S.16.01 – Information on annuities stemming from Non–Life Insurance obligations

General comments:

This section relates to annual submission of information for individual undertakings.

This template shall be reported only for annuities formally settled stemming from non–life contracts and relating to health insurance obligations and relating to insurance obligations other than health insurance obligations.

Undertakings are required to report data on an accident year or underwriting year basis, in accordance with any requirements of the National Supervisory Authority. If the National Supervisory Authority has not stipulated which to use then the undertaking may use accident or underwriting year according to how they manage each line of business, as defined in Annex I to Delegated Regulation (EU) 2015/35, provided that they use the same year consistently, year on year.

This template shall be reported by non–life line of business, as defined in Annex I to Delegated Regulation (EU) 2015/35, originating the annuity and by currency, considering the following specifications:

- i. If the best estimate for the annuity claims provisions on a discounted basis from one non-life line of business represents more than 3% of the total best estimate for all annuity claims provisions the information shall be reported with the following split by currencies in addition to the total for the line of business:
 - a) Amounts for the reporting currency;
 - b) Amounts for any currency that represents more than 25% of the best estimate for the annuity claims provisions on a discounted basis from that non–life line of business; or
 - c) Amounts for any currency that represents less than 25% of the best estimate for the annuity claims provisions (discounted basis) from that non-life line of business but more than 5% of total best estimate for all annuity claims provisions.
- ii. If the best estimate for the annuity claims provisions on a discounted basis from one non-life line of business represents less than 3% of the total best estimate for all annuity claims provisions no currency split is required, only the total for the line of business shall be reported;
- iii. The information shall be reported in the original currency of the contracts unless otherwise specified.

This template is interlinked with the non–Life template S.19.01. The sum of technical provisions in templates S.16.01 and S.19.01 for one non–life line of business, as defined in Annex I to Delegated Regulation (EU) 2015/35, represents the total claims best estimate originating from this line of business (also refer log to template S.19.01). All or part of an obligation moves from S.19.01 into S.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 event that after an obligation has been formally settled as an annuity some of that obligation subsequently ends up being settled via a lump sum payment that was not in the original annuity payment order, that lump sum would be recorded as a payment in template S.16.01; i.e. there is no movement of claims data out of template S.16.01 and into S.19.01.

Year N is the reporting year.

ITEM

INSTRUCTIONS

The related non–life line of business	Name of the line of business, as defined in Annex I to Delegated Regulation (EU) 2015/35. The origin of the liability (medical expense, income protection, workers' comp, motor liability etc.). All the figures in the template are stemming from the related line of business.
	The following close list shall be used:
	1 – Medical expense insurance
	2 –Income protection insurance
	3 – Workers' compensation insurance
	4 – Motor vehicle liability insurance
	5 – Other motor insurance
	6 – Marine, aviation and transport insurance
	7 – Fire and other damage to property insurance
	8 – General liability insurance
	9 – Credit and suretyship insurance
	10 – Legal expenses insurance
\/FI	11 – Assistance 12 – Miscellaneous financial loss
Underwriting year	Report the standard used by the undertakings for reporting of claims development.
	The following close list shall be used:
	1 – Accident year
	2 – Underwriting year
Currency	Identify the ISO 4217 alphabetic code of the settlement currency of the obligation. All amounts, not reported by currency, are reported in the undertaking's reporting currency.
	Accident year / Underwriting year

		This item shall be filled in with "Total" when reporting the total for the line of business, as defined in Annex I to Delegated Regulation (EU) 2015/35.
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.

Information on year N:

C0010/R0010	The average interest	The average interest rate used in percentage (as a decimal) for
	rate	the end of year N
C0010/R0020	The average duration	Average duration in years on total obligations basis for the
	of the obligations	end of the year N
C0010/R0030	The weighted	The weight shall be the Best Estimate for annuity claims
	average age of the	provisions at the end of year N. Age of beneficiaries
	beneficiaries	calculated on a weighted average for total obligations.
		The beneficiary is the person to whom the payments are
		reverting to, following the occurrence of a claim (that affects
		the insured person) which originates this type of payment.
		Information should be considered gross of reinsurance.

Annuities information:

C0020/R0040-R0190	Undiscounted annuity claims provisions at the start of year N	Amount of annuity claims best estimate stemming from Non–Life Insurance obligations at beginning of year N.
C0030/R0040-R0190	Undiscounted annuity claims provisions set up during year N	Total amount of annuity claims provisions stemming from Non–Life Insurance obligations set up during year N as at the moment they were first set up (i.e., where assumptions used were for the first time based on life techniques) This is a part of technical provisions set up during year N (Net movements between new reserves during year N/release of reserves during year N)

C0040/R0040-R0190	Annuity payments paid during year N	Total amount of annuity payments stemming from Non–Life Insurance obligations made during the calendar year N.
C0050/R0040–R0190	Undiscounted annuity claims provisions at the end of year N	Total amount of annuity claims provisions stemming from Non–Life Insurance obligations at end of year N.
C0060/R0040-R0190	Number of annuities obligations at the end of year N	Number of non–life insurance annuity obligations.
C0070/R0040-R0190	Best Estimate for annuity claims provisions at the end of year N (discounted basis)	Best estimate covering annuities stemming from Non–Life Insurance obligations at the end of calendar year N. Information should be considered gross of reinsurance.
C0080/R0040-R0190	Undiscounted development result	Undiscounted development result calculated as the undiscounted annuity claims provisions at the start of year N, minus annuity payments paid during year N and minus undiscounted annuity claims provisions at the end of year N.
C0020–C0080/R0200	Total	Total amount of the undiscounted development result for all accident/underwriting years.

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