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No. A-06/04

Property & Casualty

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Auto insurance companies' claimant satisfaction survey for 2004

To the attention of all insurance companies licensed to

transact automobile insurance in Ontario

With this bulletin, the Financial Services Commission of Ontario (FSCO) is releasing its seventh annual Claimant Satisfaction Survey requirements for property and casualty insurance companies that write Ontario private passenger automobile insurance business.

Insurers are required to file the tabulated results of the survey with FSCO by **May 14, 2004**.

FSCO reviews and analyses all surveys to ensure that the data submitted complies with all the requirements set out in the Guidelines for Ontario Auto Insurance Claimant Satisfaction Research (Guidelines). Companies that fail to comply with the Guidelines will have to resubmit their results.

A common problem which has led to companies having to re-file their results is the failure of some research firms to maximize their interview attempts. Maximizing interview attempts is necessary to ensure a reasonable and credible sample of claimants. To make certain that companies and their market research firms are more efficient in this

crucial step in the survey process, we have added new guidelines. See "Sample Selection" in the Guidelines.

Another problem has been that individuals with more than one claim were contacted more than once by the market research firm. To minimize the chances of a claimant being called more than once, new procedures have been added. See "Sample Size: Claims Closed Register".

Attached to this bulletin are the Guidelines and a set of questions and answers (Q's and A's) to assist you in undertaking the survey. Please ensure that your market research firm is aware of the Guidelines. This will reduce the need for firms to re-file their results and will ensure that FSCO can compile and release the survey results in a timely manner.

To ensure consistency in the data collected, companies are also reminded that they must retain a marketing research organization that is a member of the Canadian Association of Marketing Research Organizations (CAMRO).

In keeping with last year's approach, a survey of Facility Association (FA) claims will be conducted centrally and reported as a single result. Details for handling closed FA claims will be sent to FA servicing carriers.

Companies with less than \$10 million in direct written premiums for Ontario private passenger automobile insurance, or with fewer than 300 closed claims in 2003, are not required to undertake the survey. Insurers must notify FSCO in writing if they qualify for an exemption from conducting the survey.

If you need additional information or if your company qualifies for an exemption from conducting the 2004 Claimant Satisfaction Survey, please contact: Jim Fox, Senior Advisor, Office of the Insurance Ombudsman, FSCO, at: (416) 590-7277; fax: (416) 590-8480; or via email: jfox@fSCO.gov.on.ca

Bryan P. Davies

Chief Executive Officer and Superintendent of Financial Services

March 23, 2004

Attachments (PDF):

1. [Guidelines for Ontario Auto Insurance Claimant Satisfaction Research for 2004](#)
2. [Questions and Answers on Claimant Satisfaction Survey](#)



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Guidelines for Ontario Auto Insurance Claimant Satisfaction Research for 2004

Attachment to FSCO Bulletin No. A- 06/04

March 2004

Table of Contents

I.	Introduction	1
II.	Data Collection	2
A.	Data Collection Method	2
B.	Quality Control	2
C.	Response Rates	2
III.	Sampling	3
A.	Sample Size	3
B.	Sample Selection	4
C.	Maximizing Interview Attempts	5
D.	Insurers Selling Through Brokers	5
E.	Timing	5
IV.	Reporting	6
V.	The Questionnaire	7
	Appendices	8
A.	The Survey Instrument	8
B.	The Canadian Association of Marketing Research Organizations	11

I. Introduction

These claimant satisfaction research guidelines were developed by a market research consultant commissioned by the Financial Services Commission of Ontario (FSCO). The guidelines encompass the entire claimant satisfaction research process including sampling, questionnaire design and interviewing. They have been created to ensure that every participating firm follows identical procedures when collecting data on claimant satisfaction, and to ensure that the data which is collected is of the highest quality. In doing so, the results for each firm can be interpreted and compared with confidence.

The survey is to be conducted by each insurance company on an annual basis, with results due to FSCO each year. The sample is to be based upon claims that have been closed in the previous calendar year.

Companies with less than \$10 million in direct written premiums for Ontario private passenger automobile insurance, or with fewer than 300 closed claims in 2003, are not required to undertake the survey. These guidelines are also to be used for Facility Association (FA) closed claims. FA servicing carriers are to separate FA closed claims from their regular closed claims. The Claimant Satisfaction Survey for FA clients will be conducted and reported centrally. Specific instructions will be provided to FA carriers.

FSCO also produces a companion document that is intended to be used along with these guidelines.

II. Data Collection

A. Data Collection Method

All companies must collect their data using a telephone survey methodology.

B. Quality Control

To ensure that quality control standards are followed, only research firms that are current members of the Canadian Association of Marketing Research Organizations (CAMRO) can be employed for this project. Appendix B of this package provides further details about CAMRO.

In addition, the satisfaction surveys must be registered with the Canadian Survey Research Council (CSRC), a body established by the survey research industry to provide survey respondents with a way of verifying the validity of a survey. If respondents want to verify that the survey they have conducted, or are considering conducting, originates from an actual research company, they can obtain an immediate answer through the CSRC's toll-free number, 1-800-554-9996.

C. Response Rates

Because response rates can influence the accuracy of survey results, studies must meet a minimum requirement. It is widely recognized in the research industry that high response rates have become difficult and expensive to achieve and that enforcing a high response rate can sometimes annoy respondents who simply do not wish to participate.

The minimum acceptable response rate is 25 per cent.

Response rates should be calculated using the PMRS recommended formula, which is:

$$\text{Response Rate} = \text{Cooperative Contacts} \div \text{Total Eligible Numbers}$$

III. Sampling

A. Sample Size

An important factor in choosing the number of respondents to interview is the number of closed claims each company has in their 2003 closed claims register. For companies which have 18,000 or more closed claims in their 2003 closed claims register, the minimum sample size for each company will be 800 closed claims, which will produce overall results which are accurate to within ± 3.5 per cent, 19 times out of 20.

Companies could seek greater assurance by opting for a larger sample size to reduce the margin for error.

For companies which have fewer than 18,000 closed claims in their 2003 closed claims register, a sample size must be selected which will produce a maximum margin of error of ± 3.5 per cent, 19 times out of 20.

When calculating the margin of error for a finite population, the Standard Error should be 1.

NOTE: The sample size must be selected by the market research organization, based on the company's total closed claims register as described below.

CLOSED CLAIMS REGISTER

For the purpose of the survey, the total 2003 closed register does not include zero payout claims, funeral expense or death benefit claims, claims where the insured now reads in the "Estate of" or Facility Association claims. Please also ensure that your closed claims register does not contain commercial vehicles claims. Each claim must appear on a separate line in the register. Therefore, if a person has more than one claim, they will be listed more than once, with a single claim type on each line. Duplicate names should be removed by the research firm after sample selection but prior to interviewing so that claimants are not called more than once.

The 2003 closed claims register is a list of the following four types of private passenger automobile insurance claims that have been closed in 2003:

- Statutory Accident Benefits Schedule (SABS) claims, excluding funeral expense or death benefit payments;
- collision and direct compensation-property damage (DC-PD) claims (combined);
- comprehensive claims (excluding glass claims); and
- glass claims.

In addition to the closed claims register, insurers must provide their research organization with a percentage summary showing a breakdown by these four types of claims in their closed claims register. This percentage summary must be generated by the insurance company and not the research firm. Market Research firms must ensure that the sample chosen for interviewing is representative of the closed claims register of a particular company.

Example of Percentage Summary

Kind of Claim	Number of Claims	Percentage
<i>SABS</i>	<i>2,000</i>	<i>20.0%</i>
<i>Collision & (DC-PD)</i>	<i>5,000</i>	<i>50.0%</i>
<i>Comprehensive</i>	<i>2,000</i>	<i>20.0%</i>
<i>Glass</i>	<i>1,000</i>	<i>10.0%</i>
<i>TOTAL:</i>	<i>10,000</i>	<i>100%</i>

The percentage summary is to be calculated excluding commercial claims, estates, zero payout claims, funeral and death benefit claims and FA claims. Please note that the counts in the percentage summary must be based on the number of **claims** and not the number of **claimants**.

B. Sample Selection

Market Research firms must interview from a random sample of claimants within each claim type. If the records selected are missing telephone numbers or include wrong / not-in-service numbers, firms are required to try to find the new numbers. In the event that the selected records are not sufficient to complete the required number of interviews, additional records must be randomly selected and bad / missing phone numbers looked up prior to conducting more interviews. This process must be repeated until the required number of interviews has been completed in each claim type or the closed claims register is exhausted.

C. Maximizing Interview Attempts

Market Research firms must make a minimum of five attempts when attempting to contact claimants. In cases where there is a wrong telephone number or the number is no longer in service, firms are required to try to find the new numbers and attempt the call again.

D. Insurers Selling Through Brokers

Insurers selling automobile insurance through independent brokers must inform the survey research firm so the clarifying statement in question 1 of the survey is made.

E. Timing

The survey is to be conducted by each company on an annual basis, with results delivered to FSCO by **May 14, 2004**.

IV. Reporting

After the data has been collected, **the survey research firm** is to submit the data to the Financial Services Commission of Ontario, attention: Jim Fox.

Research firms must submit each insurance company's results in a separate envelope and each company's data set on a separate diskette.

Each record in the data set must include:

- month and year of claim; and
- claim number.

The following information must be provided to FSCO:

- diskette with the name of the insurance company, name of research firm and contact clearly marked, containing the SPSS/PC+ data set;
- a printed code book;
- a printed percentage summary of the company's closed claims register, plus the actual number of interviews conducted by claim type and (if data are weighted) the weighted number of interviews by claim type;
- printed frequency responses with details of sample size and percentages (rounded to zero decimal places) besides each response category; and
- printed frequencies (or cross-tabulations) broken down by claim type, with details of sample size and percentages (rounded to zero decimal places) beside each response category.

The following information must be provided to FSCO if the required number of interviews cannot be completed for each claim type:

- a printed call report demonstrating that each number has been called at least 5 times; and
- written confirmation that missing, not-in-service, and wrong telephone numbers have been looked up and retried.

NOTE: FSCO will review and analyze all surveys to ensure that the data submitted comply with all of the requirements set out in the Guidelines for Ontario Auto Insurance Claimant Satisfaction Research. If surveys do not meet the criteria of the guidelines or have discrepancies in the data submitted, insurers may be required to re-file or re-survey, depending upon the severity of the discrepancy.

V. The Questionnaire

The survey instrument included in the Appendix A of this package has been thoroughly pre-tested to ensure that the questions are clear to respondents.

This exact questionnaire must be administered by all firms when measuring satisfaction among claimants.

NOTE: If firms decide to add additional questions to this survey, these must be placed at the end of the questionnaire to ensure that no bias is introduced into the satisfaction ratings.

Appendix A: The Survey Instrument

Good morning / afternoon / evening. May I please speak with **(claimant name)**.

(IF AVAILABLE - CONTINUE)

(IF NOT AVAILABLE - SCHEDULE APPOINTMENT TO CALL BACK)

(WHEN CLAIMANT ON LINE) Good morning / afternoon / evening. My name is **(_____)** and I am calling from **(research company's name)** on behalf of **(insurance company's name)**. We are conducting a very short survey of Ontarians who have recently made insurance claims. Would you mind if I asked you a few questions? All of your responses will be confidential.

(Note: If respondents have any questions or comments or would like to validate the legitimacy of this survey, please have them call the Canadian Survey Research Council, toll-free, at 1-800-554-9996, citing this project's registration #_____ and schedule an appointment to call them back)

(IF YES) Thank you.

(IF NO) When is a better time for me to call back? *(SCHEDULE THE APPOINTMENT)*.

1. First, were you primarily responsible for dealing with the insurance claim you made in **(month/year)** with **(insurance company name)**, or was that someone else in your household? *(IF SOMEONE ELSE)* Would it be possible for me to speak with that person? *(IF NOT AVAILABLE, SCHEDULE APPOINTMENT)*.

(MAKE THE FOLLOWING STATEMENT ONLY FOR COMPANIES THAT SELL THROUGH BROKERS) Please answer the following questions based on your claims experience with **(insurance company name)** and not your experience with your insurance broker who represents several different insurance companies.

2. How clearly do you remember the dealings you had with **(insurance company name)** which related to the insurance claim you made in **(month/year)**, even if your only dealing with the company was receiving a settlement? Do you remember it very clearly, clearly, not too clearly, or not at all?

Very clearly

Clearly

Not too clearly (*THANK THE PERSON AND TERMINATE INTERVIEW*).

Not at all (*THANK THE PERSON AND TERMINATE INTERVIEW*).

3. Thinking back to the insurance claim you made with **(insurance company name)** in **(month/year)**, would you say that you were very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied with the way **(insurance company name)** dealt with your claim?

Very satisfied

Somewhat satisfied

Somewhat dissatisfied

Very dissatisfied

Don't Know

4. Were you very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied with the time it took for the claim to be resolved, that is, from the time you first made the claim until the time it was closed?

Very satisfied

Somewhat satisfied

Somewhat dissatisfied

Very dissatisfied

Don't know

The following questions are about the service you received from the main person you dealt with during your claim. (*INTERVIEWERS: IF RESPONDENT DEALT WITH MORE THAN ONE PERSON, ASK THEM TO RATE ONLY THE PERSON THEY DEALT WITH THE MOST*) Were you very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied with the service you received from the main person you dealt with during your claim in terms of: (*ROTATE ORDER OF QUESTIONS 5-8*)

5. Their helpfulness? (*REPEAT RESPONSE SCALE AS REQUIRED*)

Very satisfied
Somewhat satisfied
Somewhat dissatisfied
Very dissatisfied
Don't know

6. Their level of knowledge and expertise? (*REPEAT RESPONSE SCALE AS REQUIRED*)

Very satisfied
Somewhat satisfied
Somewhat dissatisfied
Very dissatisfied
Don't know

7. The fairness with which they treated your claim? (*REPEAT RESPONSE SCALE AS REQUIRED*)

Very satisfied
Somewhat satisfied
Somewhat dissatisfied
Very dissatisfied
Don't know

8. The extent to which they kept you informed of the status of your claim while it was being processed? (*REPEAT RESPONSE SCALE AS REQUIRED*)

Very satisfied
Somewhat satisfied
Somewhat dissatisfied
Very dissatisfied
Don't know / Not applicable

We have come to the end of our survey. Thank you very much for your time.

Appendix B: The Canadian Association of Marketing Research Organizations (CAMRO) Fact Sheet

The Organization:

- Established in 1975.
- The voice of Canada's leading marketing research organizations and the source of information on the industry in Canada.
- Represents CAMRO members in their dealings with the public, governments, the media, educational and business communities.
- Maintains and improves research standards, rules of professional conduct and ethical practice.
- Develops and communicates the views of its members on critical public policy issues relating to marketing research and public opinion polls.
- Promotes marketing research as an important tool in the decision-making process of public organizations.
- Seven-member Board of Directors from a representative cross-section of the membership.

The Members:

- Incorporated, have been operating in Canada for a minimum of two consecutive years and have at least six full-time employees.
- Offer research, study and sample design, questionnaire preparation, interviewing, data processing, statistical analysis and report writing.
- Must meet the high standards of ethical and professional practice as determined by the Board of Directors.
- Independently audited and monitored on a regular basis to ensure that research practices of members are above reproach.
- Accountable to the public, companies and organizations they serve.

For more information about CAMRO and its members:

The Canadian Association of Marketing Research Organizations

2121 Argentia Road, Suite 404
Mississauga, Ontario
L5N 2X4

Tel: (905) 826-5437, Fax: (905) 826-4873, Web site: www.camro.org.



Questions and Answers on Claimant Satisfaction Survey

Attachment to FSCO Bulletin No. A - 06 / 04

March 2004

Questions and Answers on Claimant Satisfaction Survey

These Q's and A's have been prepared to help better understand the contents of FSCO Bulletin, No. A- 06/04.

Q1. What are private passenger automobile insurance claims?

A1. Private passenger automobile insurance claims are claims on risks that are underwritten as a private passenger type of use as defined under the *Insurance Bureau of Canada (IBC) Automobile Statistical Plan*. This means that claims on commercial, public automobile, garages, manufacturer and automobile dealer-type of uses are not to be reported.

Q2. Reference is made to a “closed claim” in the Guidelines for Ontario Auto Insurance Claimant Satisfaction Research. What does it mean?

A2. In the normal course of claims administration, files are kept open as long as there is a benefit entitlement that is claimable by the claimant. One such file is called an “open” or active file. However, when an insurer has paid out all the benefits to a claimant, and has carried out all the supporting activities relating to the benefit entitlement, the file is then viewed as a “closed claim” file.

Q3. The Guidelines for Ontario Auto Insurance Claimant Satisfaction Research apply to what types of claims?

A3. The claimant satisfaction research is to be conducted only among the following four types of private passenger automobile insurance claims: SABS, excluding funeral and death benefit; collision and direct compensation - property damage (DC-PD); comprehensive (excluding glass claims), and glass claims. Commercial vehicle claims, estates, FA claims, and claims where the pay-out is zero should not be included.

Q4. Should insurers who are Facility Association (FA) Servicing Carriers combine their regular and FA data when conducting the survey?

A4. No, FA servicing carriers should forward their FA closed claims register to the FA. The FA will contract with a market research to conduct the survey on behalf of the FA.

Q5. In situations where a company might have difficulty completing the required number of interviews, how should claims be handled where an individual has more than one type of closed claim related to the same date of loss?

A5. If the required number of interviews cannot be completed for each claim type, individuals who have more than one type of closed claim related to the same date of loss should be handled in the following manner. Individuals who have made a SABS claim and any other type of claim should be counted as SABS claimants. Individuals who have made a DC-PD / Collision claim, and one or more of a comprehensive claim and a glass claim, should be recorded as DC-PD / Collision claimants. Claimants who have more than one type of closed claim on the same date of loss must only be interviewed once.

Q6. How should insurers deal with zero pay-out closed claims, such as, where coverage did not exist, the amount of the damage was below the deductible or, where the claim was not allowed for other reasons?

A6. Closed claims with zero pay-out should be excluded from the closed claim register and company's calculations of the percentage summary of complaint type.

Q7. Why must the questions be asked in a specific order?

A7. FSCO consulted with a market research firm who recommended that this approach will ensure continuity from past surveys. In addition, Questions 5 to 8 in the survey instrument must be randomly rotated to ensure no emphasis is placed on any particular element of service being evaluated.

Q8. What would the market research organization we retain need from us to select the sample?

A8. To select an appropriate sample, all insurers must provide their research organization with a closed claims register, with each claim listed on a separate line. Therefore, if a person has more than one claim, they will be listed more than once, with a single claim type on each line. The register is a list of the four types of private passenger automobile insurance claim files that were closed in 2003, **regardless** of the policy year in which the policy was underwritten.

For example, for the survey in 2004, the closed claims register would be made up of the four types of closed claims pertaining to the period January 1, 2003 to December 31, 2003.

NOTE: Research organizations **must** ensure that the sample chosen is representative of the closed claims register of a particular company. For example, if a company's closed claims register is made up of 20 per cent SABS, 50 per cent collision and direct - compensation property damage (DC-PD), 20 per cent comprehensive and 10 per cent glass claims, then the sample chosen should have the same percentages of claims. Sample selection must be random within each claim type, and any missing or wrong phone numbers in the selected sample must be looked-up prior to interviewing. Insurers **must** provide their research organization with a percentage summary of their 2003 closed claims register to enable the research organization to choose a representative sample size.

Q9. Can survey results be weighted by market research organizations for those companies that cannot meet their kind of loss quotas, due to the small size of their closed claims register?

A9. Market research organizations who cannot meet their kind of loss quotas **because they cannot conduct any further interviews** due to a company's small claims register, must weight results by kind of loss to appropriately reflect a company's closed claims register.

NOTE: If the required number of interviews in each claim type cannot be completed from the initially selected records, more records must be selected until kind of loss quotas are met or no more sample is available. If, after these efforts, the required number of interviews still cannot be completed, a report must be generated and provided to FSCO on the outcome of call attempts, to show that every effort had been to complete the study. Market research companies must maximize the number of attempts they make to interview each claimant. Attempts must be made to locate correct telephone numbers and re-contact the claimants in those cases where claimants have moved, or where an incorrect number is listed. Research companies must provide written confirmation that all wrong numbers have been looked-up, and that each number has been called at least five times.

Q10. Are there special technical requirements that the market research firms require?

A10. Insurers should provide their market research firm with the IBC Claim Codes to help identify the claims types. The list of closed claim records sent to the supplier must contain a code or method for clearly identifying the four Claims Type categories.

Q11. Can insurers use market research organizations that are not members of CAMRO?

A11. No, insurers must retain only market research organizations that are members of CAMRO. Deloitte and Touche conducts regular audits of CAMRO members' research procedures to ensure that CAMRO standards are being met.

Q12. When are the survey results to be submitted to FSCO?

A12. The results are to be submitted to FSCO by **May 14, 2004**.