

General Secretariat of the Committees for Resolution of Insurance Disputes & Violations

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THE GUIDELINES



No.	Q&A
1	What is the regulatory instrument based on which the Committees for Resolution of Insurance Disputes and
	Violations were established?
	The Committees for Resolution of Insurance Disputes and Violations were established under the Law on Supervision of
	Cooperative Insurance Companies issued by Royal Decree no. (M/32) dated (02/06/1424H), amended by Royal Decree no.
	$(M/30)\ dated\ (27/05/1434H).\ After\ amendment,\ Article\ (20)\ touched\ upon\ the\ formation\ of\ Primary\ Committees,\ setting\ out$
	their membership tenure and competences, whereas Article (22) discussed the formation of Appeal Committees with
	competence to consider grievances submitted by concerned persons against decisions made by the Primary Committees.
2	What are the competences of the Committees for Resolution of Insurance Disputes and Violations?
	• All disputes arising from insurance contracts, including disputes between insurance companies and their clients and
	insurance beneficiaries or between these companies and other companies acting on behalf of the insured.
	Disputes between insurance companies and reinsurance companies or among companies of each activity, or disputes
	between these companies and insurance-related service providers.
	• Violations arising between insurance companies and reinsurance companies, or within each of these activities as a
	result of implementation of the Law, and enforcement of fines as prescribed in Article (21) of the Law on Supervision
	of Cooperative Insurance Companies.



 Violations of insurance-related service providers stated in Article (18) of the Law on Supervision of Cooperative Insurance Companies.

3 What is the role of the General Secretariat of the Committees for Resolution of Insurance Disputes and Violations?

The General Secretariat performs the administrative, regulatory and technical tasks required for managing insurance disputes and violations, such as:

- Conducting administrative work, supportive research and studies and providing consultations.
- Registering, arranging and numbering cases and appeal requests; conducting control activities; managing correspondences and reports; and scheduling dates.
- Proposing conciliation procedures, provided that approval from the Minister is received.
- Regulating the works of the Primary Committees and Appeal Committee and conducting their secretarial works.
- Preparing decisions and delivering them to parties to cases.
- Classifying decisions issued by the Committees to be communicated.
- Preparing annual statistics on the activities, decisions and litigation periods of the Committees.
- Providing feedback, upon the request of other relevant bodies, on draft rules relating to the regulation of the insurance sector.
- Any other functions that fall within its competence as specified in the ministerial resolution.



4 Do the Committees for Resolution of Insurance Disputes and Violations fall under the jurisdiction of SAMA or

any other authority?

The Committees are fully independent in undertaking the tasks of resolving insurance disputes and violations since:

- Primary Committees are formed upon a Ministerial Resolution for a tenure of three years, subject to renewal.
- An Appeal Committee is formed upon a Royal Order for a tenure of three years, subject to renewal.
- Rules and regulations governing the work of the Committees are issued by the Council of Ministers.
- Committees are excluded from the third section of the Executive Work Mechanism of the Law of the Judiciary and the Law of the Board of Grievances.

5 Which parties are entitled to file a lawsuit over an insurance dispute or violation before the Committees?

The following may file suits over insurance disputes and violations, provided that they have the capacity or interest needed to file lawsuits:

- Insurance and reinsurance companies.
- Insurance companies' clients (the insured).
- Insurance companies when they subrogate the insured persons.
- Insurance-related service providers.



- Other relevant parties such as beneficiaries of different insurance coverages.
- Prosecutors appearing before the Committees of employees designated pursuant to a decision from the governor of SAMA or whom he delegates in insurance violations lawsuits, as stipulated in the rules and regulations governing the work of the Committees issued by Council of Minister's Resolution no. (190) dated (09/05/1435H).

6 How can an insurance dispute be filed before the General Secretariat, and what are the documents required to accompany the case memorandum?

A dispute can be filed through the e-portal (e-services) on the website of the General Secretariat, noting that required documents vary depending on the type of insurance; however, the following documents are mandatory for all cases in general:

- Complete information of the case (full name occupation place of residence contact numbers).
- The defendant's full name, contact numbers and place of residence.
- A copy of the national ID, or residence permit (Iqama) for non-Saudis.
- A copy of the commercial register (in case the claimant is a legal person, company, association, etc.)
- Complete information of the attorney-in-fact and/or the lawyer (full name occupation place of residence contact numbers). In case the claimant is an attorney-in-fact (not a lawyer), the terms set forth in Article (18) under the Code of Law Practice and its Implementing Regulations must be met.



- A copy of the law license (in case the attorney-in-fact is a lawyer).
- A copy of the power of attorney certificate (in case the lawsuit is brought by an attorney-in-fact and/or a lawyer).
- A copy of the national ID of the attorney-in-fact and/or lawyer.
- A reply from the defendant or anything that proves the claim was lodged with it, in implementation of Item (4) of
 Article (3) of the work rules of the Committees for Resolution of Insurance Disputes and Violations (in case the
 defendant is an insurance company).
- Specification of the lawsuit subject, value and grounds.
- A copy of the insurance policy and/or certificate (according to the type of document available with the claimant).
- Ensuring that all required attachments are submitted when filing cases through e-services on the website of the General Secretariat and that all submitted documents are in Arabic; translated versions must be provided in case the original version was made in a language other than Arabic, in implementation of Article (23) of the Law of Procedure Before Sharia Courts.
- 7 How is are territorially competent committees designated to decide on cases relating to insurance disputes and violations?

Pursuant to Ministerial Resolution No. (1648) dated (27/05/1436H), the territorial jurisdiction of Primary Committees is as follows:



- Riyadh Primary Committee: It has jurisdiction over disputes and violations occurring in the following regions: (Riyadh
 Al-Qassim Northern Borders Ha'il Al-Jouf).
- Jeddah Primary Committee: It has jurisdiction over disputes and violations occurring in the following regions: (Makkah
 Madinah Jazan Asir Al-Baha Najran Tabuk).
- Dammam Primary Committee: It has jurisdiction over disputes and violations occurring in the Eastern Region.
- The General Secretariat may, upon the request of the claimant if it is a natural person, refer the lawsuit to any other Primary Committee which has no territorial jurisdiction over the case, provided that the lawsuit has not been considered by the territorially competent Primary Committee.
- 8 How are cases, mutual memoranda of defense, dates of hearings and other processes communicated to the parties to cases?

Pursuant to Ministerial Resolution No. (1648) dated (27/05/1436H), defendants' notification is deemed valid when it is carried out by the General Secretariat employees through any of the following means:

- The mail address appearing on the defendants' publications.
- The e-mail address appearing on the defendants' publications or provided by the parties to the case.



• Text messages (SMS) to mobile phone numbers appearing on the defendants' publications or provided by the parties to the case.

9 How is a case that is brought before the General Secretariat managed?

The General Secretariat has sought to fully manage cases relating to insurance disputes and violations and appeal requests online through its e-portal at (http://www.idc.gov.sa/ar-sa/Pages/eService.aspx).

The e-portal regulates all procedures related to cases and appeal requests by providing interactive services which enable the following:

- The concerned parties or their delegates, as per the law, to file cases through the e-portal.
- The attachment of all documents necessary to file a case and any additional documents requested by the General Secretariat.
- Review of cases, and documents attached therewith, filed by the concerned parties or their delegates.
- The concerned parties or their delegates to provide responses and defenses to cases.
- A party to a case to request extending the defined waiting period to respond to another party's case or defense.
- The concerned parties or their delegates, according to the law, to view dates of hearings.
- The concerned parties or their delegates to follow up on the progress of cases.



- Notification of the parties to cases of any changes occurring to the status of the case, which includes sending a text message (SMS) and/or an email for notification of such change.
- The submission of appeal requests and follow-up on their status.
- An appellant against a decision of the Primary Committee is notified of the registration of their appeal, and upon approval of the appeal request, the appellee is notified of such request and provided with the appeal memorandum to respond thereto within a specified period. Note that it is possible to submit appeal requests through all other communication channels since there are regulatory deadlines for submission of such requests. Appeal requests can be submitted through email and/or directly by the appellant or their legal delegate by visiting one of the General Secretariat branches according to the geographic location.
- Notification of the issuance of the Primary/Appeal Committee's decision and its date of receipt in addition to the ability to print such decision through the e-portal.

10 What is required of the parties to cases when attending hearings held before the Committees?

- ID card or residence permit (Iqama) for identification.
- The original power of attorney certificate of the attorney-in-fact (if any).
- The original law license card of the lawyer (if applicable).
- To attend at the time specified in the notification, postal mail, email or text message (SMS) on mobile phones.



- The parties must be fully aware of the case subject, making their demands and stating their defenses, while avoiding anything that would prolong the resolution process.
- Furnishing all documents necessary to the case, and undertaking to provide the original version of such documents when requested by the competent committee.
- Ensuring that the data contained in the documents of the case are clear, free of omissions and editing, and certified according to the type of document and the capacity and authority of its issuer.
- Ensuring that required documents are provided in Arabic, and translated versions must be provided in case the original version was made in a language other than Arabic, in implementation of Article (23) of the Law of Procedure Before Sharia Courts.

11 What are the rules and regulations applied to insurance cases by the Committees?

The Committees apply the provisions of the Law of Procedure before Sharia Courts and the Criminal Procedure Code -as needed- for every case where the working rules and procedures of the Committees for Resolution of Insurance Disputes and Violations have no stipulations thereon, and to the extent to which they conform to the nature of the cases presented. They seek arbitration from the Law on Supervision of Cooperative Insurance Companies issued on (02/06/1424H) and amended by Royal Decree on (27/05/1434H), its Implementing Regulations and issued regulatory rules and instructions. The Committees also comply with regulatory standards and controls established for litigation and acceptance of dispute cases in terms of form and substance, in addition to ensuring that disputes presented fall within their scope of competence legally



specified. Moreover, the Committees settle suits in accordance with the nature of dispute and applicable rules and as agreed upon according to the law, comparative jurisprudence and international practices adopted in the insurance industry.

12 Is it permissible to appeal the decisions issued by the Committees, and when are such decisions deemed final and enforceable?

- Decisions issued by the Primary Committees can be appealed against before the Appeal Committee prescribed under Article (22) of the Law on Supervision of Cooperative Insurance Companies issued by Royal Decree No. (M/32) dated (02/06/1424H), as amended by Royal Decree No. (M/30) dated (27/05/1434H).
- The decisions of the Committees are deemed final and enforceable in the following cases:
- When the case is settled through conciliation by the parties before the Primary Committee, and such settlement is endorsed by the Committee.
- When the defined period for appealing against the Primary Committee's decision (30 days from the date specified for receiving the decision) expires without submitting a request for appeal.
- When a final decision, which may not be appealed against before any other authority, is issued by the Appeal Committee.



• Once a decision acquires finality by meeting one of the above conditions, the final decision should be verified with an execution stamp.

13 How can the General Secretariat be contacted?

At the toll-free number: (800-124-0042).

Through the website: (www.idc.gov.sa)