

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

**Underwriting & Claims**

1. Title	Understand insurance terminologies
2. Code	105458L1
3. Range	This unit of competency is applicable to those who are required to work in any functional areas of the insurance industry. It involves understanding the common terminologies and abbreviations used in the industry, as well as knowing the channels to find out the meanings of terminologies.
4. Level	1
5. Credit	1 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess basic insurance knowledge</p> <ul style="list-style-type: none"> <li>• Understand the concepts of insurance</li> <li>• Understand the significance to use appropriate terminologies in insurance operations</li> </ul> <p>6.2 Understand common terminologies, abbreviations and their meanings used in the industry</p> <ul style="list-style-type: none"> <li>• Understand common terminologies and their abbreviations used in the industry</li> <li>• Understand the conversion of the abbreviations to their English or Chinese full names and their meanings</li> <li>• Know about the channels to find out the proper meanings of terminologies and abbreviations</li> </ul> <p>6.3 Use the correct terminologies to support daily operations</p> <ul style="list-style-type: none"> <li>• Recall the correct terminologies and abbreviations in carrying out daily operations</li> <li>• Explain the meanings of the terminologies in insurance contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to understand common insurance terminologies, abbreviations and respective meanings</li> <li>• Able to use appropriate channels to find out the meanings of insurance terminologies</li> <li>• Able to use appropriate terminologies to support daily operations</li> <li>• Able to explain the meanings of the terminologies in insurance contexts.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers and brokers.

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**Underwriting**

Underwriting > Risk management	
1. Title	Maintain up-to-date underwriting records
2. Code	105465L2
3. Range	This unit of competency is applicable to those who are responsible for maintaining up-to-date underwriting records <b>for traditional and digital platforms</b> . It involves updating underwriting records from time to time and handling customer records in accordance with regulatory requirements.
4. Level	2
5. Credit	2 (for reference only)
6. Competency	<p><b><u>Performance Requirements</u></b></p> <p>6.1 Possess knowledge in managing underwriting records</p> <ul style="list-style-type: none"> <li>• Understand classification of information in underwriting operations</li> <li>• Comprehend company's risk classification policy</li> <li>• Comprehend features of company's products and target segments</li> <li>• Able to use company's underwriting management information system</li> <li>• Well aware of relevant compliance and regulatory requirements in handling customer records</li> </ul> <p>6.2 Maintain underwriting records <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• Keep up-to-date and accurate underwriting records in a timely manner</li> <li>• Handle customer data in accordance with the company procedures and requirements of regulatory bodies</li> <li>• Retrieve correct underwriting records upon requests</li> <li>• Produce specific underwriting statistics and reports to relevant units upon requests</li> <li>• <b>Ensure consistency of online underwriting records, policy record and the information in the internal system</b></li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to file underwriting records <b>for traditional and digital platforms</b> according to company procedures</li> <li>• Able to maintain up-to-date underwriting records <b>for traditional and digital platforms</b></li> <li>• Able to gather relevant underwriting records to produce statistics and reports upon requests.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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Underwriting > Underwriting	
1. Title	Process life insurance applications
2. Code	105668L3
3. Range	This unit of competency is applicable to those who are responsible for processing life insurance applications <b>from traditional and digital distribution platforms</b> It involves collection and submission of required information, liaison with underwriting personnel, and handling customer enquiries.
4. Level	3
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in life insurance underwriting process</p> <ul style="list-style-type: none"> <li>• Understand information required in underwriting of insurance application</li> <li>• Understand company's insurance products</li> <li>• <b>Know about</b> company procedures for insurance application processing and relevant compliance and regulatory requirements in handling customer enquiries</li> <li>• <b>Understand online and traditional underwriting processing</b></li> <li>• <b>Understand the business impacts of underwriting performance</b></li> </ul> <p>6.2 Process life insurance applications <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Collect application forms and ensure all information required are submitted with the application forms, including: <ul style="list-style-type: none"> <li>➢ Sum insured, particulars of beneficiary, the insured and the policyholders</li> <li>➢ Applicant's medical information</li> <li>➢ Agent's statement/report</li> </ul> </li> <li>• Liaise with insurance intermediaries or customers to request further information and documents if required</li> <li>• Explain underwriting process and standard terms in an insurance policy upon enquiries</li> <li>• <b>Analyse the information and claims record requested in underwriting of insurance application</b></li> <li>• Direct insurance applications to underwriting personnel</li> <li>• Process insurance applications in accordance with company procedures and relevant regulatory requirements</li> <li>• Handle customer records in accordance with the regulatory requirements</li> <li>• Consistently meeting the company process service standard</li> </ul> <p>6.3 Submit life insurance applications with sufficient information to underwriters</p> <ul style="list-style-type: none"> <li>• Carry out responsible steps in obtaining necessary documents according to company procedures</li> <li>• Submit insurance applications to underwriting personnel with the required information.</li> </ul>

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7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to determine whether sufficient information has been collected for insurance application processing from traditional and digital distribution platforms</li> <li>• Able to arrange collection of further information to process insurance applications on need basis</li> <li>• Able to carry out responsible steps in processing insurance applications in accordance with company procedures and regulatory requirements</li> <li>• Able to analyse the information and claims record requested in underwriting of insurance application</li> <li>• Able to submit insurance applications to underwriting personnel with sufficient information in a timely manner.</li> </ul>
8. Remarks	

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Underwriting > Underwriting	
1. Title	Prepare and issue insurance documents
2. Code	105483L3
3. Range	This unit of competency is applicable to those who are responsible for preparing and issuing insurance documents <b>for traditional and digital platforms</b> . It involves gathering relevant documents, validating information on the documents and obtaining approval to issue the documents.
4. Level	3
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in insurance application process</p> <ul style="list-style-type: none"> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend scopes of cover, exclusions and terms of individual policies</li> <li>• Comprehend company procedures on document issuance</li> <li>• <b>Know about the</b> full meaning of policy wordings, clauses and warranties, and their applications</li> <li>• <b>Understand electronic policy administration process</b></li> </ul> <p>6.2 Prepare and issue insurance documents <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• Prepare documents such as policies, endorsement, schedules, etc</li> <li>• Verify that all necessary details and correspondences, e.g. applicable limitations, exclusions and other terms are included</li> <li>• Obtain approval on documents issuance from authorized personnel</li> <li>• Issue documents to responsible personnel upon completion.</li> </ul> <p>6.3 Commit to prepare complete and error-free insurance documents</p> <ul style="list-style-type: none"> <li>• Produce necessary documents with validated information</li> <li>• Issue documents to responsible personnel in accordance with company procedures</li> <li>• <b>Verify policy information to be consistent with data input during online application.</b></li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to retrieve correct customer records <b>for traditional and digital platforms</b> for documents preparation</li> <li>• Able to consolidate all necessary correspondence for insurance documents issuance</li> <li>• Able to prepare complete set insurance documents</li> <li>• Able to issue insurance documents to responsible personnel according to company procedures.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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Underwriting > Underwriting	
1. Title	Approve life insurance applications involving standard risks
2. Code	105673L4
3. Range	This unit of competency is applicable to those who are responsible for carrying out life insurance underwriting <b>from traditional and digital distribution channels</b> . It involves assessment of standard risks in insurance in order to approve individual insurance applications.
4. Level	4
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in risk assessment for life insurance</p> <ul style="list-style-type: none"> <li>• Understand basic product features, benefits and exclusions</li> <li>• Aware of process improvement methodology</li> <li>• Demonstrate awareness to the concept of risks and the types of risks affecting the underwriting profiles</li> <li>• Demonstrate competency in underwriting guidelines through familiarizing of the underwriting guidelines, procedures and operating systems</li> <li>• Comprehend company's policy on risk classification</li> <li>• Comprehend company's risk limits</li> <li>• Comprehend company's underwriting criteria</li> <li>• Able to classify different types of risks</li> </ul> <p>6.2(a) Assess the risks for life insurance <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Apply corporate underwriting guidelines and procedures</li> <li>• Distinguish between standard and non-standard (i.e. complex) risks</li> <li>• Determine if the insured amounts are within the company's acceptable risk levels</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine if further information is needed for risk assessment</li> <li>• Arrange for further investigation/examination if needed</li> <li>• Determine if a particular risk is acceptable</li> <li>• Determine application outcomes: <ul style="list-style-type: none"> <li>➤ Approved (standard, substandard, or preferred)</li> <li>➤ Modified</li> <li>➤ Deferred</li> </ul> </li> <li>• Derive insurance premium for approved applications</li> <li>• Amend terms of insurance and develop counteroffers for modified applications</li> <li>• Pursue outstanding documents or correspondences in timely manner for deferred application</li> </ul> <p>6.2(b) Evaluate life insurance applications <b>from traditional and digital distribution channels</b> based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify that risk assessment results support approval of applications</li> <li>• Seek approval from higher authority when risk exceeds the limit of given authority</li> <li>• Arrange for reinsurance on need basis</li> <li>• Approve insurance applications</li> </ul>

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	<p>6.3 Approve life insurance applications based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Ensure all standard risks involved in the applications are assessed</li> <li>• Approve insurance applications with proper premiums.</li> </ul>
<p>7. Assessment Criteria</p>	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and assess all risks involved in insurance applications from traditional and digital distribution channels</li> <li>• Able to compute proper premiums</li> <li>• Able to arrange reinsurance on need basis</li> <li>• Able to approve insurance applications according to risk assessment results.</li> </ul>
<p>8. Remarks</p>	

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Underwriting > Underwriting	
1. Title	Assess life insurance applications involving standard risks
2. Code	105680L5
3. Range	This unit of competency is applicable to those who are responsible for carrying out life insurance underwriting. It involves assessment of standard risks in insurance applications <b>from traditional and digital distribution channels</b> in order to assess a particular insurance application.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in risk assessment for life insurance</p> <ul style="list-style-type: none"> <li>• Understand basic product features, benefits and exclusions</li> <li>• Aware of process improvement methodology</li> <li>• Demonstrate awareness to the concept of risks and the types of risks affecting the underwriting profiles</li> <li>• Demonstrate competency in underwriting guidelines through familiarizing the underwriting guidelines, procedures and operating systems</li> <li>• Comprehend company’s policy on risk classification</li> <li>• Comprehend company’s risk limit</li> <li>• Comprehend company’s underwriting criteria</li> <li>• Able to classify different types of risks</li> </ul> <p>6.2(a) Assess the risk for life insurance applications <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Apply corporate underwriting guidelines and procedures</li> <li>• Distinguish between standard and non-standard (i.e. complex) risks</li> <li>• Determine if the insured amount is within the company’s acceptable risk level</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine if further information is needed for risk assessment</li> <li>• Arrange for further investigation/examination if needed</li> <li>• Determine if a particular risk is acceptable</li> </ul> <p>6.2(b) Evaluate life insurance applications <b>from traditional and digital distribution channels</b> based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify that assessment results</li> <li>• Accept or decline insurance applications</li> <li>• Notify relevant personnel of assessment decisions</li> </ul> <p>6.3 Assess life insurance applications <b>from traditional and digital distribution channels</b> based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Assess all standard risks involved in the applications</li> </ul> <p>Assess insurance applications with supporting rationale</p> <ul style="list-style-type: none"> <li>• Produce prompt notification correspondences to relevant personnel.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and assess all risks involved in insurance applications <b>from traditional and digital distribution channels</b></li> </ul>



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	<ul style="list-style-type: none"><li>• Able to assess insurance applications according to risk assessment results.</li></ul>
8. Remarks	

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Underwriting > Underwriting	
1. Title	Approve life insurance applications involving non-standard risks
2. Code	105681L5
3. Range	This unit of competency is applicable to those who are responsible for carrying out life insurance underwriting <b>from traditional and digital distribution channels</b> . It involves assessment of non-standard risks (i.e. complex risks) in insurance applications so as to approve particular insurance applications.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in non-standard risk (i.e. complex risk) assessment for life insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s policy on risk classification</li> <li>• Comprehend company’s risk limit</li> <li>• Comprehend company’s underwriting criteria on complex risks</li> <li>• Able to classify different types of risks</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Know how to source domain specialists</li> </ul> <p>6.2(a) Assess non-standard risks for life insurance <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Apply company’s underwriting philosophy on non-standard risk assessment</li> <li>• Determine if insured amount is within the company’s acceptable risk level</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine the scope of specialist information required</li> <li>• Seek specialists’ advice on need basis</li> <li>• Determine one of the following application outcomes: <ul style="list-style-type: none"> <li>➤ Approved (standard, substandard, or preferred)</li> <li>➤ Modified</li> <li>➤ Deferred</li> </ul> </li> <li>• Derive insurance premium for approved applications</li> <li>• Amend terms of insurance and develop counteroffers for modified applications</li> <li>• Pursue outstanding documents or correspondences in timely manner for deferred applications</li> </ul> <p>6.2(b) Evaluate life insurance applications <b>from traditional and digital distribution channels</b> based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify that risk assessment results support approval of applications</li> <li>• Seek approval from higher authority when risk exceeds the limit of given authority</li> <li>• Arrange for <b>coinsurance or</b> reinsurance on need basis</li> <li>• Approve insurance applications</li> </ul> <p>6.3 Approve <b>traditional and online</b> life insurance applications based on risk assessment results</p>

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	<ul style="list-style-type: none"> <li>• Ensure all non-standard risks involved in the application are assessed</li> <li>• Approve insurance applications with proper premiums.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and assess all non-standard risks, as well as potential correlations amongst the risks, involved in insurance applications <b>from traditional and digital distribution channels</b></li> <li>• Able to source for specialists' advice to reveal potential risk exposures</li> <li>• Able to compute proper premiums</li> <li>• Able to arrange reinsurance on need basis</li> <li>• Able to approve insurance applications according to risk assessment results.</li> </ul>
8. Remarks	

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Underwriting > Underwriting	
1. Title	Decline life insurance applications involving non-standard risks
2. Code	105682L5
3. Range	This unit of competency is applicable to those who are responsible for carrying out insurance underwriting. It involves assessment of non-standard risks (i.e. complex risks) in insurance applications <b>from traditional and digital distribution channels</b> so as to decline particular insurance applications.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirement</u></p> <p>6.1 Possess knowledge in non-standard risk (i.e. complex risk) assessment for life insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s policy on risk classification</li> <li>• Comprehend company’s risk limit</li> <li>• Comprehend company’s underwriting criteria on complex risks</li> <li>• Able to classify different types of risks</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Know how to source domain specialists</li> </ul> <p>6.2(a) Assess non-standard risks for life insurance <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Apply company’s underwriting philosophy on non-standard risk assessment</li> <li>• Determine if insured amount is within the company’s acceptable risk level</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine the scope of specialist information required</li> <li>• Seek specialists’ advice on need basis</li> <li>• Clarify underlying reasons for rejection</li> </ul> <p>6.2(b) Evaluate life insurance applications <b>from traditional and digital distribution channels</b> based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify that assessment results are against approval of applications</li> <li>• Decline insurance applications</li> <li>• Notify relevant personnel of declined applications</li> </ul> <p>6.3 Decline <b>traditional and online</b> insurance applications based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Assess all non-standard risks, and potential correlations among the risks, involved in the applications</li> <li>• Decline insurance applications with supporting rationale</li> <li>• Produce prompt notification correspondences to relevant personnel.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and assess all non-standard risks, as well as potential correlations amongst the risks, involved in insurance applications <b>from traditional and digital distribution channels</b></li> <li>• Able to source for specialists’ advice to reveal potential risk exposures</li> <li>• Able to decline insurance applications according to risk assessment results.</li> </ul>
8. Remarks	

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Underwriting > Underwriting	
1. Title	Manage underwriting operations
2. Code	105557L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring company's underwriting operations <b>for traditional and digital platforms</b> . It involves establishing underwriting procedures, training relevant staff on the procedures, monitoring operations to prevent violations and solving day-to-day operational issues.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirement</u></p> <p>6.1 Possess knowledge in company's underwriting operations</p> <ul style="list-style-type: none"> <li>• Comprehend the flow of <b>traditional and digital</b> underwriting operations</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend relevant laws and regulations</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> <li>• <b>Comprehend</b> all aspects of regulatory requirements</li> </ul> <p>6.2(a) Establish governing mechanisms <b>for traditional and digital platforms</b> to guide company's underwriting operations</p> <ul style="list-style-type: none"> <li>• Provide training and guidance to relevant staff on corporate underwriting philosophy and procedures</li> <li>• Set up mechanism to prevent breaching of authority limits</li> <li>• Set up mechanism to prevent breaching of underwriting procedures, laws and regulations</li> </ul> <p>6.2(b) Oversee <b>traditional and digital</b> underwriting operations</p> <ul style="list-style-type: none"> <li>• Monitor execution of underwriting procedures</li> <li>• Resolve problems that arise in the day-to-day operation</li> <li>• Arrange data collection on underwriting operations</li> <li>• Communicate regularly with relevant units to review underwriting operations</li> <li>• Assess effectiveness and efficiencies of existing underwriting operations</li> <li>• Evaluate effectiveness of existing reporting lines</li> <li>• Analyze underwriting operations and identify areas to be improved</li> <li>• Improve underwriting procedures based on analysis results</li> </ul> <p>6.3 Manage <b>traditional and digital</b> underwriting operations</p> <ul style="list-style-type: none"> <li>• Master the flow and requirements of underwriting operations</li> <li>• Manage underwriting operations to achieve company's underwriting objectives</li> <li>• Ensure underwriting operations comply with company's underwriting manuals</li> <li>• Ensure underwriting operations comply with relevant laws and regulations.</li> </ul>

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7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to identify areas of underwriting operations for traditional and digital platforms that require governing mechanisms</li><li>• Able to set up effective governing mechanisms</li><li>• Able to evaluate effectiveness of underwriting operations and improve accordingly</li><li>• Able to manage underwriting operations to comply with corporate underwriting procedures, relevant laws and regulations.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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Underwriting> Underwriting	
1. Title	Evaluate quality of insurance underwriting operations against service pledges
2. Code	105558L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring service quality of underwriting operations <b>for traditional and digital platforms</b> . It involves collecting data to analyze quality standards, identifying areas to be improved and adjusting quality standards as and when necessary.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirement</u></p> <p>6.1 Possess knowledge in company’s underwriting operations</p> <ul style="list-style-type: none"> <li>• Comprehend company’s service pledge of underwriting operation</li> <li>• Comprehend company’s underwriting operations</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Benchmark market norms in underwriting services</li> </ul> <p>6.2 Evaluate and improve <b>traditional and digital</b> underwriting service quality</p> <ul style="list-style-type: none"> <li>• Arrange record collection on company’s provision of underwriting services</li> <li>• Set up channels to collect feedbacks from customers on company’s underwriting services</li> <li>• Analyze records to see if the current service is up to the company’s service pledge</li> <li>• Identify critical success factors and areas to be improved</li> <li>• Adjust company’s underwriting service quality standards as and when necessary</li> </ul> <p>6.3 Improve service quality of <b>traditional and digital</b> underwriting operations continuously</p> <ul style="list-style-type: none"> <li>• Ensure quality of underwriting operations meet service pledges at all times</li> <li>• Carry out necessary corrective actions to improve operations on need basis.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify records related to underwriting operations <b>in traditional and digital platforms</b> that reveal service quality</li> <li>• Able to analyze collected records to evaluate the service quality of underwriting operations</li> <li>• Able to identify areas of improvement and carry out necessary corrective actions.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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1. Title	Develop underwriting manuals
2. Code	105559L5
3. Range	This unit of competency is applicable to those who are responsible for developing underwriting manuals for new business lines. It involves designing the flow of underwriting process, identifying the involvement of different positions in the flow, working with claims department to develop the manual contents and to distribute the new manual.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><b><u>Performance Requirement</u></b></p> <p>6.1 Possess knowledge in underwriting procedures</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategy</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend company’s risk appetite</li> <li>• Comprehend the roles of different positions in the underwriting process</li> <li>• Comprehend company’s philosophy on risk acceptance and profitability strategy</li> <li>• Be aware of changes in insurance market structure</li> <li>• Comprehend relevant laws and regulations</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2(a) Establish underwriting procedure manuals</p> <ul style="list-style-type: none"> <li>• Design the flow of the underwriting processes</li> <li>• Estimate manpower and roles required to support the underwriting process</li> <li>• Determine authority limits of different units</li> <li>• Work with claims and actuary departments to develop underwriting procedure manuals</li> </ul> <p>6.2(b) Disseminate new underwriting procedure manuals</p> <ul style="list-style-type: none"> <li>• Explain manuals to relevant units</li> <li>• Provide guidance to relevant staff on using the manuals</li> <li>• Set up channels to obtain feedbacks on the manuals</li> </ul> <p>6.2(c) Maintain up-to-date underwriting procedure manuals</p> <ul style="list-style-type: none"> <li>• Review existing underwriting process based on staff feedbacks, changing business environment, and new regulatory requirements</li> <li>• Identify and dispose outdated procedures</li> <li>• Update underwriting procedure manuals accordingly</li> </ul> <p>6.3 Develop underwriting procedure manuals to direct underwriting operations in systematic manner</p> <ul style="list-style-type: none"> <li>• Ensure each procedure manual covers all relevant underwriting operations in each business line</li> <li>• Ensure procedure manuals lay out each step of underwriting procedures precisely</li> </ul>



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	<ul style="list-style-type: none"> <li>• Update procedure manuals to cater the changing operating contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to organize underwriting operations in step-by-step procedures</li> <li>• Able to describe underwriting procedures precisely in writing</li> <li>• Able to develop underwriting procedure manuals</li> <li>• Able to train relevant staff members to use the manuals</li> <li>• Able to update underwriting procedure manuals in light of changing operating contexts.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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**Unit of Competency**

Underwriting > Risk management	
1. Title	Produce risk exposure reports
2. Code	105560L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring company's risk exposure. It involves analyzing underwriting records and claims records, evaluating respective risk exposures of the company and producing relevant reports accordingly.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirement</u></p> <p>6.1 Possess knowledge in company's risk exposure policy</p> <ul style="list-style-type: none"> <li>• Comprehend company's policy on risk exposure</li> <li>• Comprehend features of company's products and target segments</li> <li>• Be alert to types of risks that the company is exposed to</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2(a) Analyze risk exposure</p> <ul style="list-style-type: none"> <li>• Analyze underwriting records and claims records</li> <li>• Evaluate risk exposure of different business lines</li> <li>• Assess aggregated risk exposure against risk exposure policies</li> </ul> <p>6.2(b) Provide risk exposure monitoring reports</p> <ul style="list-style-type: none"> <li>• Present risk exposure reports to relevant department heads</li> <li>• Provide recommendations on whether current risk exposures should be expanded or contracted based on monitoring results</li> </ul> <p>6.3 Produce risk export reports to monitor risk exposures of the company</p> <ul style="list-style-type: none"> <li>• Analyze relevant details extracted from underwriting records and claims records to determine current level of risk exposure of the company</li> <li>• Describe company's current level of risk exposures in operation contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and analyze indicators of company's risk exposures from underwriting records and claims records</li> <li>• Able to produce risk exposure reports based on analysis results</li> <li>• Able to describe company's current level of risk exposures</li> <li>• Able to provide recommendations on whether current risk exposures should be expanded or contracted based on monitoring results.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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**Unit of Competency**

Underwriting > Risk management	
1. Title	Control risk exposures
2. Code	105561L5
3. Range	This unit of competency is applicable to those who are responsible for controlling risk exposures of the company. It involves continuous monitoring of company's aggregated risks, rectifying operations to control risks within limits and managing risks in accordance with company's risk exposure policies and regulatory requirements.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in controlling risk exposures</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategy</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company's risk exposure policies</li> <li>• Recognize aggregated risks of individual business lines</li> <li>• <b>Comprehend</b> regulatory requirements such as reserve, liquidity and reinsurance</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2 (a) Control risk exposures</p> <ul style="list-style-type: none"> <li>• Establish alert system to monitor different levels of aggregated risk exposures</li> <li>• Maintain up-to-date records on aggregated risks</li> <li>• Provide solutions to control aggregated risks within risk limits</li> <li>• Arrange reinsurance according to risk exposure policies</li> <li>• Manage risks in accordance with company's risk exposure policies and regulatory requirements</li> </ul> <p>6.2(b) Provide recommendations on risk exposure policies</p> <ul style="list-style-type: none"> <li>• Review risk management effectiveness based on risk control records</li> <li>• Provide recommendations on risk exposure policies in light of review findings and changing operating environment.</li> </ul> <p>6.3 Manage risk exposures of company to comply with company's policies and regulatory requirements</p> <ul style="list-style-type: none"> <li>• Establish preventive measures in relevant areas of underwriting operations</li> <li>• Ensure company's risk exposures are within limits set forth by regulatory bodies and company's policies</li> <li>• Carry out remedial actions to reduce risk exposures.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify areas of underwriting operations that are risk vulnerable</li> <li>• Able to set up preventive measures to control company's risk exposures</li> <li>• Able to retrieve relevant records from underwriting operations to reveal current levels of aggregated risks</li> </ul>

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	<ul style="list-style-type: none"><li>• Able to carry out remedial actions to reduce risk exposures.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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**Unit of Competency**

Underwriting > Risk Management	
1. Title	Provide risk assessment training
2. Code	105562L5
3. Range	This unit of competency is applicable to those who are responsible for providing risk assessment training to relevant staff members. It involves analyzing risks involved in different business lines, evaluating risk assessment training needs, designing and delivering relevant training, as well as constant updating staff on risk trends.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in risk appraisal</p> <ul style="list-style-type: none"> <li>• Comprehend types of risks that company is exposed to</li> <li>• Comprehend company's risk assessment guidelines</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company's policies on risk exposures</li> <li>• Know about training management</li> </ul> <p>6.2 (a) Provide risk assessment training</p> <ul style="list-style-type: none"> <li>• Collect risk records in different business lines</li> <li>• Analyze how identified risks affect company's profitability</li> <li>• Identify needs to equip staff members with risk assessment techniques</li> <li>• Design training programmes to train underwriting staff on risk assessment</li> <li>• Train staff on assessing standard and non-standard risks</li> <li>• Arrange external specialists to deliver training on need basis</li> </ul> <p>6.2(b) Update staff members on risk trends regularly</p> <ul style="list-style-type: none"> <li>• Identify changes in trend of risks in changing operating environment</li> <li>• Set up channels to update staff members on changes in risk trends</li> <li>• Set up channels for staff members to report irregular types of risks</li> </ul> <p>6.3 Deliver effective training to relevant staff members</p> <ul style="list-style-type: none"> <li>• Design effective risk assessment training programmes</li> <li>• Ensure staff members comprehend risk assessment techniques</li> <li>• Work with relevant supervisors to ensure relevant staff members are able to apply assessment techniques to support underwriting operations effectively.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify relevant risk assessment skills required in the risk assessment process</li> <li>• Able to identify the discrepancies between required and current skills of staff members</li> <li>• Able to design risk assessment training programmes with clear training objectives and dedicated contents</li> <li>• Able to train staff members on risk assessment</li> <li>• Able to arrange external specialists to deliver assessment training on need basis</li> <li>• Able to ensure staff members are able to apply risk assessment techniques</li> </ul>

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	effectively.
8. Remarks	This unit of competency is also applicable to general insurers.

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Underwriting > Risk Management	
1. Title	Establish risk assessment guidelines
2. Code	105564L5
3. Range	This unit of competency is applicable to those who are responsible for establishing risk appraisal guidelines for individual business lines. It involves setting up guidelines respective systems for fraud identifications and assessment of different risks, as well as introducing the guidelines to relevant units.
4. Level	6
5. Credit	6 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in natures of different risks</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategy</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend perils and hazards in different business lines</li> <li>• Comprehend frequency and severity of different risks</li> <li>• Possess knowledge in identifying insurance frauds</li> <li>• Comprehend company’s policies on risk exposures and profitability</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.3 (a) Develop risk assessment guidelines</p> <ul style="list-style-type: none"> <li>• Establish systems of identifying frauds</li> <li>• Establish risk assessment guidelines for standard and non-standard risks</li> <li>• Establish overall risk assessment guidelines</li> <li>• Explain risk assessment guidelines to relevant units</li> <li>• Apply risk assessment guidelines to underwriting operations</li> <li>• Provide channels to obtain feedbacks from business lines</li> </ul> <p>6.2(b) Review risk assessment guidelines</p> <ul style="list-style-type: none"> <li>• Review risk assessment guidelines based on collected feedbacks and changes in operating environment</li> <li>• Fine tune risk assessment guidelines based on review findings.</li> </ul> <p>6.3 Ensure risk assessment guidelines effectively support company’s control of risk exposures</p> <ul style="list-style-type: none"> <li>• Develop risk assessment guidelines that provide clear instructions on how to reveal and assess the risks involved in insurance applications</li> <li>• Ensure relevant units are well informed about risk assessment guidelines</li> <li>• Ensure risk assessment activities undertaken by relevant staff members facilitate effective control of company’s risk exposures.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify areas of risk assessment activities which are vulnerable to frauds</li> <li>• Able to describe risk assessment criteria in writing</li> <li>• Able to establish risk assessment guidelines</li> </ul>

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	<ul style="list-style-type: none"><li>• Able to explain risk assessment guidelines in operation contexts</li><li>• Able to fine tune risk appraisal guidelines in light of changing operating environment.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.



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Underwriting > Reinsurance	
1. Title	Manage reinsurance activities
2. Code	105566L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring reinsurance activities of individual business lines. It involves collecting records on company's reinsurance activities, evaluating reinsurance statuses and identifying non-compliance incidents.
4. Level	5
5. Credit	6 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in reinsurance management</p> <ul style="list-style-type: none"> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company's reinsurance policies</li> <li>• Apply methods in monitoring reinsurance activities</li> <li>• Recognize company's policies on risk exposures and profitability</li> <li>• <b>Comprehend</b> regulatory requirements on reinsurance and solvency</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2 Manage reinsurance activities</p> <ul style="list-style-type: none"> <li>• Determine types and amounts of treaty reinsurance</li> <li>• Determine types and amounts of facultative reinsurance</li> <li>• Negotiate with reinsurance partners</li> <li>• Monitor company's portfolios to ensure adequacy of reinsurance against regulatory requirements</li> <li>• Collect records on reinsurance activities in individual business lines</li> <li>• Analyze reinsurance effectiveness in individual business lines</li> <li>• Identify breaching of reinsurance guidelines and follow up with remedial solutions</li> <li>• Produce reports on monitoring results</li> </ul> <p>6.3 Manage reinsurance activities effectively</p> <ul style="list-style-type: none"> <li>• Apply reinsurance policies to guide the arrangement of reinsurance activities</li> <li>• Provide accurate details on company's latest reinsurance activities</li> <li>• Ensure reinsurance arrangements are carried out in accordance with company's reinsurance policies and regulatory requirements.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify indicators of compliance of reinsurance activities against reinsurance policies</li> <li>• Able to negotiate with reinsurance partners to derive competitive reinsurance arrangement</li> <li>• Able to monitor reinsurance activities effectively</li> <li>• Able to provide accurate details on reinsurance status of the company from time to time.</li> </ul>
8. Remarks	

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Unit of Competency**

Underwriting > Underwriting	
1. Title	Establish insurance underwriting authority limits
2. Code	105610L6
3. Range	This unit of competency is applicable to those who are responsible for establishing underwriting authority limits for different business lines. It involves analyzing proper authority limits required to support corporate underwriting procedures, setting up the authority limits and introducing the limits to relevant units.
4. Level	6
5. Credit	4 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing underwriting authority limits</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend underwriting procedures</li> <li>• Comprehend company’s policies on risk exposures</li> <li>• Comprehend nature of risk in different business lines</li> <li>• Comprehend business structure of the company</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> </ul> <p>6.2(a) Establish underwriting limits</p> <ul style="list-style-type: none"> <li>• Analyze requirements of authority limits on risk exposures based on underwriting procedures</li> <li>• Set up authority limits for different underwriting positions</li> <li>• Establish procedures of obtaining higher level authorities</li> <li>• Introduce authority limits to relevant units</li> <li>• Provide training to relevant staff on applying established limits in underwriting operations</li> </ul> <p>6.2(b) Maintain effective authority limits</p> <ul style="list-style-type: none"> <li>• Review effectiveness of authority limits in underwriting operations in light of changing operating environment</li> <li>• Update authority limits in light of review findings</li> <li>• Ensure underwriting authority limits align with corporate risk exposure policies</li> <li>• Develop authority limits that effectively classify underwriting procedures according to the levels of risks involved</li> <li>• Ensure authority limits effectively implement corporate risk exposure policies</li> <li>• Ensure relevant units are well informed about authority limits.</li> </ul>

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7. Assessment Criteria	<ul style="list-style-type: none"><li>• The integrated outcome requirements of this unit of competency are:</li><li>• Able to derive the criteria for underwriting authority limits based on corporate risk exposure policies and underwriting procedures</li><li>• Able to design levels of authority limits according to the levels of risk exposures</li><li>• Able to establish authority limits for different business lines</li><li>• Able to maintain effective authority limits in underwriting operations in light of changing operating environment.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
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Underwriting > Underwriting	
1. Title	Establish underwriting policies
2. Code	105611L6
3. Range	This unit of competency is applicable to those who are responsible for establishing corporate underwriting policies. It involves analyzing various factors affecting corporate underwriting operations, developing corporate underwriting policies and introducing the policies to relevant units.
4. Level	6
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing underwriting policies</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend company’s underwriting risk appetite</li> <li>• Comprehend company’s profitability strategies</li> <li>• Comprehend company’s business structure</li> <li>• Comprehend corporate marketing strategies</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> </ul> <p>6.2 (a) Establish underwriting policies</p> <ul style="list-style-type: none"> <li>• Analyze risk exposures of the company</li> <li>• Analyze previous claims records and forecast future claims trends</li> <li>• Analyze company’s competitive position in the market</li> <li>• Develop underwriting policies</li> <li>• Introduce underwriting policies to relevant units</li> <li>• Set up channel to collect feedbacks from staff on underwriting policies</li> </ul> <p>6.2(b) Review corporate underwriting policies</p> <ul style="list-style-type: none"> <li>• Review corporate underwriting policies with respect to staff feedbacks and changing operating contexts</li> <li>• Improve underwriting policies in light of the changing operating environment</li> </ul> <p>6.3 Develop effective underwriting policies</p> <ul style="list-style-type: none"> <li>• Develop policies that provide clear guidelines for underwriting operations</li> <li>• Ensure underwriting policies are well understood by relevant units</li> <li>• Ensure implementation of underwriting policies achieve company’s underwriting objectives</li> <li>• Adjust underwriting policies to accommodate changing operating contexts.</li> </ul>

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7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to identify and analyze factors which affect the formulation of underwriting policies</li><li>• Able to establish underwriting policies</li><li>• Able to introduce underwriting policies to relevant units in operation contexts</li><li>• Able to improve underwriting policies in light of the changing market environment.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

**Claims**

Claims > Claims Management	
1. Title	Maintain up-to-date claims records
2. Code	105466L2
3. Range	This unit of competency is applicable to those who are responsible for insurance claims records maintenance <b>for traditional and digital platforms</b> . It involves claims <b>identification</b> , classification, data input and data maintenance.
4. Level	2
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in maintain claims records</p> <ul style="list-style-type: none"> <li>• Understand company’s claims policies, procedures, guidelines, <b>settlement authority level and work flow</b></li> <li>• Understand company’s risk classification policy</li> <li>• Apply methods of classifying data in claims operations</li> <li>• Able to use company’s claims management information system</li> <li>• Well aware of relevant compliance and regulatory requirements in handling customer records</li> <li>• <b>Understand General Data Protection and its impact on handling of customer records</b></li> <li>• <b>Understand the importance of data integrity for data analysis</b></li> </ul> <p>6.2 Maintain insurance claims records <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• <b>Identify and classify</b> claims data according to company procedures and guidelines</li> <li>• Update claims records upon requests <b>in a timely and accurate manner</b></li> <li>• Produce claims statistics and reports to relevant units upon requests.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to file claims records <b>for traditional and digital platforms</b> according to company procedures</li> <li>• Able to update claims records accurately and timely</li> <li>• Able to gather relevant claims records to produce statistics and reports upon requests.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

**Specification of Competency Standards of the Insurance Industry (Life Insurance)  
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Claims > Claims Processing	
1. Title	Process life insurance claims applications
2. Code	105670L3
3. Range	This unit of competency is applicable to those who are responsible for handling claims enquiries and applications <b>from traditional and digital distribution channels with proper customer service skills</b> . It involves answering customer enquiries and handling claims applications.
4. Level	3
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in life insurance claims processing</p> <ul style="list-style-type: none"> <li>• Understand information required in claims for life insurance</li> <li>• Comprehend corporate claims handling procedures and service standard</li> <li>• <b>Understand</b> company procedures, relevant compliance and regulatory requirements in handling customer enquiries</li> <li>• <b>Understand the underwriting intent</b></li> <li>• <b>Understand fraud database</b></li> </ul> <p>6.2 Handle claims applications and process applications for life insurance <b>from traditional and digital distribution channels with proper customer service skills</b></p> <ul style="list-style-type: none"> <li>• Explain to customers the claim process and time it may take</li> <li>• Explain to customers the documents needed in particular claims, e.g. death certificate for death claims, medical records for medical claims</li> <li>• Explain to customers their responsibilities in claims process</li> <li>• Advise customers on progress of claims upon enquiries</li> <li>• <b>Authenticate documents and verify</b> all required correspondences are submitted</li> <li>• Submit claims application forms with relevant correspondences to appropriate personnel for further processing</li> <li>• <b>Identify fraud cases and alert and escalate to higher level</b></li> <li>• Handle customer records in accordance with regulatory requirements.</li> </ul> <p>6.3 Submit life insurance claims applications with sufficient correspondences to appropriate personnel</p> <ul style="list-style-type: none"> <li>• Provide customers with clear and correct information on claims applications</li> <li>• Submit claims applications with supporting correspondences to appropriate personnel.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to explain claims procedures to customers</li> <li>• Able to handle claims enquiries on claims applications <b>from traditional and digital distribution channels</b> and arrange follow-up actions with customers if enquiries cannot be solved at the spot</li> <li>• Able to arrange collection of further information to submit the claims applications for processing</li> <li>• Able to submit claims applications to the appropriate personnel for further</li> </ul>

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**Unit of Competency**

	processing.
8. Remarks	



**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Processing	
1. Title	Open and review life insurance claims files
2. Code	105674L4
3. Range	This unit of competency is applicable to those who are responsible for opening life insurance claims files <b>from traditional and digital distribution channels</b> .It involves verifying claims information. <b>It also involves monitoring and reviewing claims files on regular basis.</b>
4. Level	4
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in handling life insurance claims</p> <ul style="list-style-type: none"> <li>• Well versed with types of information required in claims process</li> <li>• Well versed with corporate reserve policy</li> <li>• Comprehend company claims processing systems</li> <li>• Comprehend corporate claims policies, procedure and claims reserve guidelines</li> <li>• <b>Understand</b> relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Review and verify life insurance claims files <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Open claims files in claims processing system for received claims applications <b>and auto acknowledgement</b></li> <li>• Ensure that all required information and forms are submitted completely in a timely manner</li> <li>• Obtain further information and documents from relevant parties if necessary</li> <li>• Present claims files with supporting correspondences to obtain further advice from relevant personnel if necessary</li> <li>• Manage the workflow and end to end customer journey</li> </ul> <p>6.3 Review life insurance claims files in accordance with company procedures and regulatory requirements</p> <ul style="list-style-type: none"> <li>• Create files in the claim processing system for received claim applications with necessary corresponding documents</li> <li>• Carry out responsible steps to verify and assess that claimed losses are within the scope of policies</li> <li>• <b>Monitor and review claims files on a regular basic.</b></li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to initiate claim processing for received claim applications <b>from traditional and digital distribution channels</b> with relevant documents supplied</li> <li>• Able to acquire additional information and documents from relevant parties if necessary</li> <li>• Able to obtain further advice from relevant personnel if necessary</li> <li>• Able to communicate effectively with customers and insurance intermediaries</li> <li>• <b>Able to monitor and review claims files on regular basis.</b></li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
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Claims > Claims Processing	
1. Title	Assess claims applications for life insurance
2. Code	105675L4
3. Range	This unit of competency is applicable to those who are responsible for assessing insurance claims applications <b>from traditional and digital distribution channels</b> . It involves determining validity of claims and making decision to assess claims applications.
4. Level	4
5. Credit	3 (for reference only)
6. Competency	<p><b>Performance Requirement</b></p> <p>6.1 Possess knowledge in assessing death claims</p> <ul style="list-style-type: none"> <li>• Comprehend scope of coverage of life insurance policies</li> <li>• Comprehend exclusions and terms and conditions in life insurance policies</li> <li>• Understand medical/doctor/police reports on death claims</li> <li>• Comprehend company’s claims processing system, claims procedures and guidelines</li> <li>• <b>Understand</b> relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Assess claims applications <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Determine whether the policyholders have committed actions (e.g. smoking, suicide, high-risk hobby) within the contestability period that may render the claims contestable</li> <li>• Check and determine if life insurance policies are in force while deaths occur</li> <li>• Cross check the identity of the deceased and the life insured</li> <li>• Verify information on death confirmation, including age and identification of claimant, as well as policyholder’s cause of death for death claims</li> <li>• <b>Identify frauds through the authentication of documents</b></li> <li>• Reference and interpret doctor/medical/police reports</li> <li>• Examine medical history of deceased to determine if cause of death is pre-existing condition</li> <li>• Check for exclusions, contestable periods and other provisions in life insurance policies</li> <li>• Liaise with medical personnel for further verification when needed</li> <li>• Liaise with claimants for further information when needed</li> <li>• Determine if claims applications can be assessed</li> <li>• Present claims applications with supporting correspondences to obtain approval from appropriate personnel if authority limits are exceeded</li> </ul> <p>6.3 Assess claims applications timely and in accordance with company claims procedures and guidelines, as well as relevant compliance and regulatory requirements</p> <ul style="list-style-type: none"> <li>• Determine whether claims applications are assessed in a timely manner</li> <li>• Interpret relevant information in the medical/doctor/police reports correctly</li> </ul>

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

	<ul style="list-style-type: none"> <li>• Assess claim applications in accordance with company claims procedures and guidelines, as well as relevant compliance and regulatory requirements.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to assess validity of claims applications <b>from traditional and digital distribution channels</b> accurately and timely</li> <li>• Able to understand medical/doctor/police reports</li> <li>• Able to assess claims applications in accordance with company claims procedures and guidelines, as well as relevant compliance and regulatory requirements</li> <li>• Able to communicate effectively with customers and insurance intermediaries</li> <li>• Able to evaluate and negotiate effectively with claimants.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Processing	
1. Title	Close life insurance claims files
2. Code	105676L4
3. Range	This unit of competency is applicable to those who are responsible for closing insurance claims files. It involves determining status of claims and maintaining proper records for those claims applications from traditional and digital distribution channels
4. Level	4
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in closing life insurance claims files</p> <ul style="list-style-type: none"> <li>• Comprehend status of a claims applications</li> <li>• Comprehend company procedures of closing claims files</li> <li>• Comprehend company's claims processing system</li> <li>• Comprehend corporate claims policies, procedure and guidelines</li> <li>• Comprehend corporate claims reserving policy</li> <li>• Understand relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Evaluate life insurance claims application statuses from traditional and digital distribution channels</p> <ul style="list-style-type: none"> <li>• Assess statuses (settled, declined, withdrawn, etc.) of individual claims applications</li> <li>• Determine if individual claims applications can be closed according to company procedure</li> <li>• Review reserves according to corporate claims reserve guidelines</li> <li>• Present applications with supporting evidence to obtain approval from appropriate authority for closing of claims applications</li> <li>• Arrange updates of records in company system for closed claims files</li> </ul> <p>6.3 Close life insurance claims files in accordance with company claims procedures and guidelines</p> <ul style="list-style-type: none"> <li>• Assess details in claims files to determine claims statuses</li> <li>• Arrange necessary follow-up actions if claims files cannot be closed</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to assess details in claims files to determine statuses of claims applications from traditional and digital channels</li> <li>• Able to determine the next steps in claims applications based on current status</li> <li>• Able to verify whether claims files can be closed</li> <li>• Able to close claims files in accordance with company procedures, as well as relevant compliance and regulatory requirements</li> <li>• Able to arrange follow-up actions if claims files cannot be closed.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Settlement	
1. Title	Settle life insurance claims
2. Code	105677L4
3. Range	This unit of competency is applicable to those who are responsible for life insurance claims settlement. It involves determining settlement amounts and settlement options for individual claims applications <b>from traditional and digital distribution channels</b> .
4. Level	4
5. Credit	4 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in settling life insurance claims</p> <ul style="list-style-type: none"> <li>• Comprehend company procedures and guidelines of claims settlement</li> <li>• Comprehend company’s claims settlement systems</li> <li>• Comprehend options in claims settlement</li> <li>• Comprehend company’s claims processing system</li> <li>• <b>Understand</b> relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Process settlements for life insurance claims applications <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Verify identity of payees to ensure their eligibility to receive the claim payments</li> <li>• Identify potential frauds</li> <li>• Determine the best settlement options (if any) in accordance with corporate claims procedures and guidelines</li> <li>• Present claims with supporting evidence to obtain approval from appropriate authorities for respective settlement amounts</li> <li>• Liaise with financial unit to prepare settlement cheques</li> <li>• Settle approved claims in accordance with company guidelines</li> <li>• Review reinsurance arrangements and report claims to the reinsurers according to the reporting requirements under the reinsurance agreements</li> </ul> <p>6.3 Settle life insurance claims according to corporate claims guidelines</p> <ul style="list-style-type: none"> <li>• Verify eligibility of payees to receive claims payments based on existing policy records</li> <li>• Settle claims with settlement amounts determined by corporate claims guidelines</li> <li>• Communicate with relevant finance and claims units to process settlements.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to review existing policy records to determine payees’ eligibility for claims payments</li> <li>• Able to determine accurate settlement amounts</li> <li>• Able to settle claims <b>from traditional and digital application channels</b> in accordance with company procedures and guidelines, as well as relevant compliance and regulatory requirements</li> <li>• Able to collaborate with finance and claim units to settle claim compensations.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Manage the production of claims reports for life insurance
2. Code	105683L5
3. Range	This unit of competency is applicable to those who are responsible for managing life insurance claims reports. It involves retrieving claims records, generating reports, maintaining reports and identifying ways to improve claims report management process.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in producing life insurance claims reports</p> <ul style="list-style-type: none"> <li>• Comprehend company’s claims recording system</li> <li>• Know how to retrieve claims records from company’s claims processing system</li> <li>• Comprehend claims report management techniques</li> <li>• <b>Comprehend</b> relevant compliance and regulatory requirements</li> </ul> <p>6.2 Manage the production of life insurance claims reports</p> <ul style="list-style-type: none"> <li>• Produce regular claims reports for claims monitoring purpose</li> <li>• Produce specific claims reports to relevant units upon requests</li> <li>• Produce regular reports to analyze claims trends</li> <li>• Identify areas where risk selections or improvements can be made</li> <li>• Produce regular claims reports and exception reports to monitor claims portfolios and to ensure the compliance of claims governance</li> <li>• Maintain generated claims reports according to company procedures</li> <li>• Observe the regulatory requirements on claims reports and customer record handling</li> </ul> <p>6.3 Manage the production of accurate life insurance claims reports</p> <ul style="list-style-type: none"> <li>• Produce regular claims reports with all required details upon requests</li> <li>• Produce claims reports according to specific requirements upon requests.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify required record elements to generate claims reports</li> <li>• Able to produce accurate claims reports timely with all the required records according to company procedures and regulatory requirements</li> <li>• Able to maintain up-to-date claims reports</li> <li>• Able to gather relevant record elements to produce specific reports upon requests.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Evaluate performance of appointed experts/specialists
2. Code	105574L5
3. Range	This unit of competency is applicable to those who are responsible for evaluating the performance of experts/specialists such as investigators. It involves reviewing and analyzing the performance of experts/specialists appointed, and updating the approved lists of experts/specialists.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in evaluating performance of experts/specialists</p> <ul style="list-style-type: none"> <li>• Comprehend corporate claims policies, procedures and guidelines</li> <li>• Comprehend company’s requirements on performance standards of experts/specialists</li> <li>• Comprehend company’s claims processing system</li> <li>• Know about performance evaluation</li> <li>• Comprehend relevant compliance and regulatory requirements in processing claims</li> <li>• Establish policies for vendor selections</li> </ul> <p>6.2 Assess performance of experts/specialists</p> <ul style="list-style-type: none"> <li>• Gather information on performance of appointed experts/specialists on regular basis</li> <li>• Analyze performance of appointed experts/specialists</li> <li>• Determine if performance of experts/specialists is up to company standards</li> <li>• Determine if services provided by experts/specialists comply with relevant compliance and regulatory requirements</li> <li>• Propose termination of appointment of individual expert/specialist if necessary</li> <li>• Update approved expert/specialist lists on a regular basis</li> <li>• Provide updated lists to relevant units</li> </ul> <p>6.3 Appoint competent experts/specialists to support claims processing</p> <ul style="list-style-type: none"> <li>• Produce performance evaluation results of individual specialists</li> <li>• Ensure the engagement of vendors are best value for money</li> <li>• Maintain lists of experts/specialists, who are able to achieve performance standard, to facilitate sourcing of domain experts/specialists</li> <li>• Request relevant units not to appoint those experts/specialists who are not up to performance standards</li> <li>• Explain to relevant units the performance requirements of domain experts/specialists.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify performance indicators of domain experts/specialists</li> <li>• Able to carry out performance evaluations of individual domain experts/specialists against prescribed company standards and relevant regulatory</li> </ul>

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	requirements <ul style="list-style-type: none"><li>• Able to maintain lists of qualified experts/specialists</li><li>• Able to explain to relevant units the performance requirements of domain experts/specialists.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.



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**Unit of Competency**

Claims > Claims Management	
1. Title	Develop claims operation manuals and best practices
2. Code	105575L5
3. Range	This unit of competency is applicable to those who are responsible for developing claims operation manuals. It involves designing flow of claims process, determining authority limits and reporting lines of different job posts, as well as providing guidance to relevant staff on using operation manual.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in claims procedures</p> <ul style="list-style-type: none"> <li>• Comprehend company’s claim policies</li> <li>• Comprehend company’s claims service principles</li> <li>• Comprehend coverage of company’s insurance products</li> <li>• Comprehend roles of different posts in claims process</li> <li>• Be aware of the market norms in claims service</li> <li>• Comprehend relevant compliance and regulatory requirements</li> <li>• Understand financial management aspects of an insurance business</li> </ul> <p>6.2(a) Establish claims procedures</p> <ul style="list-style-type: none"> <li>• Create process flow for all lines of business</li> <li>• Benchmark claims procedures against market practices</li> <li>• Determine authority limits of different positions</li> <li>• Determine reporting lines of different positions</li> <li>• Explain claims operation manual to claims staff and other relevant units</li> <li>• Provide guidance to relevant staff on using claims operation manuals</li> <li>• Set up channels to obtain feedbacks on claims operation manuals</li> </ul> <p>6.2(b) Create claims best practices by lines of business</p> <ul style="list-style-type: none"> <li>• Update the process flow as necessary to include claims best practices as determined by local and/or global claims management</li> <li>• Ensure that claims best practices include all necessary steps from claim registration to file closure</li> </ul> <p>6.2(c) Maintain up-to-date operation manuals</p> <ul style="list-style-type: none"> <li>• Review contents of operation manuals in light of new business lines and products</li> <li>• Update operation manual based on review findings</li> <li>Update claims best practices</li> </ul> <p>6.3 Develop operation manuals to standardize claims operations and supports company claims reserving policies, guidelines and best practices</p> <ul style="list-style-type: none"> <li>• Develop operation manuals that cover all claims operations</li> <li>• Lay out each step of operations precisely in the manuals</li> <li>• Ensure that claims operations are in line with company’s claims policies, guidelines and best practices</li> <li>• Update operation manuals to cater new business lines and products.</li> </ul>

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7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to organize claims operations into step-by-step procedures</li><li>• Able to describe claims procedures in writing</li><li>• Able to develop claims operation manuals that support corporate claims policies and guidelines and comply with relevant compliance and regulatory requirements</li><li>• Able to train relevant staff members to use the manuals</li><li>• Able to develop and update claims best practices</li><li>• Able to update operation manuals to support development of new business lines and products.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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**Unit of Competency**

Claims > Claims Management	
1. Title	Handle and manage suspected fraudulent claims
2. Code	105576L5
3. Range	This unit of competency is applicable to those who are responsible for tactfully handling suspected fraudulent claims. It involves screening and analyzing the information of suspected fraudulent claims and deciding the best course of actions to tackle fraudulent claims.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in handling fraudulent cases</p> <ul style="list-style-type: none"> <li>• Know about indicators of fraudulent claims</li> <li>• Comprehend common fraudulent claims cases in the insurance industry</li> <li>• Comprehend techniques of screening suspected fraudulent claims</li> <li>• Comprehend company procedures and guidelines on handling suspected fraud cases</li> </ul> <p>6.2(a) Identify, handle and manage suspected fraudulent claims</p> <ul style="list-style-type: none"> <li>• Screen claims applications to identify potential fraudulent claims</li> <li>• Analyze records in the suspected fraudulent claims</li> <li>• Conduct investigation on suspected fraudulent claims</li> <li>• Report suspected fraudulent claims</li> <li>• Arrange experts/specialists for further investigation</li> <li>• Determine if particular claims are fraudulent</li> <li>• Present claims applications with supporting evidence to solicit legal advice on need basis</li> </ul> <p>6.2(b) Establish regular fraud detection and prevention training</p> <ul style="list-style-type: none"> <li>• Create fraud checklists</li> <li>• Train claims staff on screening and identifying suspicious or fraudulent cases</li> <li>• Update fraud checklists regularly</li> <li>• <a href="#">Explain to underwriters and elaborate on the potential risk</a> to avoid accepting suspicious risks</li> <li>• Update claims staff and underwriters on local and global claims fraud management policies</li> </ul> <p>6.3 Manage suspected fraudulent claims effectively to safeguard company from losses</p> <ul style="list-style-type: none"> <li>• Identify fraudulent claims effectively</li> <li>• Ensure all suspected fraudulent claims are thoroughly investigated</li> <li>• Ensure proper messages are delivered to the customers and insurance intermediaries in the course of investigations</li> <li>• Ensure actions are carried out in accordance with company procedures and guidelines to deal with suspected fraudulent claims</li> <li>• Maintain up-to-date fraud checklists</li> <li>• Equip relevant staff members with the necessary knowledge and skills to deal</li> </ul>

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	with suspicious or fraudulent cases.
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify fraudulent claims effectively</li> <li>• Able to analyze the information to evaluate suspected fraudulent claims</li> <li>• Able to source experts/specialists for further investigations suspected fraudulent claims</li> <li>• Able to handle suspected fraudulent claims according to company procedures and guidelines</li> <li>• Able to give instructions and train claims staff on tackling suspicious or fraudulent claims</li> <li>• Able to deal with customers and insurance intermediaries when encountering suspicious or fraudulent claims</li> <li>• Able to create and maintain fraud checklists.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Manage claims operations
2. Code	105614L6
3. Range	This unit of competency is applicable to those who are responsible for managing operations of claims department. It involves establishing claims operational guidelines, monitoring different functions in claims department and resolving claims disputes.
4. Level	6
5. Credit	6 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in corporate claims operation</p> <ul style="list-style-type: none"> <li>• Comprehend functions of different posts in claims operations</li> <li>• Comprehend claims operation work flow</li> <li>• Comprehend authority limits for different job ranks</li> <li>• <b>Master</b> relevant compliance and regulatory requirements in processing claims</li> <li>• Comprehend corporate development strategies</li> </ul> <p>6.2 (a) Manage claims operations</p> <ul style="list-style-type: none"> <li>• Establish company claims service principles</li> <li>• Establish claims strategies in line with company’s directions and goals</li> <li>• Develop corporate claims reserving policies</li> <li>• Establish claims procedures and operation guidelines with expected performance standards</li> <li>• Set up monitoring mechanisms to prevent breaching of authority limits</li> <li>• Provide training and guidance to claims staff on corporate claims policies, procedures and guidelines</li> <li>• Monitor manpower and roles of different posts in claims department</li> <li>• Resolve claims disputes <b>with alternative disputes resolution and mechanism</b></li> </ul> <p>6.2 (b) Improve operation procedures</p> <ul style="list-style-type: none"> <li>• Evaluate efficiency and effectiveness of claims operations on regular basis</li> <li>• Assess compliance of claims operations against relevant regulatory requirements</li> <li>• Identify areas to be improved in claims operations based on assessment results</li> </ul> <p>6.3 Ensure claims operations effectively support corporate development</p> <ul style="list-style-type: none"> <li>• Master the flow and service requirements of claims operations</li> <li>• Ensure all decisions made on claims applications are accurate</li> <li>• Ensure all settlements are made in a timely manner</li> <li>• Ensure all recovery actions are carried out as needed</li> <li>• Manage claims operations to achieve service targets, e.g. settlements made within service pledge</li> <li>• Ensure all claims operations comply with the established claims reserving policies, operation guidelines, as well as relevant compliance and regulatory requirements</li> <li>• Ensure the practice of quality assurance, fraud, recovery and vendor management are in place</li> </ul>

## Specification of Competency Standards of the Insurance Industry (Life Insurance)

### Unit of Competency

	<ul style="list-style-type: none"> <li>• Ensure claims are managed proactively to shorten the age of files</li> <li>• Ensure settlement costs and expenses are effectively controlled.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to organize claims operations into step-by-step procedures</li> <li>• Able to deliver business objectives in terms of financial effectiveness, operational efficiency and compliance</li> <li>• Able to identify areas of operations that require governing mechanisms and set up such mechanisms accordingly</li> <li>• Able to establish claims reserve policies, procedures and guidelines, that comply with relevant compliance and regulatory requirements, to direct corporate claims operations</li> <li>• Able to manage claims operations to ensure compliance with relevant policies and guidelines, as well as regulatory requirements</li> <li>• Able to improve efficiency, effectiveness and compliance claims operations based on regular evaluation results</li> <li>• Able to improve customer satisfaction with continual lifting of the service standards.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Assess performance and quality of insurance claims operations
2. Code	105615L6
3. Range	This unit of competency is applicable to those who are responsible for assessing performance of insurance claims operations. It involves reviewing and analyzing claims records, as well as providing recommendations to improve claims operation performance.
4. Level	6
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in assessing performance of claims operation</p> <ul style="list-style-type: none"> <li>• Comprehend functions of different roles in claims operation</li> <li>• Comprehend claims operation work flow</li> <li>• Comprehend company claims policies, procedures and guidelines</li> <li>• <b>Master</b> relevant compliance and regulatory requirements</li> <li>• Familiarize with the financial management aspects of an insurance business</li> </ul> <p>6.2 Evaluate performance and service quality of claims operations</p> <ul style="list-style-type: none"> <li>• Review claims records and reports on claims process</li> <li>• Evaluate efficiency and effectiveness of claims operations on regular basis</li> <li>• Identify violations of claims guidelines and/or authority limits</li> <li>• Collect customer feedbacks on company claims service</li> <li>• Analyze records to see if corporate claims operations are up to standard</li> <li>• Identify critical success factors and areas to be improved</li> </ul> <p>6.3 Assess performance and quality of claims operations objectively</p> <ul style="list-style-type: none"> <li>• Set up performance indicators for claims operations</li> <li>• Evaluate efficiency and effectiveness of claims operations against predefined service standards</li> <li>• Assess claims operations using the identity indicators and produce performance assessment results accordingly</li> <li>• Determine precisely whether claims operations comply with corporate claims policies, procedures and guidelines, as well as relevant compliance and regulatory requirements</li> <li>• Provide recommendations to improve claims operations.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify performance indicators of claims operations</li> <li>• Able to arrange collection of relevant claims records for performance assessment</li> <li>• Able to analyze claims records to evaluate efficiency and effectiveness of claims operations against predefined performance standards</li> <li>• Able to identify violations of claims policies, procedures and guidelines</li> <li>• Able to provide recommendations to improve claims operations.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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Claims > Claims Management	
1. Title	Establish insurance claims authority limits
2. Code	105616L6
3. Range	This unit of competency is applicable to those who are responsible for establishing claims authority limits. It involves determining proper claims and settlement authority limits required to support company claims services, setting up authority limits and introducing authority limits to relevant units.
4. Level	6
5. Credit	4 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing claims authority limits</p> <ul style="list-style-type: none"> <li>• Comprehend company claims policy and procedures</li> <li>• Comprehend coverage of company’s products</li> <li>• Comprehend nature of risks for insurance</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with financial management aspects of an insurance business</li> </ul> <p>6.2(a) Set up claims and settlement authority limits for insurance</p> <ul style="list-style-type: none"> <li>• Determine and establish claims authority limits for different claims positions</li> <li>• Structure claims unit so that the hierarchy and authority of positions link with technical capabilities and maintain proper balance of control and autonomy</li> <li>• Establish procedures and guidelines for obtaining higher level authorities</li> <li>• Implement authority limits in claims operations</li> <li>• Present claims and settlement authority limits to claims staff</li> </ul> <p>6.2(b) Maintain effective claims and settlement authority limits</p> <ul style="list-style-type: none"> <li>• Review claims records to analyze the effectiveness of claims and settlement authority limits in light of changing operating environment</li> <li>• Adjust authority limits in light of review findings</li> </ul> <p>6.3 Ensure claims authority limits align with corporate risk exposures and insurance claims policies</p> <ul style="list-style-type: none"> <li>• Develop authority limits that effectively classify claims settlement to cater technical complexities and maintain a proper balance of control and autonomy</li> <li>• Ensure that relevant staff are well informed about claims and settlement authority limits</li> <li>• Ensure established claims and settlement authority limits are in line with corporate risk exposure policies</li> <li>• Adjust authority limits to accommodate changing operating contexts.</li> </ul>



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7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to derive criteria for setting up claims authority limits that cater technical complexities and maintain a proper balance of control and autonomy</li><li>• Able to establish claims and settlement authority limits for different claims positions</li><li>• Able to maintain effective claims and settlement authority limits</li><li>• Able to ensure claims and settlement authority limits align with corporate risk exposures and reserve policies.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.

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Claims > Claims Management	
1. Title	Establish procedures and guidelines on handling suspected fraudulent claims
2. Code	105617L6
3. Range	This unit of competency is applicable to those who are responsible for directing the screening and handling of suspected fraudulent claims. It involves establishing and implementing supporting guidelines and procedures, and providing training to relevant units on detecting and handling fraudulent claims.
4. Level	6
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in screening and handling fraudulent claims</p> <ul style="list-style-type: none"> <li>• Well versed corporate claim policies</li> <li>• Comprehend techniques of detecting potential fraudulent claims</li> <li>• Comprehend methods used in dealing with fraudulent claims</li> <li>• Comprehend common fraudulent claims cases in the insurance industry</li> <li>• Comprehend techniques to train staff on screening and handling suspected fraudulent claims</li> </ul> <p>6.2(a) Set up guidelines and procedures on screening and handling suspected fraudulent claims</p> <ul style="list-style-type: none"> <li>• Establish guidelines on screening suspected fraudulent claims</li> <li>• Establish procedures in reporting of suspected fraudulent claims</li> <li>• Establish procedures in handling suspected and confirmed fraudulent claims</li> <li>• Implement screening and handling fraudulent claims guidelines and procedures</li> </ul> <p>6.2(b) Provide training to relevant units</p> <ul style="list-style-type: none"> <li>• Provide training to relevant units in using the guidelines to detect potential fraudulent claims</li> <li>• Provide training to relevant units in following the procedures to handle potential and confirmed fraudulent claims</li> </ul> <p>6.2(c) Evaluate the effectiveness of procedures and guidelines</p> <ul style="list-style-type: none"> <li>• Work with relevant units to review records of suspected and confirmed fraudulent cases</li> <li>• Evaluate the effectiveness of the guidelines and procedures of screening and handling of suspected fraudulent claims from time to time</li> <li>• Adjust guidelines and procedures based on review findings</li> </ul> <p>6.3 Set up effective guidelines and procedures to guide staff members in screening and handling suspected fraudulent claims</p> <ul style="list-style-type: none"> <li>• Develop guidelines that cover possible approaches to tackle suspected and confirmed fraudulent claims</li> <li>• Ensure fraudulent claims handling procedures and guidelines are in line with corporate claims policies</li> <li>• Ensure guidelines and procedures effectively enable screening and handling of suspected fraudulent claims.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to organize screening and handling of fraudulent claims into step-by-step procedures</li><li>• Able to describe screening and handling procedures in writing</li><li>• Able to establish procedures and guidelines on screening suspected fraudulent claims</li><li>• Able to ensure the guidelines and procedures of suspected fraudulent claims screening and handling are in line with corporate claims policies</li><li>• Able to introduce the procedures and guidelines to claims staff.</li></ul>
8. Remarks	This unit of competency is also applicable to general insurers.

**Specification of Competency Standards of the Insurance Industry (Life Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Formulate insurance claims policies
2. Code	105618L6
3. Range	This unit of competency is applicable to those who are responsible for formulating insurance claims policies. It involves analyzing company claims records and profitability, as well as formulating, evaluating and adjusting claims policies.
4. Level	6
5. Credit	6 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in formulating company claims policies</p> <ul style="list-style-type: none"> <li>• Comprehend corporate business development strategies</li> <li>• Comprehend company’s position in the insurance market</li> <li>• Comprehend trends of claims</li> <li>• Comprehend corporate profitability strategies</li> <li>• <b>Master</b> regulatory requirements on reserve ratios</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of claims policies</li> </ul> <p>6.2(a) Formulate corporate claims policies</p> <ul style="list-style-type: none"> <li>• Analyze products of different business lines</li> <li>• Analyze profitability of different business lines</li> <li>• Develop claims policies for different business lines</li> <li>• Present claims policies to relevant units</li> </ul> <p>6.2(b) Review corporate claims policies</p> <ul style="list-style-type: none"> <li>• Evaluate effectiveness of corporate claims policies with respect to company risk exposures and profitability strategies</li> <li>• Adjust corporate claims policies in light of review findings and changing market environment</li> </ul> <p>6.3 Ensure company claims policies support company risk exposures and profitability strategies and comply with relevant regulatory requirements</p> <ul style="list-style-type: none"> <li>• Ensure claims policies are in line with company’s risk exposures and profitability strategies</li> <li>• Ensure claims policies comply with relevant regulatory requirements</li> <li>• Ensure relevant units are well informed about the claims policies.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to formulate overall corporate claims policies and individual claims policies</li> <li>• Able to review and adjust claims policies for different business lines in light of changing market environment</li> <li>• Able to ensure claims policies support company risk exposures and profitability strategies and comply with relevant regulatory requirements.</li> </ul>
8. Remarks	This unit of competency is also applicable to general insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

**Underwriting & Claims**

1. Title	Understand insurance terminologies
2. Code	105458L1
3. Range	This unit of competency is applicable to those who are required to work in any functional areas of the insurance industry. It involves understanding the common terminologies and abbreviations used in the industry, as well as knowing the channels to find out the meanings of terminologies.
4. Level	1
5. Credit	1 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess basic insurance knowledge</p> <ul style="list-style-type: none"> <li>• Understand the concepts of insurance</li> <li>• Understand the significance to use appropriate terminologies in insurance operations</li> </ul> <p>6.2 Understand common terminologies, abbreviations and their meanings used in the industry</p> <ul style="list-style-type: none"> <li>• Understand common terminologies and their abbreviations used in the industry</li> <li>• Understand the conversion of the abbreviations to their English or Chinese full names and their meanings</li> <li>• Know about the channels to find out the proper meanings of terminologies and abbreviations</li> </ul> <p>6.3 Use the correct terminologies to support daily operations</p> <ul style="list-style-type: none"> <li>• Recall the correct terminologies and abbreviations in carrying out daily operations</li> <li>• Explain the meanings of the terminologies in insurance contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to understand common insurance terminologies, abbreviations and respective meanings</li> <li>• Able to use appropriate channels to find out the meanings of insurance terminologies</li> <li>• Able to use appropriate terminologies to support daily operations</li> <li>• Able to explain the meanings of the terminologies in insurance contexts.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers and brokers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

1. Title	Maintain up-to-date customer records to support daily operations
2. Code	105462L2
3. Range	This unit of competency is applicable to those who are carrying out daily operations. It involves maintenance of up-to-date customer records from traditional and digital distribution channels to support day-to-day functions and comply with relevant regulatory requirements and code of practice
4. Level	2
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in customer record management</p> <ul style="list-style-type: none"> <li>• Understand why customer record management is important to an insurer</li> <li>• Know how to operate company’s customer record management system</li> <li>• Well aware of the compliance requirements, e.g. Personal Data (Privacy) Ordinance, on customer record management</li> <li>• Know about insurance terminologies</li> </ul> <p>6.2 Manage customer records from traditional and digital distribution channels</p> <ul style="list-style-type: none"> <li>• Identify key information on customer records</li> <li>• Update, document and classify customer records in a timely and accurate manner according to established workflow including record access authority</li> <li>• Seek advice from superior if there are irregularities, inconsistencies or missing information</li> <li>• Provide relevant customer statistics, e.g. statistics related to specific customer segments, upon requests</li> </ul> <p>6.3 Comply with regulatory requirements and code of practice to handle and maintain customer records</p> <ul style="list-style-type: none"> <li>• Maintain complete and up-to-date customer records</li> <li>• Handle customer records in accordance with regulatory requirements</li> <li>• Ensure consistency of online customer record, policy record and the information in the internal system.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency is:</p> <ul style="list-style-type: none"> <li>• Able to document complete and updated customer records from traditional and digital distribution channels systematically</li> <li>• Able to identify irregular and/or inadequate information in records</li> <li>• Able to summarize and present customer records to facilitate operations</li> <li>• Able to manage customer records in compliance with regulatory requirements.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers and brokers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

**Underwriting**

Underwriting > Risk management	
1. Title	Maintain up-to-date underwriting records
2. Code	105465L2
3. Range	This unit of competency is applicable to those who are responsible for maintaining up-to-date underwriting records <b>for traditional and digital platforms</b> . It involves updating underwriting records from time to time and handling customer records in accordance with regulatory requirements.
4. Level	2
5. Credit	2 (for reference only)
6. Competency	<p><b>Performance Requirements</b></p> <p>6.1 Possess knowledge in managing underwriting records</p> <ul style="list-style-type: none"> <li>• Understand classification of information in underwriting operations</li> <li>• Comprehend company’s risk classification policy</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Able to use company’s underwriting management information system</li> <li>• Well aware of relevant compliance and regulatory requirements in handling customer records</li> </ul> <p>6.2 Maintain underwriting records <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• Keep up-to-date and accurate underwriting records in a timely manner</li> <li>• Handle customer data in accordance with the company procedures and requirements of regulatory bodies</li> <li>• Retrieve correct underwriting records upon requests</li> <li>• Produce specific underwriting statistics and reports to relevant units upon requests</li> <li>• <b>Ensure consistency of online underwriting records, policy record and the information in the internal system.</b></li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to file underwriting records according to company procedures</li> <li>• Able to maintain up-to-date underwriting records <b>for traditional and digital platforms</b></li> <li>• Able to gather relevant underwriting records to produce statistics and reports upon requests.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)  
Unit of Competency**

Underwriting > Underwriting	
1. Title	Process general insurance applications
2. Code	105482L3
3. Range	This unit of competency is applicable to those who are responsible for processing general insurance applications <b>from traditional and digital distribution channels</b> . It involves collection and submission of required information, liaison with underwriting personnel, handling customer enquiries <b>and understanding the business impacts of underwriting performance</b>
4. Level	3
5. Credit	3 (for reference only)
6. Competency	<p><b>Performance Requirements</b></p> <p>6.1 Possess knowledge in general insurance underwriting process</p> <ul style="list-style-type: none"> <li>• Understand information required in underwriting of insurance applications</li> <li>• Understand company’s insurance products</li> <li>• Comprehend company’s most up-to-date premium schedules and acceptance policies</li> <li>• <b>Know about</b> corporate procedures for insurance application processing and relevant compliance and regulatory requirements in handling customer enquiries</li> <li>• <b>Understand traditional and online underwriting process</b></li> <li>• <b>Understand the business impacts of underwriting performance</b></li> </ul> <p>6.2 Process general insurance applications <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Collect relevant information and ensure all information required are submitted with the application forms, including: <ul style="list-style-type: none"> <li>➤ Sum insured, subject matter of insurance and the insured</li> <li>➤ Required supplement documents, e.g., medical reports (if applicable)</li> </ul> </li> <li>• Liaise with <b>insurance intermediaries</b> or customers to request further information and documents if required</li> <li>• Explain underwriting process and standard terms, including excess and exclusions, in an insurance policy upon enquiries</li> <li>• <b>Analyze the information and claims record requested in underwriting of insurance application</b></li> <li>• Direct insurance applications to underwriting personnel</li> <li>• Process insurance applications in accordance with company procedures and relevant regulatory requirements</li> <li>• Handle customer records in accordance with the regulatory requirements</li> <li>• Consistently meeting the company process service standard</li> </ul> <p>6.3 Submit general insurance applications with sufficient information to underwriters</p> <ul style="list-style-type: none"> <li>• Carry out responsible steps in obtaining necessary documents according to company procedures</li> <li>• Submit insurance applications to underwriting personnel with the required information.</li> </ul>



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to determine whether sufficient information has been collected for insurance application processing from traditional and digital distribution channels</li><li>• Able to arrange collection of further information to process insurance applications on need basis</li><li>• Able to carry out responsible steps in processing insurance applications in accordance with company procedures and regulatory requirements</li><li>• Able to submit insurance applications to underwriting personnel with sufficient information in a timely manner.</li></ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Prepare and issue insurance documents
2. Code	105483L3
3. Range	This unit of competency is applicable to those who are responsible for preparing and issuing insurance documents <b>for traditional and digital platforms</b> . It involves gathering relevant documents, validating information on the documents and obtaining approval to issue the documents.
4. Level	3
5. Credit	2 (for reference only)
6. Competency	<p><b>Performance Requirements</b></p> <p>6.1 Possess knowledge in insurance application process</p> <ul style="list-style-type: none"> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend scopes of cover, exclusions and terms of individual policies</li> <li>• Comprehend company procedures on document issuance</li> <li>• <b>Know about</b> full meaning of policy wordings, clauses and warranties, and their applications</li> <li>• <b>Understand electronic policy administration process</b></li> </ul> <p>6.2 Prepare and issue insurance documents <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• Prepare documents such as policies, endorsement, schedules, etc.</li> <li>• Verify that all necessary details and correspondences, e.g. applicable limitations, exclusions and other terms are included</li> <li>• Obtain approval on documents issuance from authorized personnel</li> <li>• Issue documents to responsible personnel upon completion.</li> </ul> <p>6.3 Commit to prepare complete and error-free insurance documents</p> <ul style="list-style-type: none"> <li>• Produce necessary documents with validated information</li> <li>• Issue documents to responsible personnel in accordance with company procedures</li> <li>• <b>Verify policy information to be consistent with data input during online application.</b></li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to retrieve correct customer records for documents preparation</li> <li>• Able to consolidate all necessary correspondence for insurance documents issuance</li> <li>• Able to prepare complete set insurance documents <b>for traditional and digital platforms</b></li> <li>• Able to issue insurance documents to responsible personnel according to company procedures.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Process policy renewal for general insurance
2. Code	105484L3
3. Range	This unit of competency is applicable to insurers who are responsible for processing general insurance applications <b>for traditional and digital platforms</b> . It involves retrieving lists of policies that are due for renewal, checking previous claim records of individual policies, calculating new premiums and arranging renewals with customers.
4. Level	3
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in policy renewal process for general insurance</p> <ul style="list-style-type: none"> <li>• Understand distribution channels of company’s insurance products</li> <li>• Comprehend corporate <b>and individual</b> policy renewal procedures</li> <li>• Comprehend company’s most up-to-date premium schedules and acceptance policies</li> <li>• <b>Know about</b> relevant compliance and regulatory requirements in handling customer records</li> </ul> <p>6.2 Process policy renewal for general insurance <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• Produce list of policies that are due for renewal</li> <li>• Check claims records and apply appropriate discount, loading and up-to-date premiums for general insurance policies</li> <li>• Calculate annual premiums for general insurance policies</li> <li>• Notify customers for renewal of policies timely</li> <li>• Process policy renewal applications and handle customer records in accordance with company procedures and regulatory requirements</li> <li>• <b>Follow up outstanding documents for renewal policy issue</b></li> </ul> <p>6.3 Commit to Process policy renewals for general insurance properly and timely</p> <ul style="list-style-type: none"> <li>• Handle policy renewal in accordance with the company procedures</li> <li>• Handle customer records in accordance with the regulatory requirement</li> <li>• Complete policy renewal process before deadline.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to retrieve policies which are due for renewal</li> <li>• Able to compute appropriate premiums for policies to be renewed</li> <li>• Able to process the policy renewal <b>for traditional and digital platforms</b> in accordance with company procedures and regulatory requirements</li> <li>• Able to complete policy renewal process before deadline.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Approve general insurance applications involving standard risks
2. Code	105509L4
3. Range	This unit of competency is applicable to those who are responsible for carrying out general insurance underwriting <b>from traditional and digital distribution channels</b> . It involves assessment of standard risks in insurance in order to approve individual insurance applications.
4. Level	4
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in risk assessment for general insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s policy on risk classification</li> <li>• Comprehend company’s risk limit</li> <li>• Comprehend company’s underwriting criteria</li> <li>• Able to classify different types of risks</li> <li>• Demonstrate awareness to the concept of risks and the types of risk affecting the underwriting profiles</li> <li>• Demonstrate competency in underwriting guidelines through familiarizing of the underwriting guidelines, procedures and operating system</li> <li>• Understand regulatory requirements in relation to risk discriminations</li> </ul> <p>6.2(a) Assess the risks for general insurance <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Apply company’s underwriting principles</li> <li>• Distinguish between standard and non-standard (i.e. complex) risks</li> <li>• Determine if the insured amounts are within the company’s acceptable risk level</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine if further information is needed for risk assessment</li> <li>• Arrange for further investigation/examination if needed</li> <li>• Determine if a particular risk is acceptable</li> <li>• Determine if excess or exclusions should be imposed</li> </ul> <p>6.2(b) Evaluate general insurance applications <b>from traditional and digital distribution channels</b> based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify that risk assessment results support approval of applications</li> <li>• Seek approval from higher authority when risk exceeds the limit of given authority</li> <li>• Arrange for reinsurance on need basis</li> <li>• Approve insurance applications</li> </ul> <p>6.3 Approve general insurance applications based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Ensure all standard risks involved in the application are assessed</li> <li>• Approve insurance applications with proper premiums.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to identify and assess all risks involved in insurance applications from traditional and digital distribution channels</li><li>• Able to compute proper premiums</li><li>• Able to arrange reinsurance on need basis</li><li>• Able to approve insurance applications according to risk assessment results.</li></ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Calculate general insurance premiums
2. Code	105510L4
3. Range	This unit of competency is applicable to those who are responsible for calculating general insurance premiums. It involves classifying the risks, determining the insurance premiums and providing insurance quotations. It also involves the presetting of standard premium for online insurance applications and setting up standard insurance quotation for digital distribution channel.
4. Level	4
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in risk classifications and premium calculations for general insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s risk exposure philosophy</li> <li>• Comprehend risk classification and acceptance criteria</li> <li>• Comprehend methodologies on premium calculation for different classes of risk</li> <li>• Comprehend corporate premium calculation guidelines</li> <li>• Comprehend features of company’s products and target segments</li> </ul> <p>6.2(a) Classify risks and determine general insurance premiums</p> <ul style="list-style-type: none"> <li>• Calculate premiums on standard risks</li> <li>• Pre-set standard premium for online insurance applications</li> <li>• Calculate amount of loading on non-standard (i.e. complex) risks</li> <li>• Determine loading or discount to offer based on the insured’s risk characteristics</li> <li>• Determine amount of premiums to be added or subtracted for amendments to existing policies</li> </ul> <p>6.2(b) Provide quotations</p> <ul style="list-style-type: none"> <li>• Provide quotations for the risks to be insured within given authority</li> <li>• Set up standard insurance quotation format for digital distribution channel</li> <li>• Seek approval from higher authority when the risks exceed given authority</li> </ul> <p>6.3 Compute proper general insurance premiums</p> <ul style="list-style-type: none"> <li>• Calculate premiums that properly reflect risks involved in insurance applications or existing policies</li> <li>• Provide quotations based on the calculated premiums.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify all risks associated with insurance applications or existing policies</li> <li>• Able to identify other factors that may affect premium calculation and adjust amount of premium accordingly</li> <li>• Able to calculate insurance premiums for the identified risks</li> <li>• Able to pre-set standard premium for online insurance applications</li> <li>• Able to provide quotations based on the calculated premiums</li> <li>• Able to set up standard insurance application format for digital distribution channel</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Assess general insurance applications involving standard risks
2. Code	105552L5
3. Range	This unit of competency is applicable to those who are responsible for carrying out general insurance underwriting. It involves assessment of standard risks in insurance applications from traditional and digital distribution channels in order to decline a particular insurance application.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in risk assessment for general insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s policy on risk classification</li> <li>• Comprehend company’s risk limit</li> <li>• Comprehend company’s underwriting criteria</li> <li>• Able to classify different types of risks</li> <li>• Demonstrate awareness to the concept of risk and the type of risk affecting the underwriting profiles</li> <li>• Demonstrate competency in underwriting guidelines through familiarizing the underwriting guidelines, procedures and operating system</li> <li>• <b>Comprehend</b> regulatory requirements in relation to risk discrimination</li> </ul> <p>6.2(a) Assess the risk for general insurance from traditional and digital distribution channels</p> <ul style="list-style-type: none"> <li>• Apply company’s underwriting principles</li> <li>• Distinguish between standard and non-standard (i.e. complex) risks</li> <li>• Determine if the insured amount is within the company’s acceptable risk level</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine if further information is needed for risk assessment</li> <li>• Arrange for further investigation/examination if needed</li> <li>• Determine if a particular risk is acceptable</li> <li>• Determine if excesses or exclusions should be imposed</li> </ul> <p>6.2(b) Evaluate general insurance applications from traditional and digital distribution channels based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify assessment results</li> <li>• Accept or decline insurance applications</li> <li>• Notify relevant personnel of assessment decisions</li> </ul> <p>6.3 Assess general insurance applications from traditional and digital distribution channels based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Assess all standard risks involved in the application</li> <li>• Decline insurance applications with supporting rationale</li> <li>• Produce prompt notification correspondences to relevant personnel.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to identify and assess all risks involved in insurance applications from traditional and digital distribution channels</li><li>• Able to assess insurance applications according to risk assessment results.</li></ul>
8. Remarks	



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Approve general insurance applications involving non-standard risks
2. Code	105553L5
3. Range	This unit of competency is applicable to those who are responsible for carrying out general insurance underwriting. It involves assessment of non-standard risks (i.e. complex risks) <b>applications from traditional and digital distribution channels</b> so as to approve a particular insurance application.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in non-standard risk (i.e. complex risk) assessment for general insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s policy on risk classification</li> <li>• Comprehend company’s risk limit</li> <li>• Comprehend company’s underwriting criteria on complex risks</li> <li>• Able to classify different types of risks</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Know how to source domain specialists</li> <li>• <b>Comprehend</b> regulatory requirements in relation to risk discrimination</li> </ul> <p>6.2(a) Assess non-standard risks for general insurance <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Apply company’s underwriting philosophy on non-standard risk assessment</li> <li>• Determine if insured amount is within the company’s acceptable risk level</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine the scope of specialist information required</li> <li>• Seek specialists’ advice on need basis</li> <li>• Determine if premium loading is imposed</li> <li>• Determine if <b>underwriting remedies</b> (e.g. <b>restricted cover, sub-limit, excesses or exclusions</b>) should be imposed</li> </ul> <p>6.2(b) Evaluate general insurance applications <b>from traditional and digital distribution channels</b> based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify that risk assessment results support approval of applications</li> <li>• Seek approval from higher authority when risk exceeds the limit of given authority</li> <li>• Arrange for <b>coinsurance</b> or reinsurance on need basis</li> <li>• Approve insurance applications</li> </ul> <p>6.3 Approve <b>traditional and online</b> general insurance applications based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Ensure all non-standard risks involved in the application are assessed</li> <li>• Approve insurance applications with proper premiums.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and assess all non-standard risks, as well as potential correlations amongst the risks, involved in insurance applications from traditional and digital distribution channels</li> <li>• Able to source for specialists' advice to reveal potential risk exposures</li> <li>• Able to compute proper premiums</li> <li>• Able to arrange reinsurance on need basis</li> <li>• Able to approve insurance applications according to risk assessment results.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Decline general insurance applications involving non-standard risks
2. Code	105554L5
3. Range	This unit of competency is applicable to those who are responsible for carrying out general insurance underwriting. It involves assessment of non-standard risks (i.e. complex risks) applications from traditional and digital distribution channels so as to decline a particular insurance application.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.2(a) Possess knowledge in non-standard risk (i.e. complex risk) assessment for general insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s policy on risk classification</li> <li>• Comprehend company’s risk limit</li> <li>• Comprehend company’s underwriting criteria on complex risks</li> <li>• Able to classify different types of risks</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Know how to source domain specialists</li> <li>• <b>Comprehend</b> regulatory requirements in relation to risk discrimination</li> </ul> <p>6.2(a) Assess non-standard risks for general insurance from traditional and digital distribution channels</p> <ul style="list-style-type: none"> <li>• Apply company’s underwriting philosophy on non-standard risk assessment</li> <li>• Determine if insured amount is within the company’s acceptable risk level</li> <li>• Identify any misrepresentations or non-disclosure</li> <li>• Determine the scope of specialist information required</li> <li>• Seek specialists’ advice on need basis</li> </ul> <p>6.2(b) Evaluate general insurance applications from traditional and digital distribution channels based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Verify that assessment results are against approval of applications</li> <li>• Decline insurance applications</li> <li>• Notify relevant personnel of declined applications</li> </ul> <p>6.3 Decline traditional and online insurance applications based on risk assessment results</p> <ul style="list-style-type: none"> <li>• Assess all non-standard risks, and potential correlations among the risks, involved in the applications</li> <li>• Decline insurance applications with supporting rationale</li> <li>• Produce prompt notification correspondences to relevant personnel.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and assess all non-standard risks, as well as potential correlations amongst the risks, involved in insurance applications from traditional and digital distribution channels</li> <li>• Able to source for specialists’ advice to reveal potential risk exposures</li> <li>• Able to decline insurance applications according to risk assessment results.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

8. Remarks	
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**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

1. Title	Develop premium tables for different business lines
2. Code	105555L5
3. Range	This unit of competency is applicable to those who are responsible for developing premium tables for different business lines <b>from traditional and digital distribution channels</b> . It involves analyzing company's competitive position, developing respective premium tables according to company's profitability strategy and risk pricing policies, as well as training relevant staff to apply the tables to support daily work.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in premium schedules development</p> <ul style="list-style-type: none"> <li>• Comprehend company's profitability strategy</li> <li>• Comprehend company's philosophy on risk exposure</li> <li>• Comprehend company's risk pricing policies</li> <li>• Comprehend marketing strategy</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company's cost structure</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2 Develop premium tables for different business lines <b>at traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Analyze company's competitive position in the market</li> <li>• Work with and collect information from claims and marketing departments</li> <li>• Develop premium tables for standard risks</li> <li>• Develop loading schedule for non-standard (i.e. complex) risks</li> <li>• Ensure premium tables follow company's profitability strategy and risk pricing policies</li> <li>• Provide training to staff on premium calculation using company's premium tables</li> </ul> <p>6.3 Develop competitive risk pricing policies and premium tables <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• Produce premium tables that balance competitiveness of premium pricing and company's profitability</li> <li>• Review company's risk pricing policies in light of changing market environment</li> <li>• Adjust premium tables based on review findings.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to analyze relevant records to determine premium pricing strategy</li> <li>• Able to develop premium tables for different business lines <b>from traditional and digital distribution channels</b></li> <li>• Able to adjust premium pricing policies in light of changing market environment.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Maintain up-to-date lists of non-standard risks and exclusions for general insurance
2. Code	105556L5
3. Range	This unit of competency is applicable to those who are responsible for carrying out general insurance underwriting. It involves maintaining up-to-date lists of non-standard risks and exclusions to be applied.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in different types of risks for general insurance</p> <ul style="list-style-type: none"> <li>• Comprehend company’s policies on risk exposure</li> <li>• Be alert to changes in risk trends and emergence of new risks</li> <li>• Able to classify different types of risks</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Comprehend features of company’s products and target segments</li> </ul> <p>6.2(a) Maintain up-to-date lists of non-standard risks and exclusions for general insurance</p> <ul style="list-style-type: none"> <li>• Review existing non-standard risks and exclusions in different lines of business</li> <li>• Analyze impact of existing and new risks on the company’s profitability</li> <li>• Determine if any of the existing exclusions should be removed</li> <li>• Determine if any new exclusions should be imposed</li> </ul> <p>6.2(b) Inform changes in non-standard risks and exclusions to relevant units</p> <ul style="list-style-type: none"> <li>• Explain changes in non-standard risks and exclusions to relevant units</li> <li>• Set up channels to collect feedbacks from staff and customers on the changes</li> <li>• Review lists of non-standard risks and exclusions in response to staff and customer feedbacks as well as changing market environment</li> <li>• Include new risks and exclusions based on review findings</li> </ul> <p>6.3 Ensure lists of non-standard risks and exclusions for general insurance are up-to-date and effectively adopted</p> <ul style="list-style-type: none"> <li>• Ensure lists of non-standard risks and exclusions are up-to-date</li> <li>• Ensure relevant units are well informed about lists of non-standard risks and exclusions.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to evaluate appropriateness of existing lists of non-standard risks and exclusions against operating contexts</li> <li>• Able to update lists of non-standard risks and exclusions</li> <li>• Able to explain changes in the revised lists of non-standard risks and exclusions to relevant staff members.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Manage underwriting operations
2. Code	105557L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring company's <b>traditional and digital</b> underwriting operations. It involves establishing underwriting procedures, training relevant staff on the procedures, monitoring operations to prevent violations and solving day-to-day operational issues.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><b>Performance Requirements</b></p> <p>6.1 Possess knowledge in company's underwriting operations</p> <ul style="list-style-type: none"> <li>• Comprehend the flow of <b>traditional and digital</b> underwriting operations</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend relevant laws and regulations</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> <li>• <b>Comprehend</b> all aspects of regulatory requirements</li> </ul> <p>6.2(a) Establish governing mechanisms <b>for traditional and digital platforms</b> to guide company's underwriting operations</p> <ul style="list-style-type: none"> <li>• Provide training and guidance to relevant staff on corporate underwriting philosophy and procedures</li> <li>• Set up mechanism to prevent breaching of authority limits</li> <li>• Set up mechanism to prevent breaching of underwriting procedures, laws and regulations</li> </ul> <p>6.2(b) Oversee <b>traditional and digital</b> underwriting operations</p> <ul style="list-style-type: none"> <li>• Monitor execution of underwriting procedures</li> <li>• Resolve problems that arise in the day-to-day operation</li> <li>• Arrange data collection on underwriting operations</li> <li>• Communicate regularly with relevant units to review underwriting operations</li> <li>• Assess effectiveness and efficiencies of existing underwriting operations</li> <li>• Evaluate effectiveness of existing reporting lines</li> <li>• Analyze underwriting operations and identify areas to be improved</li> <li>• Improve underwriting procedures based on analysis results</li> </ul> <p>6.3 Manage <b>traditional and digital</b> underwriting operations</p> <ul style="list-style-type: none"> <li>• Master the flow and requirements of underwriting operations</li> <li>• Manage underwriting operations to achieve company's underwriting objectives</li> <li>• Ensure underwriting operations comply with company's underwriting manuals</li> <li>• Ensure underwriting operations comply with relevant laws and regulations.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify areas of <b>traditional and digital underwriting operations</b> that require governing mechanisms</li> <li>• Able to set up effective governing mechanisms</li> </ul> <p>Able to evaluate effectiveness of underwriting operations and improve accordingly</p> <ul style="list-style-type: none"> <li>• Able to manage underwriting operations to comply with corporate underwriting procedures, relevant laws and regulations.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting> Underwriting	
1. Title	Evaluate quality of insurance underwriting operations against service pledges
2. Code	105558L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring service quality of <b>traditional and digital</b> underwriting operations. It involves collecting data to analyze quality standards, identifying areas to be improved and adjusting quality standards as and when necessary.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in company’s underwriting operations</p> <ul style="list-style-type: none"> <li>• Comprehend company’s service pledge of underwriting operation</li> <li>• Comprehend company’s underwriting operations</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Benchmark market norms in underwriting services</li> </ul> <p>6.2 Evaluate and improve <b>traditional and digital</b> underwriting service quality</p> <ul style="list-style-type: none"> <li>• Arrange record collection on company’s provision of underwriting services</li> <li>• Set up channels to collect feedbacks from customers on company’s underwriting services</li> <li>• Analyze records to see if the current service is up to the company’s service pledge</li> <li>• Identify critical success factors and areas to be improved</li> <li>• Adjust company’s underwriting service quality standards as and when necessary</li> </ul> <p>6.3 Improve service quality of <b>traditional and digital</b> underwriting operations continuously</p> <ul style="list-style-type: none"> <li>• Ensure quality of underwriting operations meet service pledges at all times</li> <li>• Carry out necessary corrective actions to improve operations on need basis.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify records related to <b>traditional and digital</b> underwriting operations that reveal service quality</li> <li>• Able to analyze collected records to evaluate the service quality of underwriting operations</li> <li>• Able to identify areas of improvement and carry out necessary corrective actions.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Develop underwriting manuals
2. Code	105559L5
3. Range	This unit of competency is applicable to those who are responsible for developing underwriting manuals for new business lines. It involves designing the flow of underwriting process, identifying the involvement of different positions in the flow, working with claims department to develop the manual contents and to distribute the new manual.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in underwriting procedures</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategy</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend company’s risk appetite</li> <li>• Comprehend the roles of different positions in the underwriting process</li> <li>• Comprehend company’s philosophy on risk acceptance and profitability strategy</li> <li>• Be aware of changes in insurance market structure</li> <li>• Comprehend relevant laws and regulations</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2(a) Establish underwriting procedure manuals</p> <ul style="list-style-type: none"> <li>• Design the flow of the underwriting processes</li> <li>• Estimate manpower and roles required to support the underwriting process</li> <li>• Determine authority limits of different units</li> <li>• Work with claims and actuary departments to develop underwriting procedure manuals</li> </ul> <p>6.2(b) Disseminate new underwriting procedure manuals</p> <ul style="list-style-type: none"> <li>• Explain manuals to relevant units</li> <li>• Provide guidance to relevant staff on using the manuals</li> <li>• Set up channels to obtain feedbacks on the manuals</li> </ul> <p>6.2(c) Maintain up-to-date underwriting procedure manuals</p> <ul style="list-style-type: none"> <li>• Review existing underwriting process based on staff feedbacks, changing business environment, and new regulatory requirements</li> <li>• Identify and dispose outdated procedures</li> <li>• Update underwriting procedure manuals accordingly</li> </ul> <p>6.3 Develop underwriting procedure manuals to direct underwriting operations in systematic manner</p> <ul style="list-style-type: none"> <li>• Ensure each procedure manual covers all relevant underwriting operations in each business line</li> <li>• Ensure procedure manuals lay out each step of underwriting procedures</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

	<p>precisely</p> <ul style="list-style-type: none"> <li>• Update procedure manuals to cater the changing operating contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to organize underwriting operations in step-by-step procedures</li> <li>• Able to describe underwriting procedures precisely in writing</li> <li>• Able to develop underwriting procedure manuals</li> <li>• Able to train relevant staff members to use the manuals</li> <li>• Able to update underwriting procedure manuals in light of changing operating contexts.</li> </ul>
8. Remarks	<p>This unit of competency is also applicable to life insurers.</p>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Risk management	
1. Title	Produce risk exposure reports
2. Code	105560L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring company's risk exposure. It involves analyzing underwriting records and claims records, evaluating respective risk exposures of the company and producing relevant reports accordingly.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in company's risk exposure policy</p> <ul style="list-style-type: none"> <li>• Comprehend company's policy on risk exposure</li> <li>• Comprehend features of company's products and target segments</li> <li>• Be alert to types of risks that the company is exposed to</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2(a) Analyze risk exposure</p> <ul style="list-style-type: none"> <li>• Analyze underwriting records and claims records</li> <li>• Evaluate risk exposure of different business lines</li> <li>• Assess aggregated risk exposure against risk exposure policies</li> </ul> <p>6.2(b) Provide risk exposure monitoring reports</p> <ul style="list-style-type: none"> <li>• Present risk exposure reports to relevant department heads</li> <li>• Provide recommendations on whether current risk exposures should be expanded or contracted based on monitoring results</li> </ul> <p>6.3 Produce risk export reports to monitor risk exposures of the company</p> <ul style="list-style-type: none"> <li>• Analyze relevant details extracted from underwriting records and claims records to determine current level of risk exposure of the company</li> <li>• Describe company's current level of risk exposures in operation contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and analyze indicators of company's risk exposures from underwriting records and claims records</li> <li>• Able to produce risk exposure reports based on analysis results</li> <li>• Able to describe company's current level of risk exposures</li> <li>• Able to provide recommendations on whether current risk exposures should be expanded or contracted based on monitoring results.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Risk management	
1. Title	Control risk exposures
2. Code	105561L5
3. Range	This unit of competency is applicable to those who are responsible for controlling risk exposures of the company. It involves continuous monitoring of company's aggregated risks, rectifying operations to control risks within limits and managing risks in accordance with company's risk exposure policies and regulatory requirements.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in controlling risk exposures</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategy</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company's risk exposure policies</li> <li>• Recognize aggregated risks of individual business lines</li> <li>• <b>Comprehend</b> regulatory requirements such as reserve, liquidity and reinsurance</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2(a) Control risk exposures</p> <ul style="list-style-type: none"> <li>• Establish alert system to monitor different levels of aggregated risk exposures</li> <li>• Maintain up-to-date records on aggregated risks</li> <li>• Provide solutions to control aggregated risks within risk limits</li> <li>• Arrange reinsurance according to risk exposure policies</li> <li>• Manage risks in accordance with company's risk exposure policies and regulatory requirements</li> </ul> <p>6.2(b) Provide recommendations on risk exposure policies</p> <ul style="list-style-type: none"> <li>• Review risk management effectiveness based on risk control records</li> <li>• Provide recommendations on risk exposure policies in light of review findings and changing operating environment.</li> </ul> <p>6.3 Manage risk exposures of company to comply with company's policies and regulatory requirements</p> <ul style="list-style-type: none"> <li>• Establish preventive measures in relevant areas of underwriting operations</li> <li>• Ensure company's risk exposures are within limits set forth by regulatory bodies and company's policies</li> <li>• Carry out remedial actions to reduce risk exposures.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify areas of underwriting operations that are risk vulnerable</li> <li>• Able to set up preventive measures to control company's risk exposures</li> <li>• Able to retrieve relevant records from underwriting operations to reveal current levels of aggregated risks</li> <li>• Able to carry out remedial actions to reduce risk exposures.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Risk Management	
1. Title	Provide risk assessment training
2. Code	105562L5
3. Range	This unit of competency is applicable to those who are responsible for providing risk assessment training to relevant staff members. It involves analyzing risks involved in different business lines, evaluating risk assessment training needs, designing and delivering relevant training, as well as constant updating staff on risk trends.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in risk appraisal</p> <ul style="list-style-type: none"> <li>• Comprehend types of risks that company is exposed to</li> <li>• Comprehend company’s risk assessment guidelines</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend company’s policies on risk exposures</li> <li>• Know about training management</li> </ul> <p>6.2(a) Provide risk assessment training</p> <ul style="list-style-type: none"> <li>• Collect risk records in different business lines</li> <li>• Analyze how identified risks affect company’s profitability</li> <li>• Identify needs to equip staff members with risk assessment techniques</li> <li>• Design training programmes to train underwriting staff on risk assessment</li> <li>• Train staff on assessing standard and non-standard risks</li> <li>• Arrange external specialists to deliver training on need basis</li> </ul> <p>6.2(b) Update staff members on risk trends regularly</p> <ul style="list-style-type: none"> <li>• Identify changes in trend of risks in changing operating environment</li> <li>• Set up channels to update staff members on changes in risk trends</li> <li>• Set up channels for staff members to report irregular types of risks</li> </ul> <p>6.3 Deliver effective training to relevant staff members</p> <ul style="list-style-type: none"> <li>• Design effective risk assessment training programmes</li> <li>• Ensure staff members comprehend risk assessment techniques</li> <li>• Work with relevant supervisors to ensure relevant staff members are able to apply assessment techniques to support underwriting operations effectively.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify relevant risk assessment skills required in the risk assessment process</li> <li>• Able to identify the discrepancies between required and current skills of staff members</li> <li>• Able to design risk assessment training programmes with clear training objectives and dedicated contents</li> <li>• Able to train staff members on risk assessment</li> <li>• Able to arrange external specialists to deliver assessment training on need basis</li> <li>• Able to ensure staff members are able to apply risk assessment techniques</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

	effectively.
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Risk Management	
1. Title	Manage risk assessment activities
2. Code	105563L5
3. Range	This unit of competency is applicable to those who are responsible for managing risk assessment activities of individual business lines. It involves establishing monitoring procedures, collecting records to evaluate risk assessment activities, rectifying non-compliance situations and producing reports on company's risk assessment activities.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in monitoring risk appraisal activities</p> <ul style="list-style-type: none"> <li>• Comprehend company's risk assessment guidelines</li> <li>• Comprehend company's philosophy on risk exposures</li> <li>• Comprehend features of company's products and target segments</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> <li>• Comprehend signs of insurance frauds</li> </ul> <p>6.2(a) Monitor risk assessment activities</p> <ul style="list-style-type: none"> <li>• Establish procedures to monitor risk assessment activities</li> <li>• Collect records to review risk assessment activities</li> <li>• Identify breaching of risk assessment guidelines</li> <li>• Provide solutions to rectify non-compliance situations</li> <li>• Arrange risk assessment training on need basis</li> <li>• Provide reports on monitoring results</li> </ul> <p>6.2(b) Provide recommendations company's risk assessment guidelines</p> <ul style="list-style-type: none"> <li>• Review effectiveness and efficiencies of risk assessment guidelines</li> <li>• Provide recommendations on risk assessment guidelines in light of review findings and changing operating environment.</li> </ul> <p>6.3 Manage risk assessment activities effectively</p> <ul style="list-style-type: none"> <li>• Develop effective governing mechanisms to monitor all risk assessment activities in company</li> <li>• Ensure risk assessment activities adhere to company's risk assessment guidelines.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify areas of operations related to risk assessment that require governing mechanisms</li> <li>• Able to identify indicators of risk assessment effectiveness from underwriting records</li> <li>• Able to manage risk assessment activities based upon company's risk assessment guidelines</li> <li>• Able to provide recommendations on risk assessment guidelines in light of changing operating environment.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Risk Management	
1. Title	Establish risk assessment guidelines
2. Code	105564L5
3. Range	This unit of competency is applicable to those who are responsible for establishing risk appraisal guidelines for individual business lines. It involves setting up guidelines respective systems for fraud identifications and assessment of different risks, as well as introducing the guidelines to relevant units.
4. Level	6
5. Credit	6 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in natures of different risks</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategy</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend perils and hazards in different business lines</li> <li>• Comprehend frequency and severity of different risks</li> <li>• Possess knowledge in identifying insurance frauds</li> <li>• Comprehend company’s policies on risk exposures and profitability</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2(a) Develop risk assessment guidelines</p> <ul style="list-style-type: none"> <li>• Establish systems of identifying frauds</li> <li>• Establish risk assessment guidelines for standard and non-standard risks</li> <li>• Establish overall risk assessment guidelines</li> <li>• Explain risk assessment guidelines to relevant units</li> <li>• Apply risk assessment guidelines to underwriting operations</li> <li>• Provide channels to obtain feedbacks from business lines</li> </ul> <p>6.2(b) Review risk assessment guidelines</p> <ul style="list-style-type: none"> <li>• Review risk assessment guidelines based on collected feedbacks and changes in operating environment</li> <li>• Fine tune risk assessment guidelines based on review findings.</li> </ul> <p>6.3 Ensure risk assessment guidelines effectively support company’s control of risk exposures</p> <ul style="list-style-type: none"> <li>• Develop risk assessment guidelines that provide clear instructions on how to reveal and assess the risks involved in insurance applications</li> <li>• Ensure relevant units are well informed about risk assessment guidelines</li> <li>• Ensure risk assessment activities undertaken by relevant staff members facilitate effective control of company’s risk exposures.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify areas of risk assessment activities which are vulnerable to frauds</li> <li>• Able to describe risk assessment criteria in writing</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

	<ul style="list-style-type: none"><li>• Able to establish risk assessment guidelines</li><li>• Able to explain risk assessment guidelines in operation contexts</li><li>• Able to fine tune risk appraisal guidelines in light of changing operating environment.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Reinsurance, Coinsurance and Fronting arrangements	
1. Title	Implement <b>coinsurance, reinsurance and fronting arrangements</b>
2. Code	105565L5
3. Range	This unit of competency is applicable to those who are responsible for implementing reinsurance, <b>coinsurance and fronting arrangements</b> . It involves carrying various reinsurance, <b>coinsurance and fronting arrangements</b> to support the <b>relevant</b> policies, and ensuring the arrangements <b>comply</b> with regulatory requirements.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in <b>coinsurance, reinsurance and fronting arrangements</b></p> <ul style="list-style-type: none"> <li>• Identify needs for <b>coinsurance, reinsurance and fronting arrangements</b></li> <li>• Comprehend types of <b>coinsurance, reinsurance and fronting arrangements</b> and their functions</li> <li>• Comprehend company's <b>coinsurance, reinsurance and fronting arrangements</b></li> <li>• Comprehend features of company's products and target segments</li> <li>• Be alert to frequencies and severity of risks</li> <li>• <b>Comprehend</b> regulatory requirements on reinsurance and solvency</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2(a) Implement <b>coinsurance, reinsurance and fronting arrangements</b></p> <ul style="list-style-type: none"> <li>• Determine types and amounts of treaty reinsurance</li> <li>• Determine types and amounts of facultative reinsurance</li> <li>• <b>Determine types and amounts of coinsurance and fronting arrangements</b></li> <li>• Negotiate with <b>coinsurance, reinsurance and fronting partners</b></li> <li>• Monitor company's portfolios to ensure adequacy of reinsurance against regulatory requirements</li> </ul> <p>6.2(b) Monitor reinsurance activities</p> <ul style="list-style-type: none"> <li>• Collect records on reinsurance activities in individual business lines</li> <li>• Analyze reinsurance effectiveness in individual business lines</li> <li>• Identify breaching of reinsurance guidelines and follow up with remedial solutions</li> <li>• Produce reports on monitoring results</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to implement reinsurance, <b>coinsurance and fronting arrangements</b> effectively</li> <li>• Able to ensure reinsurance, <b>coinsurance and fronting arrangements</b> comply with company's policies and regulatory requirements.</li> </ul>
8. Remarks	<b>This unit of competency is also applicable to life insurers.</b>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Reinsurance, Coinsurance and Fronting arrangements	
1. Title	Manage <b>coinsurance</b> , reinsurance and fronting activities
2. Code	105566L5
3. Range	This unit of competency is applicable to those who are responsible for monitoring reinsurance, <b>coinsurance and fronting arrangements</b> of individual business lines. It involves collecting records on company's reinsurance activities, evaluating reinsurance statuses and identifying non-compliance incidents.
4. Level	5
5. Credit	6 (for reference only)
6. Competency	<p><b>Performance Requirements</b></p> <p>6.1 Possess knowledge in <b>coinsurance</b>, reinsurance and fronting management</p> <ul style="list-style-type: none"> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company's <b>coinsurance, reinsurance and fronting arrangements</b></li> <li>• Apply methods in monitoring <b>coinsurance, reinsurance and fronting activities</b></li> <li>• Recognize company's policies on risk exposures and profitability</li> <li>• <b>Comprehend</b> regulatory requirements on reinsurance and solvency</li> <li>• Be alert to potential correlations amongst different types of risks</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2 Manage <b>coinsurance</b>, reinsurance and fronting activities</p> <ul style="list-style-type: none"> <li>• Determine types and amounts of treaty reinsurance</li> <li>• Determine types and amounts of facultative reinsurance</li> <li>• <b>Determine types and amounts of coinsurance and fronting arrangements</b></li> <li>• Negotiate with <b>coinsurance, reinsurance and fronting partners</b></li> <li>• Monitor company's portfolios to ensure adequacy of reinsurance against regulatory requirements</li> <li>• Collect records on reinsurance activities in individual business lines</li> <li>• Analyze reinsurance effectiveness in individual business lines</li> <li>• Identify breaching of reinsurance guidelines and follow up with remedial solutions</li> <li>• Produce reports on monitoring results</li> </ul> <p>6.3 Manage <b>coinsurance</b>, reinsurance and fronting activities effectively</p> <ul style="list-style-type: none"> <li>• Apply <b>coinsurance, reinsurance and fronting policies</b> to guide the arrangement of <b>relevant activities</b></li> <li>• Provide accurate details on company's latest <b>coinsurance, reinsurance and fronting activities</b></li> <li>• Ensure <b>coinsurance, reinsurance and fronting arrangements</b> are carried out in accordance with company's reinsurance policies and regulatory requirements.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify indicators of compliance of <b>coinsurance, reinsurance and fronting arrangements</b> against <b>relevant policies</b></li> <li>• Able to negotiate with <b>coinsurance, reinsurance and fronting</b> partners to derive competitive reinsurance arrangement</li> <li>• Able to monitor <b>coinsurance, reinsurance and fronting</b> activities effectively</li> <li>• Able to provide accurate details on <b>coinsurance, reinsurance and fronting</b> status of the company from time to time.</li> </ul>
8. Remarks	<p><del>This unit of competency is also applicable to life insurers.</del></p>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Establish risk premium tables and policies for general insurance
2. Code	105609L6
3. Range	This unit of competency is applicable to those who are responsible for establishing corporate risk premium tables and policies for general insurance. It involves analyzing various factors affecting risk pricing, evaluating these factors against corporate profitability strategies, developing premium tables and policies for different business lines, as well as training relevant staff to apply the tables to support daily work.
4. Level	6
5. Credit	5 (for reference only)
	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in general insurance underwriting</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend factors that can affect pricing decision</li> <li>• Comprehend corporate profitability strategies and cost structure</li> <li>• Able to classify different types of risks</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Know about actuarial pricing tools</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> <li>• Master statistical methods on risk pricing</li> </ul> <p>6.2(a) Develop risk premium tables and policies for general insurance</p> <ul style="list-style-type: none"> <li>• Analyze factors which can affect pricing of risks</li> <li>• Evaluate impact of changes in pricing factors on the company's profitability</li> <li>• Forecast possible impact of price changes on business volume</li> <li>• Establish premium policies for different business lines</li> <li>• Develop premium tables for standard risks</li> <li>• Develop loading schedule for non-standard (i.e. complex) risks</li> </ul> <p>6.2(b) Introduce premium tables and policies for general insurance</p> <ul style="list-style-type: none"> <li>• Introduce premium tables and policies to relevant units</li> <li>• Provide training to relevant staff on developing fee schedule and calculation of premiums using premium tables</li> <li>• Set up channels to collect feedbacks from intermediaries and various channels on tables and policies</li> <li>• Review tables and policies in light of feedbacks from intermediaries and various channels and changing market environment</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

	<p>6.3 Ensure risk premium tables and policies for general insurance support corporate profitability strategies</p> <ul style="list-style-type: none"> <li>• Produce premium tables and policies that provide clear guidelines on risk pricing for different products</li> <li>• Ensure relevant units are well informed about risk premium tables and policies</li> <li>• Adjust corporate risk pricing policies in light of changing operating contexts.</li> </ul>
<p>7. Assessment Criteria</p>	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and analyze factors which affect risk pricing</li> <li>• Able to assess impact of differing risk pricing levels on business volumes</li> <li>• Able to develop risk premium tables and policies for different business lines</li> <li>• Able to introduce premium tables and policies to relevant units in operation contexts.</li> </ul>
<p>8. Remarks</p>	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Establish insurance underwriting authority limits
2. Code	105610L6
3. Range	This unit of competency is applicable to those who are responsible for establishing underwriting authority limits for different business lines. It involves analyzing proper authority limits required to support corporate underwriting procedures, setting up the authority limits and introducing the limits to relevant units.
4. Level	6
5. Credit	4 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing underwriting authority limits</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend underwriting procedures</li> <li>• Comprehend company’s policies on risk exposures</li> <li>• Comprehend nature of risk in different business lines</li> <li>• Comprehend business structure of the company</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> </ul> <p>6.2(a) Establish underwriting limits</p> <ul style="list-style-type: none"> <li>• Analyze requirements of authority limits on risk exposures based on underwriting procedures</li> <li>• Set up authority limits for different underwriting positions</li> <li>• Establish procedures of obtaining higher level authorities</li> <li>• Introduce authority limits to relevant units</li> <li>• Provide training to relevant staff on applying established limits in underwriting operations</li> </ul> <p>6.2(b) Maintain effective authority limits</p> <ul style="list-style-type: none"> <li>• Review effectiveness of authority limits in underwriting operations in light of changing operating environment</li> <li>• Update authority limits in light of review findings</li> <li>• Ensure underwriting authority limits align with corporate risk exposure policies</li> <li>• Develop authority limits that effectively classify underwriting procedures according to the levels of risks involved</li> <li>• Ensure authority limits effectively implement corporate risk exposure policies</li> <li>• Ensure relevant units are well informed about authority limits.</li> </ul>



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to derive the criteria for underwriting authority limits based on corporate risk exposure policies and underwriting procedures</li><li>• Able to design levels of authority limits according to the levels of risk exposures</li><li>• Able to establish authority limits for different business lines</li><li>• Able to maintain effective authority limits in underwriting operations in light of changing operating environment.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Establish underwriting policies
2. Code	105611L6
3. Range	This unit of competency is applicable to those who are responsible for establishing corporate underwriting policies. It involves analyzing various factors affecting corporate underwriting operations, developing corporate underwriting policies and introducing the policies to relevant units.
4. Level	6
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing underwriting policies</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company's underwriting risk appetite</li> <li>• Comprehend company's profitability strategies</li> <li>• Comprehend company's business structure</li> <li>• Comprehend corporate marketing strategies</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> </ul> <p>6.2(a) Establish underwriting policies</p> <ul style="list-style-type: none"> <li>• Analyze risk exposures of the company</li> <li>• Analyze previous claims records and forecast future claims trends</li> <li>• Analyze company's competitive position in the market</li> <li>• Develop underwriting policies</li> <li>• Introduce underwriting policies to relevant units</li> <li>• Set up channel to collect feedbacks from staff on underwriting policies</li> </ul> <p>6.2(b) Review corporate underwriting policies</p> <ul style="list-style-type: none"> <li>• Review corporate underwriting policies with respect to staff feedbacks and changing operating contexts</li> <li>• Improve underwriting policies in light of the changing operating environment</li> </ul> <p>6.3 Develop effective underwriting policies</p> <ul style="list-style-type: none"> <li>• Develop policies that provide clear guidelines for underwriting operations</li> <li>• Ensure underwriting policies are well understood by relevant units</li> <li>• Ensure implementation of underwriting policies achieve company's underwriting objectives</li> <li>• Adjust underwriting policies to accommodate changing operating contexts.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to identify and analyze factors which affect the formulation of underwriting policies</li><li>• Able to establish underwriting policies</li><li>• Able to introduce underwriting policies to relevant units in operation contexts</li><li>• Able to improve underwriting policies in light of the changing market environment.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Risk management	
1. Title	Establish risk exposure policies
2. Code	105612L6
3. Range	This unit of competency is applicable to those who are responsible for establishing risk exposure policies and guidelines for different business lines. It involves analyzing risk exposures of different business lines, identifying resources required to manage risks, developing respective policies and introducing the policies to relevant units.
4. Level	6
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing policies and guidelines for different business lines</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend risk exposures of individual business lines</li> <li>• <b>Master</b> regulatory requirements on risk exposures, reserves, liquidity and solvency</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> </ul> <p>6.2(a) Establish risk exposure policies</p> <ul style="list-style-type: none"> <li>• Analyze potential risk exposures of different business lines</li> <li>• Identify capacity available for risks management activities in different business</li> <li>• Develop risk exposure policies for different business lines in accordance with regulatory requirements on reserves, liquidity and solvency</li> <li>• Introduce risk exposure policies to different business lines</li> <li>• Set up channels to obtain feedbacks from staff on risk exposure policies</li> </ul> <p>6.2(b) Review and adjust risk exposure policies</p> <ul style="list-style-type: none"> <li>• Review risk exposure policies in light of staff feedbacks, changing regulatory requirements and operating environment</li> <li>• Adjust risk exposure policies based on review findings</li> </ul> <p>6.3 Develop effective risk exposure policies</p> <ul style="list-style-type: none"> <li>• Develop risk exposure policies that provide clear guidelines for the implementation of risk management functions</li> <li>• Allocate appropriate resources to support risk management activities</li> <li>• Fine-tune risk exposure policies to accommodate staff feedbacks and changing operating contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify risk vulnerable areas in the operations of different business lines</li> <li>• Able to establish risk exposure policies for different business lines</li> </ul>

## Specification of Competency Standards of the Insurance Industry (General Insurance)

### Unit of Competency

	Able to introduce risk exposure policies to different business lines in operation contexts <ul style="list-style-type: none"><li>• Able to review and adjust risk exposure policies in light of staff feedbacks, changing regulatory requirements and operating environment.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Reinsurance, Coinsurance and Fronting arrangements	
1. Title	Establish <b>coinsurance</b> , reinsurance and <b>fronting insurance</b> policies
2. Code	105613L6
3. Range	This unit of competency is applicable to those who are responsible for establishing <b>coinsurance</b> , reinsurance and <b>fronting</b> policies. It involves designing <b>coinsurance</b> , reinsurance and <b>fronting</b> arrangements for different business lines, developing respective policies, introducing the policies and updating the policies to cope with business environment.
4. Level	6
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge of risk management in insurance market</p> <ul style="list-style-type: none"> <li>• Knowledgeable about insurance and reinsurance market</li> <li>• Understand types of <b>coinsurance</b>, reinsurance and <b>fronting insurance</b> and their functions</li> <li>• Be alert to frequencies and severities of risks</li> <li>• Apply technical methods to evaluate risks</li> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company's products and target segments</li> <li>• Comprehend company policies on risk exposures, liquidity and profitability</li> <li>• <b>Master</b> regulatory requirements on reinsurance and solvency</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> </ul> <p>6.2(a) Develop <b>coinsurance</b>, reinsurance and <b>fronting insurance</b> policies</p> <ul style="list-style-type: none"> <li>• Identify objectives of reinsurance arrangements from risk exposure policies</li> <li>• Determine retention and ceding proportions of individual business lines</li> <li>• Determine reinsurance arrangements for non-standard risks</li> <li>• Establish corporate reinsurance criteria in accordance with regulatory requirements</li> <li>• Develop <b>coinsurance</b>, reinsurance and <b>fronting insurance</b> policies</li> <li>• Introduce reinsurance policies to relevant units and department heads</li> <li>• Set up channels to collect feedbacks from staff on <b>coinsurance</b>, reinsurance policies and <b>fronting insurance</b></li> </ul> <p>6.2(b) Review and fine-tune <b>coinsurance</b>, reinsurance and <b>fronting insurance</b> policies</p> <ul style="list-style-type: none"> <li>• Review effectiveness and efficiencies of <b>coinsurance</b>, reinsurance and <b>fronting insurance</b> policies in light of collected feedbacks and changing operating environment</li> <li>• Fine tune <b>coinsurance</b>, reinsurance and <b>fronting insurance</b> policies based on review findings</li> </ul>

## Specification of Competency Standards of the Insurance Industry (General Insurance)

### Unit of Competency

	<p>6.3 Develop effective <b>coinsurance, reinsurance and fronting insurance</b> policies to guide the arrangement of <b>relevant</b> activities</p> <ul style="list-style-type: none"> <li>• Develop reinsurance policies that provide clear guidelines on arrangement of reinsurance activities</li> <li>• Ensure relevant units are well informed about reinsurance policies</li> <li>• Adjust reinsurance policies to accommodate changing operating contexts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify and analyze factors affecting <b>coinsurance, reinsurance and fronting</b> arrangements</li> <li>• Able to develop <b>coinsurance, reinsurance and fronting</b> objectives from corporate risk exposure policies</li> <li>• Able to establish <b>coinsurance, reinsurance and fronting</b> policies for individual business lines</li> <li>• Able to introduce <b>coinsurance, reinsurance and fronting</b> policies to relevant units and department heads in operation contexts</li> <li>• Able to adjust <b>coinsurance, reinsurance and fronting</b> policies in light of staff feedbacks and changing operating environment.</li> </ul>
8. Remarks	<p><b>This unit of competency is also applicable to life insurers.</b></p>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Underwriting > Underwriting	
1. Title	Establish profitability strategies for different business lines
2. Code	105641L7
3. Range	This unit of competency is applicable to those who are responsible for establishing profitability strategies for different business lines. It involves analyzing insurance market and profit potentials for different business lines, as well as developing strategies and introducing the strategies to relevant units.
4. Level	7
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing profitability strategies for different business lines</p> <ul style="list-style-type: none"> <li>• Comprehend corporate development strategies</li> <li>• Comprehend features of company’s products and target segments</li> <li>• Comprehend operating contexts of different business lines</li> <li>• Identify trends of claims of different business lines</li> <li>• <b>Master</b> the regulatory requirements on reserves and solvency</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Comprehend the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of underwriting policies</li> </ul> <p>6.2(a) Establish profitability strategies</p> <ul style="list-style-type: none"> <li>• Analyze insurance market to determine opportunities and threats</li> <li>• Analyze profit potentials for different business lines</li> <li>• Evaluate company’s financial strengths</li> <li>• Develop profitability strategies for different business lines</li> <li>• Introduce profitability strategies to relevant units</li> </ul> <p>6.2(b) Adjust profitability strategies</p> <ul style="list-style-type: none"> <li>• Review effectiveness of the profitability strategies with respect to company’s operations</li> <li>• Adjust profitability strategies for different business lines in light of review findings, changing market environment and regulatory requirements</li> </ul> <p>6.3 Ensure profitability strategies effectively guide underwriting operations</p> <ul style="list-style-type: none"> <li>• Develop profitability strategies that provide clear principles for the development of underwriting policies and operations</li> <li>• Ensure relevant units are well informed about the profitability strategies</li> <li>• Ensure implementation of profitability strategies by different units effectively achieve company’s profit targets</li> <li>• Adjust profitability strategies to accommodate changing operating contexts.</li> </ul>



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to identify and analyze factors which affect the formulation of profitability strategies</li><li>• Able to establish profitability strategies for different business lines</li><li>• Able to introduce profitability strategies in operation contexts</li><li>• Able to adjust profitability strategies for different business lines in light of changing market environment.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**  
**Claims**

Claims > Claims Management	
1. Title	Maintain up-to-date claims records
2. Code	105466L2
3. Range	This unit of competency is applicable to those who are responsible for <b>maintaining insurance claims records for traditional and digital platforms</b> It involves claims classification, data input and data maintenance.
4. Level	2
5. Credit	2 (for reference only)
6. Competency	<p><b>Performance Requirements</b></p> <p>6.1 Possess knowledge in maintain claims records</p> <ul style="list-style-type: none"> <li>• Understand company’s claims policies, procedures, guidelines, <b>settlement authority level and work flow</b></li> <li>• Understand company’s risk classification policy</li> <li>• Apply methods of classifying data in claims operations</li> <li>• Able to use company’s claims management information system</li> <li>• Well aware of relevant compliance and regulatory requirements in handling customer records</li> <li>• <b>Understand General Data Protection and how this impacts handling of customer records</b></li> <li>• <b>Understand the importance of data integrity for data analysis</b></li> </ul> <p>6.2 Maintain insurance claims records <b>for traditional and digital platforms</b></p> <ul style="list-style-type: none"> <li>• <b>Identify and classify</b> claims data according to company procedures and guidelines</li> <li>• Update claims records upon requests <b>in a timely and accurate manner</b></li> <li>• Produce claims statistics and reports to relevant units upon requests.</li> <li>• <b>Ensure consistency of digital claims records, policy record and the information in the internal system</b></li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to file claims records <b>from traditional and digital platforms</b> according to company procedures</li> <li>• Able to update claims records accurately and timely</li> <li>• Able to gather relevant claims records to produce statistics and reports upon requests.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Processing	
1. Title	Process general insurance claims applications
2. Code	105492L3
3. Range	This unit of competency is applicable to those who are responsible for handling claims enquiries and applications <b>from traditional and digital distribution channels with proper customer service skills</b> . It involves answering client enquiries and handling claims applications.
4. Level	3
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in claims processing</p> <ul style="list-style-type: none"> <li>• Understand information required in claims processing in different business lines</li> <li>• Comprehend corporate claims handling procedures and service standard</li> <li>• <b>Know about the</b> company procedures, relevant compliance and regulatory requirements in handling customer enquiries</li> <li>• <b>Understand the underwriting intent</b></li> <li>• <b>Understand fraud database</b></li> </ul> <p>6.2 Handle claims applications and process applications <b>from traditional and digital distribution channels with proper customer service skills</b></p> <ul style="list-style-type: none"> <li>• Explain to customers the claim process and time it may take</li> <li>• Explain to customers the documents needed in particular claims</li> <li>• Explain to customers their responsibilities in claims process</li> <li>• Advise customers on progress of claims upon enquiries</li> <li>• <b>Authenticate documents and verify</b> to ensure all required correspondences are submitted</li> <li>• Submit claims application forms with relevant correspondences to appropriate personnel for further processing</li> <li>• <b>Identify fraud cases and alert and escalate to higher level</b></li> <li>• Handle customer records in accordance with regulatory requirements</li> </ul> <p>6.3 Submit claims applications with sufficient correspondences to appropriate personnel</p> <ul style="list-style-type: none"> <li>• Provide customers with clear and correct information on claims applications</li> <li>• Submit claims applications with supporting correspondences to appropriate personnel.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to explain claims procedures to customers</li> <li>• Able to handle claims enquiries on claims applications <b>from traditional and digital distribution channels</b> and arrange follow-up actions with customers if enquiries cannot be solved at the spot</li> <li>• Able to arrange collection of further information to submit the claims applications for processing</li> <li>• Able to submit claims applications to the appropriate personnel for further processing.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Processing	
1. Title	Open and review general insurance claims files
2. Code	105513L4
3. Range	This unit of competency is applicable to those who are responsible for opening claims files <b>from traditional and digital distribution channels</b> . It involves verifying claims information, placing loss reserves and arranging loss investigation.
4. Level	4
5. Credit	2 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in handling claims</p> <ul style="list-style-type: none"> <li>• Well versed with types of information required in claims process</li> <li>• Well versed with company reserve policy</li> <li>• Comprehend company’s claims processing systems</li> <li>• Comprehend corporate claims policies, procedures and claims reserve guidelines</li> <li>• <b>Understand</b> relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Review and verify claims files <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Open claims files in claims processing system for received claims applications <b>and auto acknowledgement</b></li> <li>• Place loss reserves in accordance with the corporate claims reserve guidelines and the authority limits for claims applications received</li> <li>• Screen suspicious checklists and refer the relevant cases to superior to decide whether fraud investigations are required</li> <li>• Verify nature, time, place of loss and adequacy of relevant reports to confirm if they are within the scope of insurance policies</li> <li>• <b>Identify the severity of claims applications</b></li> <li>• Engage service providers <b>and</b> experts in conducting loss investigations and assessments on need basis</li> <li>• <b>Notify relevant re-insurer or co-insurer of the loss if necessary</b></li> <li>• Obtain further information and documents from relevant parties if necessary</li> <li>• Determine if further verifications or assessments are needed from loss adjusters</li> <li>• Present claims files with supporting correspondences to obtain further advice from relevant personnel if necessary</li> <li>• Review claims recovery checklists to consider subrogation prospects</li> <li>• Attend tribunal representing the claimants or respondent for recovery or for defense of claim on need basis</li> <li>• Evaluate, negotiate <b>and update</b> claim settlements with claimants</li> </ul> <p>6.3 Review claims files in accordance with company procedures and regulatory requirements</p> <ul style="list-style-type: none"> <li>• Create proper records in claims files detailing loss assessment results</li> <li>• Place appropriate loss reserves to settle submitted claims</li> <li>• Carry out responsible steps to verify and assess <b>the outstanding claims</b> that claimed loss is within the scope of policy.</li> </ul>

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to review claims file <b>from traditional and digital distribution channels</b> and place loss reserves in accordance with company procedures and regulatory requirements</li> <li>• Able to carry out responsible steps to verify if nature, time, place of loss and adequacy of relevant reports are within the scope of insurance policies</li> <li>• Able to arrange further investigations on loss assessment on need basis</li> <li>• Able to communicate effectively with customers and insurance intermediaries</li> <li>• Able to evaluate and negotiate effectively with claimants.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Processing	
1. Title	Assess claims applications for general insurance
2. Code	105514L4
3. Range	This unit of competency is applicable to those who are responsible for assessing general insurance claims applications <b>from traditional and digital distribution channels</b> . It involves determining validity of loss reported and making decision to approve or decline claims applications.
4. Level	4
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in assessing claims</p> <ul style="list-style-type: none"> <li>• Comprehend scope of coverage of different business lines in general insurance</li> <li>• Comprehend definitions of policy wordings <b>and claims practices</b> in insurance policies</li> <li>• Understand <b>the role, function of and</b> reports from specialists (such as loss adjusters, solicitors, doctors, etc.)</li> <li>• Comprehend company’s claims processing system, claims procedures and guidelines</li> <li>• <b>Understand</b> relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Assess claims applications <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Check and determine if losses are incurred within insurance periods</li> <li>• Assess information provided by clients to determine if claims applications are valid</li> <li>• Identify any misrepresentations or non-disclosures in information received</li> <li>• Screen suspicious cases and decide strategies for tackling the potential fraudulent claims</li> <li>• Reference and interpret specialist/ police report (if any)</li> <li>• Liaise with specialists (such as loss adjustors, <b>solicitors</b>, doctors, etc.) <b>and monitor the progress</b> for further verification when needed</li> <li>• Liaise with clients for further information when needed</li> <li>• Scrutinize the process of the loss to determine the parties that are liable for the loss for the purpose of subrogation (if any)</li> <li>• Determine if claims applications can be approved or declined</li> <li>• Present claims applications with supporting correspondences to obtain approval from appropriate personnel if authority limits are exceeded</li> <li>• Apply company claims handling principles to ensure the applications are analyzed holistically</li> <li>• Identify unfavourable risks and communicate with underwriters to improve risk exposures</li> <li>• Provide recommendations to customers and insurance intermediaries to carry out risk improvement actions</li> </ul>

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### Unit of Competency

	<p>6.3 Assess claims applications timely and in accordance with company claims procedures and guidelines, as well as relevant compliance and regulatory requirements</p> <ul style="list-style-type: none"> <li>• Ensure that decisions of assessing claims applications are made accurately and timely</li> <li>• Ensure that recommendations/comments from specialists are understood correctly</li> <li>• Ensure that claims applications are assessed in accordance with company claims procedures and guidelines, as well as relevant compliance and regulatory requirements.</li> </ul>
<p>7. Assessment Criteria</p>	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to assess validity of claims applications <b>from traditional and digital distribution channels</b> accurately and timely</li> <li>• Able to understand recommendations/comments from specialists</li> <li>• Able to assess claims applications in accordance with corporate claims procedures and guidelines, as well as relevant compliance and regulatory requirements</li> <li>• Able to communicate effectively with customers and insurance intermediaries</li> <li>• Able to evaluate and negotiate effectively with claimants</li> <li>• Able to formulate sound approach to deal with claims fairly for all parties involved.</li> </ul>
<p>8. Remarks</p>	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Processing	
1. Title	Review claims reserves and close claims files
2. Code	105515L4
3. Range	This unit of competency is applicable to those who are responsible for closing claims files <b>from traditional and digital distribution channels</b> . It involves determining status of claims and maintaining proper records.
4. Level	4
5. Credit	2 (for reference only)
6. Competency	<p><b>Performance Requirements</b></p> <p>6.1 Possess knowledge in closing claims files</p> <ul style="list-style-type: none"> <li>• Comprehend status of a claims application</li> <li>• Comprehend company procedure of closing claims files</li> <li>• Comprehend company’s claims processing system</li> <li>• Comprehend corporate claims policies, procedure and guidelines</li> <li>• Comprehend corporate claims reserving policy</li> <li>• <b>Understand</b> relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Evaluate claims application statuses <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Assess status (settled, declined, withdrawn, expired, etc.) of individual claims applications</li> <li>• Determine if claims applications can be closed according to company procedure</li> <li>• Review reserves according to company claims reserve guidelines</li> <li>• Present applications with supporting evidence to obtain approval from appropriate authority for closing of claims applications</li> <li>• Arrange updates of records in company system for closed claims files</li> </ul> <p>6.3 Close claims files in accordance with corporate claims procedures and guidelines</p> <ul style="list-style-type: none"> <li>• Assess details in claims files to determine claims status</li> <li>• Arrange necessary follow-up actions if claims files cannot be closed.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to assess details in claims files <b>from traditional and digital distribution channels</b> to determine status of claims applications</li> <li>• Able to determine the next step in claims applications based on current statuses</li> <li>• Able to verify whether claims files can be closed</li> <li>• Able to close claims files in accordance with company procedures, as well as relevant compliance and regulatory requirements</li> <li>• Able to arrange follow-up actions if claims files cannot be closed.</li> </ul>
8. Remarks	



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Settlement	
1. Title	Settle general insurance claims
2. Code	105516L4
3. Range	This unit of competency is applicable to those who are responsible for settlement for claims applications from traditional and digital distribution channels. It involves determining settlement amount and settlement options for individual claims applications.
4. Level	4
5. Credit	4 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in settling claims</p> <ul style="list-style-type: none"> <li>• Comprehend company procedures and guidelines of claims settlement</li> <li>• Comprehend excesses, deductibles and payment schedules of different business lines</li> <li>• Comprehend company’s claims settlement systems</li> <li>• Comprehend options in claims settlement</li> <li>• Comprehend company’s claims processing system</li> <li>• Understand relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Process settlements for claims applications from traditional and digital distribution channels</p> <ul style="list-style-type: none"> <li>• Observe excesses of insurance policies</li> <li>• Verify identity of payees to ensure their eligibility to receive the claim payments</li> <li>• Liaise with finance unit to ensure no outstanding or overdue payments from policies</li> <li>• Identify potential fraud</li> <li>• Preserve subrogation rights (if any) against third parties</li> <li>• Determine the best settlement options (if any) in accordance with corporate claims procedure and guidelines</li> <li>• Present claims with supporting evidence to obtain approval from appropriate authorities for respective settlement amounts</li> <li>• Settle approved claims in accordance with company guidelines</li> <li>• Review reinsurance arrangements and report claims to the reinsurers according to the reporting requirements under the reinsurance agreements</li> </ul> <p>6.3 Settle claims according to company’s claims guidelines</p> <ul style="list-style-type: none"> <li>• Verify eligibility of payees to receive claims payments based on existing policy records</li> <li>• Settle claims with settlement amounts determined by company claims guidelines.</li> </ul>

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**Unit of Competency**

7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to review existing policy records to determine payee’s eligibility for claims payments</li><li>• Able to determine accurate settlement amounts</li><li>• Able to settle claims <b>applications from traditional and digital channels</b> in accordance with company procedures and guidelines, as well as relevant compliance and regulatory requirements</li><li>• Able to report claims to reinsurers on timely basis for claims recovery purposes</li><li>• Able to maintain valid records to preserve subrogation rights against third parties.</li></ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Settlement	
1. Title	Pursue claims recovery after claims payments
2. Code	105517L4
3. Range	This unit of competency is applicable to those who are responsible for recovering claims payments <b>from traditional and digital distribution channels</b> . It involves seeking salvage and claims recoveries from reinsurance companies, third parties and other sources.
4. Level	4
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in recovering claims payments</p> <ul style="list-style-type: none"> <li>• Comprehend company’s recovery rights under the various reinsurance agreements</li> <li>• Know types and terms of reinsurance placed for the claims cases</li> <li>• Comprehend company’s subrogation rights in individual claims cases</li> <li>• Comprehend company procedures on claims payment recovery</li> <li>• Comprehend company’s claims processing system</li> <li>• <b>Understand</b> relevant compliance and regulatory requirements in processing claims</li> </ul> <p>6.2 Recover claims payments from different sources <b>from traditional and digital distribution channels</b></p> <ul style="list-style-type: none"> <li>• Liaise with participating reinsurance companies (if any) when claims incurred</li> <li>• Provide documents and information of claims to reinsurance companies</li> <li>• Collect payments from reinsurance companies for claims settled</li> <li>• Collect payments from third parties for claims cases with subrogation rights (if any)</li> <li>• Handling salvage tendering process and collect payments from salvage disposal (if any)</li> <li>• Ensure abandonment of recovery is supported with valid reasons</li> </ul> <p>6.3 Recover claims payments from relevant parties</p> <ul style="list-style-type: none"> <li>• Compile sufficient information on claims payments to be submitted to relevant parties for payment recoveries</li> <li>• Collect accurate claims payments from third parties and other sources timely.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to determine the appropriate amounts of claims payments to be recovered <b>from traditional and digital distribution channels</b></li> <li>• Able to gather sufficient details to relevant parties to recover claims payments</li> <li>• Able to collect accurate payments from third parties and other sources</li> <li>• Able to liaise with relevant reinsurance companies to collect the payments.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Manage the production of claims reports for general insurance
2. Code	105572L5
3. Range	This unit of competency is applicable to those who are responsible for managing claims reports. It involves retrieving claims records, generating reports, maintaining reports and identifying ways to improve claims report management process.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in producing claims reports</p> <ul style="list-style-type: none"> <li>• Comprehend company’s claims recording system</li> <li>• Know how to retrieve claims records from company’s claims processing system</li> <li>• Comprehend claims reports management techniques</li> <li>• <b>Comprehend</b> relevant compliance and regulatory requirements</li> </ul> <p>6.2 Manage production of claims reports</p> <ul style="list-style-type: none"> <li>• Produce regular claims reports for claims monitoring purpose</li> <li>• Produce specific claims reports to relevant units upon requests</li> <li>• Produce regular reports to analyze claims trends and identify areas where risk selections or improvements can be made</li> <li>• Produce regular claims reports and exception reports to monitor claims portfolios and to ensure the compliance of claims governance</li> <li>• Maintain generated claims reports according to company procedures</li> <li>• Observe the regulatory requirements on claims reports and customer record handling</li> </ul> <p>6.3 Manage production of accurate claims reports</p> <ul style="list-style-type: none"> <li>• Produce regular claims reports with all required details upon requests</li> <li>• Produce claims reports according to specific requirements upon requests.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify required data elements to generate claims reports</li> <li>• Able to produce accurate claims reports timely with all the required data according to company procedures and regulatory requirements</li> <li>• Able to manage up-to-date claims reports</li> <li>• Able to gather relevant data elements to produce specific reports upon requests.</li> </ul>
8. Remarks	

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Analyze claims records to forecast company liability and profitability
2. Code	105573L5
3. Range	This unit of competency is applicable to those who are responsible for analyzing insurance claims records. It involves retrieving claims records, analyzing records and forecasting company liabilities and profitability.
4. Level	5
5. Credit	4 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in analyzing claims records</p> <ul style="list-style-type: none"> <li>• Comprehend claims records analysis techniques</li> <li>• Comprehend company profitability strategy</li> <li>• Comprehend company's claims processing system</li> <li>• Comprehend relevant compliance and regulatory requirements in handling customer records</li> <li>• Understand financial management of an insurance business</li> </ul> <p>6.2 (a) Analyze claims records</p> <ul style="list-style-type: none"> <li>• Retrieve records from claims processing system</li> <li>• Analyze trends of claims of different insurance products</li> <li>• Infer possible causes of the trends (or changes of trends)</li> </ul> <p>6.2 (b) Project company liability and profitability</p> <ul style="list-style-type: none"> <li>• Work closely with other departments such as underwriting, actuarial and/or industry consultants to: <ul style="list-style-type: none"> <li>- Forecast the trend of claims based on analysis results</li> <li>- Forecast trend of company liability</li> <li>- Forecast how company profitability may be affected</li> </ul> </li> </ul> <p>6.3 Analyze insurance claims records accurately to provide realistic forecast on company liability and profitability</p> <ul style="list-style-type: none"> <li>• Ensure analysis of claims trends is based upon valid records and reasonable assumptions</li> <li>• Produce forecasts on claims trends</li> <li>• Forecast company liabilities and profitability</li> <li>• Suggest possible reasons for the forecasts.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify indicators of claims trends from analyzing claims records</li> <li>• Able to recognize the impact of analyzing different combinations of claims records on forecasting results</li> <li>• Able to provide realistic forecast company liabilities and profitability based on analysis results</li> <li>• Able to suggest possible reasons for the forecast results.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

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Claims > Claims Management	
1. Title	Evaluate performance of appointed experts/specialists
2. Code	105574L5
3. Range	This unit of competency is applicable to those who are responsible for evaluating the performance of experts/specialists such as investigators. It involves reviewing and analyzing the performance of experts/specialists appointed, and updating the approved lists of experts/specialists.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in evaluating performance of experts/specialists</p> <ul style="list-style-type: none"> <li>• Comprehend corporate claims policies, procedures and guidelines</li> <li>• Comprehend company’s requirements on performance standards of experts/specialists</li> <li>• Comprehend company’s claims processing system</li> <li>• Know about performance evaluation</li> <li>• Comprehend relevant compliance and regulatory requirements in processing claims</li> <li>• Establish policies for vendor selections</li> </ul> <p>6.2 Assess performance of experts/specialists</p> <ul style="list-style-type: none"> <li>• Gather information on performance of appointed experts/specialists on regular basis</li> <li>• Analyze performance of appointed experts/specialists</li> <li>• Determine if performance of experts/specialists is up to company standards</li> <li>• Determine if services provided by experts/specialists comply with relevant compliance and regulatory requirements</li> <li>• Propose termination of appointment of individual expert/specialist if necessary</li> <li>• Update approved expert/specialist lists on a regular basis</li> <li>• Provide updated lists to relevant units</li> </ul> <p>6.3 Appoint competent experts/specialists to support claims processing</p> <ul style="list-style-type: none"> <li>• Produce performance evaluation results of individual specialists</li> <li>• Ensure the engagement of vendors are best value for money</li> <li>• Maintain lists of experts/specialists, who are able to achieve performance standard, to facilitate sourcing of domain experts/specialists</li> <li>• Request relevant units not to appoint those experts/specialists who are not up to performance standards</li> <li>• Explain to relevant units the performance requirements of domain experts/specialists.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify performance indicators of domain experts/specialists</li> <li>• Able to carry out performance evaluations of individual domain experts/specialists against prescribed company standards and relevant</li> </ul>

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	regulatory requirements <ul style="list-style-type: none"><li>• Able to maintain lists of qualified experts/specialists</li><li>• Able to explain to relevant units the performance requirements of domain experts/specialists.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

Claims > Claims Management	
1. Title	Develop claims operation manuals and best practices
2. Code	105575L5
3. Range	This unit of competency is applicable to those who are responsible for developing claims operation manuals. It involves designing flow of claims process, determining authority limits and reporting lines of different job posts, as well as providing guidance to relevant staff on using operation manual.
4. Level	5
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in claims procedures</p> <ul style="list-style-type: none"> <li>• Comprehend company’s claim policies</li> <li>• Comprehend company’s claims service principles</li> <li>• Comprehend coverage of company’s insurance products</li> <li>• Comprehend roles of different posts in claims process</li> <li>• Be aware of the market norms in claims service</li> <li>• Comprehend relevant compliance and regulatory requirements</li> <li>• Understand financial management aspects of an insurance business</li> </ul> <p>6.2(a) Establish claims procedures</p> <ul style="list-style-type: none"> <li>• Create process flow for all lines of business</li> <li>• Benchmark claims procedures against market practices</li> <li>• Determine authority limits of different positions</li> <li>• Determine reporting lines of different positions</li> <li>• Explain claims operation manual to claims staff and other relevant units</li> <li>• Provide guidance to relevant staff on using claims operation manuals</li> <li>• Set up channels to obtain feedbacks on claims operation manuals</li> </ul> <p>6.2(b) Create claims best practices by lines of business</p> <ul style="list-style-type: none"> <li>• Update the process flow as necessary to include claims best practices as determined by local and/or global claims management</li> <li>• Ensure that claims best practices include all necessary steps from claim registration to file closure</li> </ul> <p>6.2(c) Maintain up-to-date operation manuals</p> <ul style="list-style-type: none"> <li>• Review contents of operation manuals in light of new business lines and products</li> <li>• Update operation manual based on review findings</li> <li>• Update claims best practices</li> </ul> <p>6.3 Develop operation manuals to standardize claims operations and supports company claims reserving policies, guidelines and best practices</p> <ul style="list-style-type: none"> <li>• Develop operation manuals that cover all claims operations</li> <li>• Lay out each step of operations precisely in the manuals</li> <li>• Ensure that claims operations are in line with company’s claims policies, guidelines and best practices</li> <li>• Update operation manuals to cater new business lines and products.</li> </ul>



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7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to organize claims operations into step-by-step procedures</li> <li>• Able to describe claims procedures in writing</li> <li>• Able to develop claims operation manuals that support corporate claims policies and guidelines and comply with relevant compliance and regulatory requirements</li> <li>• Able to train relevant staff members to use the manuals</li> <li>• Able to develop and update claims best practices</li> <li>• Able to update operation manuals to support development of new business lines and products.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

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**Unit of Competency**

Claims > Claims Management	
1. Title	Handle and manage suspected fraudulent claims
2. Code	105576L5
3. Range	This unit of competency is applicable to those who are responsible for tactfully handling suspected fraudulent claims. It involves screening and analyzing the information of suspected fraudulent claims and deciding the best course of actions to tackle fraudulent claims.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in handling fraudulent cases</p> <ul style="list-style-type: none"> <li>• Know about indicators of fraudulent claims</li> <li>• Comprehend common fraudulent claims cases in the insurance industry</li> <li>• Comprehend techniques of screening suspected fraudulent claims</li> <li>• Comprehend company procedures and guidelines on handling suspected fraud cases</li> </ul> <p>6.2(a) Identify, handle and manage suspected fraudulent claims</p> <ul style="list-style-type: none"> <li>• Screen claims applications to identify potential fraudulent claims</li> <li>• Analyze records in the suspected fraudulent claims</li> <li>• Conduct investigation on suspected fraudulent claims</li> <li>• Report suspected fraudulent claims</li> <li>• Arrange experts/specialists for further investigation</li> <li>• Determine if particular claims are fraudulent</li> <li>• Present claims applications with supporting evidence to solicit legal advice on need basis</li> </ul> <p>6.2(b) Establish regular fraud detection and prevention training</p> <ul style="list-style-type: none"> <li>• Create fraud checklists</li> <li>• Train claims staff on screening and identifying suspicious or fraudulent cases</li> <li>• Update fraud checklists regularly</li> <li>• <b>Explain to</b> underwriters <b>and elaborate on the potential risk</b> to avoid accepting suspicious risks</li> <li>• Update claims staff and underwriters on local and global claims fraud management policies</li> </ul> <p>6.3 Manage suspected fraudulent claims effectively to safeguard company from losses</p> <ul style="list-style-type: none"> <li>• Identify fraudulent claims effectively</li> <li>• Ensure all suspected fraudulent claims are thoroughly investigated</li> <li>• Ensure proper messages are delivered to the customers and insurance intermediaries in the course of investigations</li> <li>• Ensure actions are carried out in accordance with company procedures and guidelines to deal with suspected fraudulent claims</li> <li>• Maintain up-to-date fraud checklists</li> <li>• Equip relevant staff members with the necessary knowledge and skills to deal</li> </ul>

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	with suspicious or fraudulent cases.
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify fraudulent claims effectively</li> <li>• Able to analyze the information to evaluate suspected fraudulent claims</li> <li>• Able to source experts/specialists for further investigations suspected fraudulent claims</li> <li>• Able to handle suspected fraudulent claims according to company procedures and guidelines</li> <li>• Able to give instructions and train claims staff on tackling suspicious or fraudulent claims</li> <li>• Able to deal with customers and insurance intermediaries when encountering suspicious or fraudulent claims</li> <li>• Able to create and maintain fraud checklists.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

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Claims > Claims Processing	
1. Title	Process healthcare claims applications in general insurance
2. Code	105577L5
3. Range	This unit of competency is applicable to those who are responsible for handling claims which require the support from medical professionals to monitor claims on body injuries related to employees' compensation, motor and public liability insurance.
4. Level	5
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess insurance, legal and market knowledge</p> <ul style="list-style-type: none"> <li>• Comprehend company's claims procedures and guidelines of claims settlement</li> <li>• Comprehend company's reserving policies</li> <li>• Comprehend company's claims settlement systems</li> <li>• Comprehend options in claims settlement</li> <li>• Comprehend company's claims processing system</li> <li>• Comprehend relevant compliance and regulatory requirements in processing claims</li> <li>• Comprehend insurance principles</li> <li>• Comprehend legal system and legal principles</li> <li>• Comprehend healthcare management standards and protocols</li> <li>• Strong technical capability across a range of product types</li> </ul> <p>6.2 Process settlement for claims applications</p> <ul style="list-style-type: none"> <li>• Acknowledge claims from first and third parties</li> <li>• Explain claims procedures and resolve enquiries from both customers and external contacts</li> <li>• Identify and develop approaches to process claims cases</li> <li>• Place loss reserve in accordance with corporate claims reserve guidelines and the authority limit for claims applications received</li> <li>• Engage and collaborate with intermediaries to facilitate claims investigation process</li> <li>• Engage service providers or experts, e.g. medical doctors, physicians, physiotherapists, occupational therapists, etc, in conducting loss investigation and assessment on need basis</li> <li>• Consolidate relevant evidence and information to accurately assess value of the claims</li> <li>• Screen suspicious cases to reveal potential fraud/recovery indicators</li> <li>• Review, resolve and proactively finalize claims within authority limits to ensure settlement at optimum levels</li> <li>• Follow customer specific claims handling protocols and/or customer proposition service charters to meet the needs and expectations of customers</li> </ul> <p>6.3 Manage claims processing effectively to achieve favorable outcome for all parties</p> <ul style="list-style-type: none"> <li>• Ensure claimants are treated fairly</li> </ul>

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	<ul style="list-style-type: none"> <li>• Offer settlements that well reflect both policy and legal liabilities of the company</li> <li>• Coordinate with relevant parties to assist injured persons in receiving timely medical treatment and rehabilitation services via healthcare management programmes</li> <li>• Adhere to regulatory and governance requirements throughout life of claims to ensure that the decisions are made with right standards.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to deliver business objectives in terms of financial effectiveness, operational efficiency and compliance</li> <li>• Able to review claims files and place loss reserve in accordance with company procedures and regulatory requirements</li> <li>• Able to source service providers and experts to conduct investigations on loss assessment on need basis</li> <li>• Able to communicate effectively with customers and insurance intermediaries</li> <li>• Able to provide prompt assistance to injured persons to facilitate early recovery, resumption to work and normal life</li> <li>• Able to demonstrate commitment to help, concern and care to the injured persons, and hence reduce social issues.</li> </ul>
8. Remarks	

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Claims > Claims Management	
1. Title	Manage claims operations
2. Code	105614L6
3. Range	This unit of competency is applicable to those who are responsible for managing operations of claims department. It involves establishing claims operational guidelines, monitoring different functions in claims department and resolving claims disputes.
4. Level	6
5. Credit	6 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in corporate claims operation</p> <ul style="list-style-type: none"> <li>• Comprehend functions of different posts in claims operations</li> <li>• Comprehend claims operation work flow</li> <li>• Comprehend authority limits for different job ranks</li> <li>• <b>Master</b> relevant compliance and regulatory requirements in processing claims</li> <li>• Comprehend corporate development strategies</li> </ul> <p>6.2 (a) Manage claims operations</p> <ul style="list-style-type: none"> <li>• Establish company claims service principles</li> <li>• Establish claims strategies in line with company's directions and goals</li> <li>• Develop corporate claims reserving policies</li> <li>• Establish claims procedures and operation guidelines with expected performance standards</li> <li>• Set up monitoring mechanisms to prevent breaching of authority limits</li> <li>• Provide training and guidance to claims staff on corporate claims policies, procedures and guidelines</li> <li>• Monitor manpower and roles of different posts in claims department</li> <li>• Resolve claims disputes <b>with alternative disputes resolution and mechanism</b></li> </ul> <p>6.2 (b) Improve operation procedures</p> <ul style="list-style-type: none"> <li>• Evaluate efficiency and effectiveness of claims operations on regular basis</li> <li>• Assess compliance of claims operations against relevant regulatory requirements</li> <li>• Identify areas to be improved in claims operations based on assessment results</li> </ul> <p>6.3 Ensure claims operations effectively support corporate development</p> <ul style="list-style-type: none"> <li>• Master the flow and service requirements of claims operations</li> <li>• Ensure all decisions made on claims applications are accurate</li> <li>• Ensure all settlements are made in a timely manner</li> <li>• Ensure all recovery actions are carried out as needed</li> <li>• Manage claims operations to achieve service targets, e.g. settlements made within service pledge</li> <li>• Ensure all claims operations comply with the established claims reserving policies, operation guidelines, as well as relevant compliance and regulatory requirements</li> <li>• Ensure the practice of quality assurance, fraud, recovery and vendor</li> </ul>

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	<p align="center">management are in place</p> <ul style="list-style-type: none"> <li>• Ensure claims are managed proactively to shorten the age of files</li> <li>• Ensure settlement costs and expenses are effectively controlled.</li> </ul>
<p>7. Assessment Criteria</p>	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to organize claims operations into step-by-step procedures</li> <li>• Able to deliver business objectives in terms of financial effectiveness, operational efficiency and compliance</li> <li>• Able to identify areas of operations that require governing mechanisms and set up such mechanisms accordingly</li> <li>• Able to establish claims reserve policies, procedures and guidelines, that comply with relevant compliance and regulatory requirements, to direct corporate claims operations</li> <li>• Able to manage claims operations to ensure compliance with relevant policies and guidelines, as well as regulatory requirements</li> <li>• Able to improve efficiency, effectiveness and compliance claims operations based on regular evaluation results</li> <li>• Able to improve customer satisfaction with continual lifting of the service standards.</li> </ul>
<p>8. Remarks</p>	<p>This unit of competency is also applicable to life insurers.</p>

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Claims > Claims Management	
1. Title	Assess performance and quality of insurance claims operations
2. Code	105615L6
3. Range	This unit of competency is applicable to those who are responsible for assessing performance of insurance claims operations. It involves reviewing and analyzing claims records, as well as providing recommendations to improve claims operation performance.
4. Level	6
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in assessing performance of claims operation</p> <ul style="list-style-type: none"> <li>• Comprehend functions of different roles in claims operation</li> <li>• Comprehend claims operation work flow</li> <li>• Comprehend company claims policies, procedures and guidelines</li> <li>• <b>Master</b> relevant compliance and regulatory requirements</li> <li>• Familiarize with the financial management aspects of an insurance business</li> </ul> <p>6.2 Evaluate performance and service quality of claims operations</p> <ul style="list-style-type: none"> <li>• Review claims records and reports on claims process</li> <li>• Evaluate efficiency and effectiveness of claims operations on regular basis</li> <li>• Identify violations of claims guidelines and/or authority limits</li> <li>• Collect customer feedbacks on company claims service</li> <li>• Analyze records to see if corporate claims operations are up to standard</li> <li>• Identify critical success factors and areas to be improved</li> </ul> <p>6.3 Assess performance and quality of claims operations objectively</p> <ul style="list-style-type: none"> <li>• Set up performance indicators for claims operations</li> <li>• Evaluate efficiency and effectiveness of claims operations against predefined service standards</li> <li>• Assess claims operations using the identity indicators and produce performance assessment results accordingly</li> <li>• Determine precisely whether claims operations comply with corporate claims policies, procedures and guidelines, as well as relevant compliance and regulatory requirements</li> <li>• Provide recommendations to improve claims operations.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to identify performance indicators of claims operations</li> <li>• Able to arrange collection of relevant claims records for performance assessment</li> <li>• Able to analyze claims records to evaluate efficiency and effectiveness of claims operations against predefined performance standards</li> <li>• Able to identify violations of claims policies, procedures and guidelines</li> <li>• Able to provide recommendations to improve claims operations.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.



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Claims > Claims Management	
1. Title	Establish insurance claims authority limits
2. Code	105616L6
3. Range	This unit of competency is applicable to those who are responsible for establishing claims authority limits. It involves determining proper claims and settlement authority limits required to support company claims services, setting up authority limits and introducing authority limits to relevant units.
4. Level	6
5. Credit	4 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in establishing claims authority limits</p> <ul style="list-style-type: none"> <li>• Comprehend company claims policy and procedures</li> <li>• Comprehend coverage of company’s products</li> <li>• Comprehend nature of risks for insurance</li> <li>• Familiarize with potential correlations amongst different types of risks</li> <li>• Familiarize with financial management aspects of an insurance business</li> </ul> <p>6.2(a) Set up claims and settlement authority limits for insurance</p> <ul style="list-style-type: none"> <li>• Determine and establish claims authority limits for different claims positions</li> <li>• Structure claims unit so that the hierarchy and authority of positions link with technical capabilities and maintain proper balance of control and autonomy</li> <li>• Establish procedures and guidelines for obtaining higher level authorities</li> <li>• Implement authority limits in claims operations</li> <li>• Present claims and settlement authority limits to claims staff</li> </ul> <p>6.2(b) Maintain effective claims and settlement authority limits</p> <ul style="list-style-type: none"> <li>• Review claims records to analyze the effectiveness of claims and settlement authority limits in light of changing operating environment</li> <li>• Adjust authority limits in light of review findings</li> </ul> <p>6.3 Ensure claims authority limits align with corporate risk exposures and insurance claims policies</p> <ul style="list-style-type: none"> <li>• Develop authority limits that effectively classify claims settlement to cater technical complexities and maintain a proper balance of control and autonomy</li> <li>• Ensure that relevant staff are well informed about claims and settlement authority limits</li> <li>• Ensure established claims and settlement authority limits are in line with corporate risk exposure policies</li> <li>• Adjust authority limits to accommodate changing operating contexts.</li> </ul>

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7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to derive criteria for setting up claims authority limits that cater technical complexities and maintain a proper balance of control and autonomy</li><li>• Able to establish claims and settlement authority limits for different claims positions</li><li>• Able to maintain effective claims and settlement authority limits</li><li>• Able to ensure claims and settlement authority limits align with corporate risk exposures and reserve policies.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

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Claims > Claims Management	
1. Title	Establish procedures and guidelines on handling suspected fraudulent claims
2. Code	105617L6
3. Range	This unit of competency is applicable to those who are responsible for directing the screening and handling of suspected fraudulent claims. It involves establishing and implementing supporting guidelines and procedures, and providing training to relevant units on detecting and handling fraudulent claims.
4. Level	6
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in screening and handling fraudulent claims</p> <ul style="list-style-type: none"> <li>• Well versed corporate claim policies</li> <li>• Comprehend techniques of detecting potential fraudulent claims</li> <li>• Comprehend methods used in dealing with fraudulent claims</li> <li>• Comprehend common fraudulent claims cases in the insurance industry</li> <li>• Comprehend techniques to train staff on screening and handling suspected fraudulent claims</li> </ul> <p>6.2(a) Set up guidelines and procedures on screening and handling suspected fraudulent claims</p> <ul style="list-style-type: none"> <li>• Establish guidelines on screening suspected fraudulent claims</li> <li>• Establish procedures in reporting of suspected fraudulent claims</li> <li>• Establish procedures in handling suspected and confirmed fraudulent claims</li> <li>• Implement screening and handling fraudulent claims guidelines and procedures</li> </ul> <p>6.2(b) Provide training to relevant units</p> <ul style="list-style-type: none"> <li>• Provide training to relevant units in using the guidelines to detect potential fraudulent claims</li> <li>• Provide training to relevant units in following the procedures to handle potential and confirmed fraudulent claims</li> </ul> <p>6.2(c) Evaluate the effectiveness of procedures and guidelines</p> <ul style="list-style-type: none"> <li>• Work with relevant units to review records of suspected and confirmed fraudulent cases</li> <li>• Evaluate the effectiveness of the guidelines and procedures of screening and handling of suspected fraudulent claims from time to time</li> <li>• Adjust guidelines and procedures based on review findings</li> </ul> <p>6.3 Set up effective guidelines and procedures to guide staff members in screening and handling suspected fraudulent claims</p> <ul style="list-style-type: none"> <li>• Develop guidelines that cover possible approaches to tackle suspected and confirmed fraudulent claims</li> <li>• Ensure fraudulent claims handling procedures and guidelines are in line with corporate claims policies</li> <li>• Ensure guidelines and procedures effectively enable screening and handling of suspected fraudulent claims.</li> </ul>

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7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to organize screening and handling of fraudulent claims into step-by-step procedures</li><li>• Able to describe screening and handling procedures in writing</li><li>• Able to establish procedures and guidelines on screening suspected fraudulent claims</li><li>• Able to ensure the guidelines and procedures of suspected fraudulent claims screening and handling are in line with corporate claims policies</li><li>• Able to introduce the procedures and guidelines to claims staff.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.

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Claims > Claims Management	
1. Title	Formulate insurance claims policies
2. Code	105618L6
3. Range	This unit of competency is applicable to those who are responsible for formulating insurance claims policies. It involves analyzing company claims records and profitability, as well as formulating, evaluating and adjusting claims policies.
4. Level	6
5. Credit	6 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in formulating company claims policies</p> <ul style="list-style-type: none"> <li>• Comprehend corporate business development strategies</li> <li>• Comprehend company’s position in the insurance market</li> <li>• Comprehend trends of claims</li> <li>• Comprehend corporate profitability strategies</li> <li>• <b>Master</b> regulatory requirements on reserve ratios</li> <li>• Familiarize with the financial management aspects of an insurance business</li> <li>• Use a range of skills to analyze the financial implications of claims policies</li> </ul> <p>6.2(a) Formulate corporate claims policies</p> <ul style="list-style-type: none"> <li>• Analyze products of different business lines</li> <li>• Analyze profitability of different business lines</li> <li>• Develop claims policies for different business lines</li> <li>• Present claims policies to relevant units</li> </ul> <p>6.2(b) Review corporate claims policies</p> <ul style="list-style-type: none"> <li>• Evaluate effectiveness of corporate claims policies with respect to company risk exposures and profitability strategies</li> <li>• Adjust corporate claims policies in light of review findings and changing market environment</li> </ul> <p>6.3 Ensure company claims policies support company risk exposures and profitability strategies and comply with relevant regulatory requirements</p> <ul style="list-style-type: none"> <li>• Ensure claims policies are in line with company’s risk exposures and profitability strategies</li> <li>• Ensure claims policies comply with relevant regulatory requirements</li> <li>• Ensure relevant units are well informed about the claims policies.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to formulate overall corporate claims policies and individual claims policies</li> <li>• Able to review and adjust claims policies for different business lines in light of changing market environment</li> <li>• Able to ensure claims policies support company risk exposures and profitability strategies and comply with relevant regulatory requirements.</li> </ul>
8. Remarks	This unit of competency is also applicable to life insurers.

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Claims > Claims Management	
1. Title	Manage claims litigation cases and legal panel for general insurance
2. Code	105619L6
3. Range	This unit of competency is applicable to those who are responsible for managing litigation cases. It involves consolidating relevant evidence to assess claims statuses, selecting the legal panel and monitoring performance of external legal service providers.
4. Level	6
5. Credit	3 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess legal knowledge in insurance and legal system</p> <ul style="list-style-type: none"> <li>• Understand insurance operations in relation to litigation claims cases</li> <li>• Comprehend corporate claims handling procedures and service standard</li> <li>• <b>Master</b> company procedures, relevant compliance and regulatory requirements in handling legal cases and formulating legal strategies</li> </ul> <p>6.2 Manage claims litigation cases</p> <ul style="list-style-type: none"> <li>• Consolidate relevant evidence and information to assess litigation status</li> <li>• Manage and provide advice on complex coverages and claims litigation cases that require specialized legal knowledge</li> <li>• Advise relevant personnel to place loss reserves in accordance with the corporate claims reserve guidelines and the authority limits for claims applications received</li> <li>• Develop, prepare and implement litigation strategies</li> <li>• Source external service providers to support the litigation process as appropriate</li> <li>• Provide legal advice to claims handlers in accordance with corporate claims strategies</li> <li>• Engage relevant internal customers to explain litigation arrangement</li> </ul> <p>6.3 Manage litigation cases effectively and in accordance with corporate claims strategies and guidelines</p> <ul style="list-style-type: none"> <li>• Ensure claims reserves are set appropriately in accordance with the reserving guidelines</li> <li>• Ensure claims are processed in accordance with the company procedures and relevant regulatory requirements</li> <li>• Assign cases to appropriate external service providers to implement claims strategies</li> <li>• Manage legal costs and other associated fees to ensure cost effectiveness</li> <li>• Arrange technical guidance, assistance and training claim personnel as required</li> <li>• Ensure all acts are lawfully conducted to fulfill regulatory and financial requirements</li> <li>• <b>Evaluate on the performance of service providers regularly</b></li> </ul>

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7. Assessment Criteria	The integrated outcome requirements of this unit of competency are: <ul style="list-style-type: none"><li>• Able to analyze claims status and develop appropriate litigation approach</li><li>• Able to advise on how to deal with complex claims and litigation cases</li><li>• Able to expedite claim settlement through direct settlement or mediation as practicable as possible in order to avoid lengthy litigation</li><li>• Able to control claims settlement costs tactfully to save legal expenses incurred in claims settlement</li><li>• Able to direct the handling of cases lawfully and in accordance with corporate claims procedures, regulatory and financial requirements</li><li>• <a href="#">Able to evaluate the performance of service providers.</a></li></ul>
8. Remarks	

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Claims > Claims Management	
1. Title	Formulate insurance claims reserving policies
2. Code	105642L7
3. Range	This unit of competency is applicable to those who are responsible for formulating insurance claims reserve policies. It involves understanding company assets, liabilities, premium liabilities, claims liabilities, and making projections on company future premiums, claims ratio, cash flows, etc. to determine claims reserve policies for different lines of business.
4. Level	7
5. Credit	5 (for reference only)
6. Competency	<p><u>Performance Requirements</u></p> <p>6.1 Possess knowledge in formulating insurance claims reserve policies</p> <ul style="list-style-type: none"> <li>• Comprehend company business structure</li> <li>• Comprehend company risk exposures</li> <li>• Comprehend trends of claims in different lines of business</li> <li>• Comprehend company assets, liabilities and overall financial position</li> <li>• Comprehend methodologies in formulating claims reserves</li> <li>• Comprehend relevant compliance and regulatory requirements in claims reserves</li> </ul> <p>6.2 Formulate insurance claims reserving policies</p> <ul style="list-style-type: none"> <li>• Work with company finance unit to analyze company financial positions to fully understand company assets and liabilities</li> <li>• Analyze company business structure to fully understand company premium liabilities and claims liabilities</li> <li>• Work with company actuarial unit to analyze and project trends of claims in different business lines of business in the market as well as within company</li> <li>• Observe closely regulatory minimum requirements on the technical reserves of different business lines</li> <li>• Project future company premiums, claims ratio, cash flows, reinsurance business, returns on assets, expenses, etc.</li> <li>• Determine claims reserving policies for different lines of business</li> </ul> <p>6.3 Review and revise insurance claims reserving policies in light of changes in business environment and regulatory requirements</p> <ul style="list-style-type: none"> <li>• Proactively observe and forecast change in business environment</li> <li>• Closely observe changes in regulatory requirements on claims reserves</li> <li>• Conduct scenario/sensitivity analysis on impact of changes in business environment/claims reserve requirements on company profitability and risk exposures</li> <li>• Provide solutions to possible challenges arise from changes in business environment/regulatory requirements.</li> </ul>
7. Assessment Criteria	<p>The integrated outcome requirements of this unit of competency are:</p> <ul style="list-style-type: none"> <li>• Able to understand company assets and liabilities, premium and claims liabilities in financial management aspects</li> </ul>



**Specification of Competency Standards of the Insurance Industry (General Insurance)**  
**Unit of Competency**

	<ul style="list-style-type: none"><li>• Able to project future company premiums, claims ratio, cash flows, reinsurance business, returns on assets</li><li>• Able to forecast possible change in business environment/regulatory requirements and provide solutions for the challenges arise.</li></ul>
8. Remarks	This unit of competency is also applicable to life insurers.