriting year (N to N-14) and for each development year d (0<= d <= 14) is to be the net of reinsurance undiscounted best estimate claims provision at

	ITEM	INSTRUCTIONS
		the end of development year d for that accident / underwriting. The net undiscounted claims provision for development '15 & +' is to the net of reinsurance undiscounted claim provision at the reporting reference date for all accident / underwriting years prior to N-14.
C1600 to C1750/ R0500 to R0650	Net RBNS Claims — Triangle	Triangles for each of the accident/underwriting years from N–14 (and prior) and all previous reporting periods to — including — N (last reporting year) of Claims Outstanding net of salvage/subrogation and reinsurance.
		The data are undiscounted. The amounts include all the elements that compose the claim itself, are net of salvage and subrogation, include 'allocated loss adjustment expenses', exclude all other expenses and exclude any future premiums.
		The net RBNS for each accident/underwriting year (N to N-14) and for each development year d (0<= d <= 14) is to be the net of reinsurance RBNS at the end of development year d for that accident/underwriting year. The net RBNS for development '15 & +' is to the net of reinsurance RBNS at the reporting reference date for all accident/underwriting years prior to N-14.
C1760/ R0500 to R0660	Net RBNS Claims — Year end	Total 'Year end' reflects the last diagonal (all data referred to last reporting year) from R0500 to R0650. R0660 is the total of R0500 to R0650.
	Net Earned	When the currency reported in Z0030 is 'Total', historical Net Earned Premiums are required for each accident / underwriting year (N to N-14) starting from the accident / underwriting year that is the later of:
C1770 / R0510 to R0650	Premium – up to and including the reporting reference date	 N-14; or When Solvency II first applied to the firm (this will typically be: 2016 for individual entities and third country branches of non-Solvency II undertakings; and 2023 for third country branches of Solvency II undertakings).
		When the currency reported in Z0030 is other than 'Total', historical Net Earned Premiums are required for each origin year starting from the origin year ending on the firm's first reporting

	ITEM	INSTRUCTIONS
		reference date on or after 31 December 2024 (subject to the earliest origin year being N-14). The net earned premium at the reporting reference date for each of the accident/underwriting years from N-14 to and including N.
		In the case of accident year reporting (ie that reported in Z0020 is 'accident year'):
		 gross premiums earned in respect of an accident year are the proportion of gross premiums written as is attributable to risks borne by the insurer during that accident year; and the reinsurers' share of premiums earned should be attributed to the same accident years as the corresponding gross premiums earned, so as to calculate the net earned premiums for each accident year. In the case of underwriting year reporting (ie that reported in Z0020 is 'underwriting year'), net
		premiums earned in respect of an underwriting year are the proportion of net premiums written attributable to that underwriting year that have been earned by the reporting reference date.
		The amount includes any commission or acquisition costs deducted before the insurer receives the premium.
C1780 / R0510 to R0650	Estimate of future net earned premium at the reporting reference date	This is reported only in the case that the standard used by the undertakings for reporting of claims development (ie that reported in Z0020) is 'underwriting year'.
		Firms are to report the estimate of future net earned premium from the reporting reference date for each of the underwriting for which a Net Earned Premium is reported in C01770.
Inflation rates (only in the case of using methods that take into account inflation to adjust data)		
C1800 to C1940/ R0700	Historic inflation rate — total	In the case of use of run–off techniques that explicitly take into account inflation in order to

	ITEM	INSTRUCTIONS
		adjust data report by year, and for the 15 years, historic inflation rate used to adjust historical paid losses triangles.
C1800 to C1940/ R0710	Historic inflation rate — external inflation	In the case of use of run–off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, historic external inflation: which is the 'economic' or 'general' inflation, i.e. the increase of the price of goods and services in a specific economy (eg Consumer Price Index, Producer Price Index, etc).
C1800 to C1940/ R0720	Historic inflation rate — endogenous inflation	In the case of use of run–off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, historic endogenous inflation: which is an increase of claim costs specific of the line of business, as defined in Technical Provisions – Further Requirements Annex 1, under consideration.
C2000 to C2140/ R0730	Expected inflation rate — total	In the case of use of run–off techniques that explicitly take into account inflation in order to adjust data report by year, and for the 15 years, expected inflation rate used to adjust historical paid losses triangles.
C2000 to C2140/ R0740	Expected inflation rate — external inflation	In the case of use of run–off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, expected external inflation: which is the 'economic' or 'general' inflation, i.e. the increase of the price of goods and services in a specific economy (eg Consumer Price Index, Producer Price Index, etc.).
C2000 to C2140/ R0750	Expected inflation rate — endogenous inflation	In the case of use of run–off techniques that explicitly take into account inflation in order to adjust data report, by year, and for the 15 years, expected endogenous inflation: which is an increase of claim costs specific of the line of business, as defined in Technical Provisions – Further Requirements - Annex 1, under consideration.
C2200/ R0760	Description of inflation rate used	In the case of use of run-off techniques that explicitly take into account inflation in order to adjust data report narrative description of inflation rate used.