

Attachment

Flow Process for the Telemarketing Operation of Insurance Enterprises

Flow Process	Content
Education and training	<ol style="list-style-type: none"> 1. Telemarketing sales representatives and their direct supervisors should receive professional training. Their qualifications, requirements, education and training, management, and rewards and disciplines should observe the <i>Regulations Governing the Supervision of Insurance Solicitors</i>. 2. Telemarketing sales representatives must receive professional product training and practical training, and understand fully the regulations regarding contract review period, the method of implementation and the legal effect. 3. All insurance companies should draw up their own telemarketing management rules or internal operating procedures.
Call recording	<ol style="list-style-type: none"> 1. The entire conversation between the sales representative and the proposer should be tape recorded under the proposer's consent and with backup copy saved for a minimum period of two years after the insurance contract has expired or a notice of application denied has been sent to the proposer. 2. Supervisor or auditor should be assigned to periodically check the telephone records to determine whether these Directions or other laws and regulations have been violated.
Sales process	<ol style="list-style-type: none"> 1. Confirm the intent to buy insurance, the content of insurance, the amount insured, premium and policy effective date. 2. Confirm the identity and verify the data. 3. Confirm the premium payment method. 4. Confirm that the proposer has already received a copy of the insurance contract for review. 5. When an insurance enterprise engages in the business specified in paragraph 1, subparagraph 2 or 3 of the Directions, inform the proposer explicitly that the insurance contract will not take effect until the insurance enterprise has approved the underwriting. If the insurance enterprise disapproves the underwriting, inform the proposer by phone or in writing. 6. Inform the proposer how the policy will be delivered and explain that the proposer should sign back the return receipt acknowledging the receipt of policy or insurance purchase confirmation after reviewing the

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	content of the policy.
Policy taking effect	<ol style="list-style-type: none"> 1. An insurance enterprise should assign relevant staff to make further confirmation with the proposer based on the actual circumstances. 2. When the proposer pays premium or the charge of premium via credit card is successful, a life insurance contract takes effect retroactively at the zero hour on the next day following the “date of transaction by phone” or “date of execution of insurance contract confirmed on the phone” or “date of application”, but the policy period for a travel insurance is based on the time and date stated in the insurance policy, while a property insurance contract takes effect at the time and date as agreed by the parties. 3. Insurance enterprises, insurance agent companies and insurance broker companies should carry out insurance application reporting and underwriting reporting operations in accordance with the Directions for the Reporting Operations of Life Insurance Enterprises.
Delivery of policy	<ol style="list-style-type: none"> 1. Deliver/mail the policy together with the application documents, a return receipt acknowledging the receipt of policy and a stamped return envelope (including policy number, names of proposer/insured, type of main policy and insured amount, premium per term, effect date, and a statement – “I understand that I obtain this policy through telemarketing. I have read carefully the clauses of the enclosed policy and the nature of insurance, and find the enclosed documents correct”, field of signature for proposer/insured, and explanation of how to send back the return receipt.” 2. The proposer may cancel the contract within ten days after the delivery of policy, upon which, the insurance enterprise should refund the premium paid with no interest accrued. But for travel insurance, the ten-day cancellation period does not apply once the policy becomes effective.
Initial premium payment	<ol style="list-style-type: none"> 1. Credit card payment/account transfer – Notify the proposer if credit card charge or account transfer is unsuccessful (for credit card payment, verify the credit card number and expiration date with the proposer before debiting the card). 2. Direct payment – The proposer may choose to make direct payment via, for example, remittance, ATM, convenience store or by check. 3. If the initial premium is not paid past the deadline, the insurance contract

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	never takes effect.
Renewal premium payment	<ol style="list-style-type: none"> 1. Credit card payment/account transfer – Periodically request payment of renewal premium when due. 2. Direct payment – Periodically mail payment notice to the proposer for him or her to make payment (ex.: through remittance, ATM, convenience store or by check). 3. If credit card charge or account transfer is not successful or the proposer fails to pay past the grace period, take actions according to the policy clauses. 4. The proposer can learn the amount and date of debit through bank’s written statement or payment notice.
Customer service	<ol style="list-style-type: none"> 1. Professional customer service: Customer service representatives must possess professional insurance knowledge and have received the training of telephone etiquette. Besides answering the calls of customers in due time, customer service representatives should understand the questions of policyholders and provide answers in a timely manner. All telephone conversations should be tape recorded as corroborating evidence of commitment to policyholders. Supervisors should also check the recorded phone conversations periodically as basis for service quality control and improvement. 2. Provide information to the proposers proactively.
Complaint handling	<ol style="list-style-type: none"> 1. Listen to customer complaints with sincerity, understand the situation, calm the customers, seek common grounds, and take the best interest of customer into consideration. 2. For dispute cases, retrieve the tape recording to verify the process of solicitation. 3. An insurance enterprise should adopt interpretation and take actions favorable to the proposer when handling a dispute arising out of or in connection with poor communication during the telemarketing process, poor quality of recording equipment or recording, or insurance contract review period. The preceding paragraph applies to dispute resulting from an proposer’s failure to send back the return receipt acknowledging the receipt of policy or insurance purchase confirmation when an insurance enterprise engages in the business specified in Point 3, paragraph 1, subparagraph 1 or 2 herein

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	<ol style="list-style-type: none"> 4. The insurance company bears the burden to show delivery of policy and the date of delivery. 5. Handle defective cases according to law, discuss the cases and make improvements.
Claim services	<ol style="list-style-type: none"> 1. When a policyholder calls an insurance enterprise about making a claim, the customer service representative should inquire the policyholder's basic information and the nature of policy to gain a preliminary understanding whether the policyholder is eligible to make an insurance claim. 2. If the policyholder meets the claim application requirements, mail a benefit application form to the policyholder. If not, tell the policyholder the reasons on the phone. 3. Upon the receipt of a claim application, customer service representatives will forward it to claim adjuster to begin the general claim adjustment procedure. 4. When an insurance agent company or insurance broker company receives a policyholder's request for claim services, it should provide the policyholder with the telephone number of the underwriter's policyholder service center or forward the policyholder's claim documents to the underwriter.