



Arbitro Assicurativo
Risoluzione Stragiudiziale Controversie

A SIMPLE GUIDE TO THE AAS



User guide on the rules of operation

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For any updates, please consult the website <https://www.arbitroassicurativo.org/>

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The **AAS**

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What is the AAS

The AAS – Insurance Ombudsman – is an alternative dispute resolution system. It provides a simple, quick, and cheap means of resolving disputes between consumers and insurance companies and/or intermediaries.

- The AAS is an independent and impartial body and is assisted in its work by IVASS – Istituto per la Vigilanza sulle Assicurazioni.
- The complaint is submitted online, through a portal that will guide you step by step through the procedure to follow, with examples and explanations to help you.
- No legal assistance or professional help is required to file a complaint (but you can get assistance if you want).
- The cost of filing a complaint is only € 20.

This guide provides you with useful information on how to file a complaint with the AAS. For further information about the AAS, you can consult the website <https://www.arbitroassicurativo.org/>.

The structure

The AAS decides on complaints with one or more **Panels**, **each** composed of independent experts.

Each Panel is composed of **five members**, appointed to ensure a balanced representation of all affected interests:

- the Chair and two members are selected by IVASS;
- one member is selected by the trade associations representing insurance undertakings or intermediaries;
- one member is selected by the associations representing customers (consumers and undertakings/professionals).



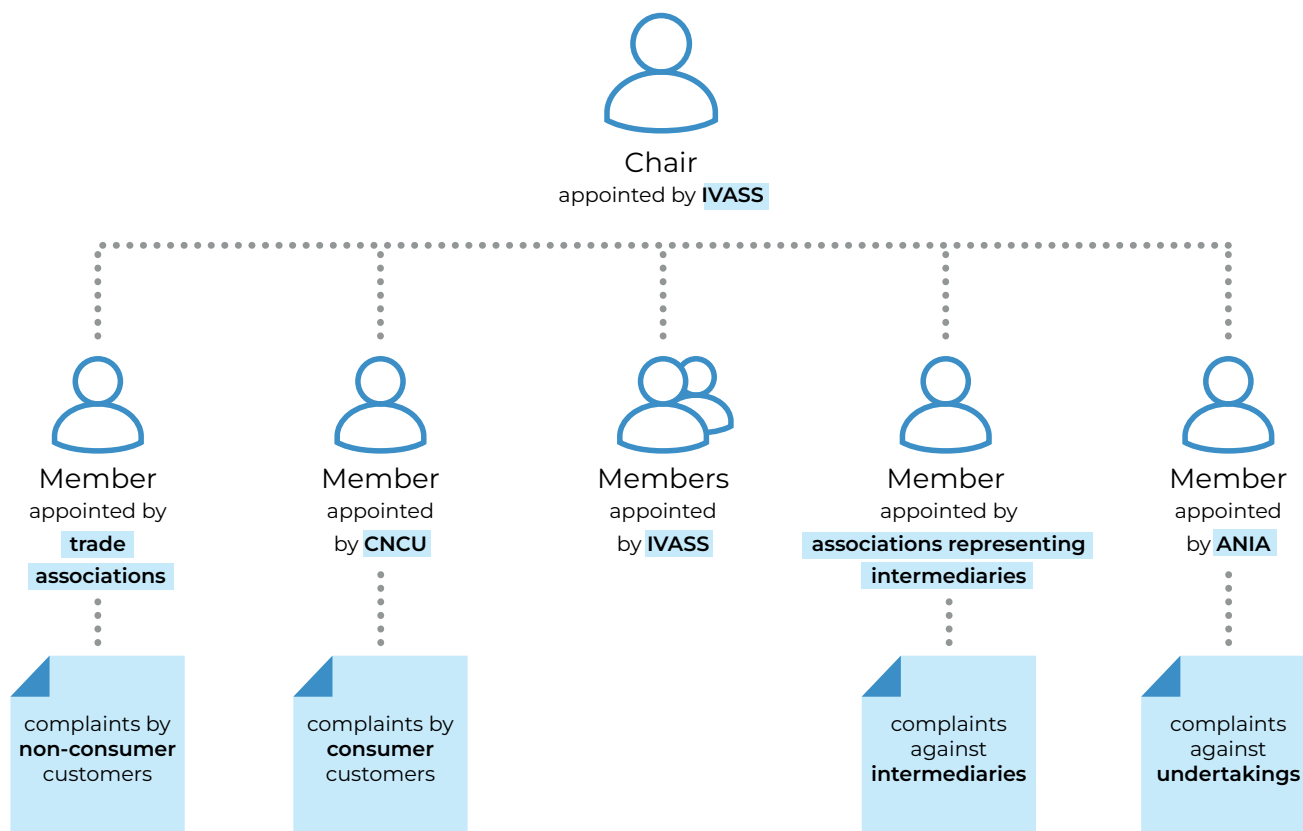
The background of the page features a stylized illustration in shades of blue and teal. It depicts a large hand at the top pouring small, coin-like shapes into a smaller hand below it. To the left, a woman with long, wavy hair is smiling, and to the right, a man with a beard and short hair is also smiling. The overall theme suggests financial transactions or support.

Who forms the Panel that decides your complaint?

If the recipient of your complaint is an **insurance company**, the member appointed by the companies will sit on the Panel that takes the decision. If, instead, the complaint is against an **intermediary**, the member appointed by the intermediaries will sit on the Panel.

If you are a **consumer client**, the Panel will include a member appointed by the CNCU. However, if you are an **entrepreneur** or a **professional**, a representative chosen by user associations other than consumers will be involved.

Composition of the Panel



The Panel is supported by a Technical Secretariat composed of IVASS staff, which verifies that the complaint is complete, in order, and submitted on time. It manages the exchange of documents and communications between the parties and assists the Panel in all phases of the proceedings.



Some questions
to learn more

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What can the AAS do

The AAS decides who is right or wrong in disputes between consumers and insurance companies and/or intermediaries.

Its decisions are not binding for the parties. However, if the undertaking or the intermediary does not comply with the decision of the Ombudsman, its non-compliance is made public in a dedicated section on the AAS's website for five years. Moreover, the undertaking or intermediary is required to publish the same information on its website for a period of six months. If the intermediary does not have a website, its non-compliance will be displayed on the premises where the intermediary carries on business. The publication of the notice of non-compliance must be communicated to the Technical Secretariat, which, in the absence of such communication, will note this circumstance on the AAS website.

If the decision of the AAS is not deemed satisfactory, either party may still submit the dispute to the civil court.

When can you turn to the AAS

You can complain to the AAS if your dispute concerns an insurance contract, provided that the latter has been concluded and you are the **policyholder**, the **insured**, the **beneficiary** or an **injured party** having a direct right of action against the insurance undertaking (for example, in the case of MTPL).



If you request payment of a **sum of money**, the complaint to the AAS is subject to specific value limits:

- **€ 300,000** for life policies providing for the payment of a benefit only in case of death;
- **€ 150,000** for all the other life policies;
- **€ 25,000** for non-life policies (e.g. home, health, travel);
- **€ 2,500** if you are an injured party and have a direct right of action against the undertaking in the cases mentioned above (for example, when MTPL claims fall within the direct compensation procedure referred to in article 149 of the CAP, the complaint must be filed against your insurance company).

However, if your complaint does not concern the payment of a sum of money because the dispute relates to the **assessment of rights, obligations, and powers** arising from the contract (for example, which risks are included and which are excluded), **there are no value thresholds**.

When can't you turn to the AAS?



The AAS can help you resolve many types of disputes, but not all of them. There are some situations in which **it is not possible to use this tool**. Let's look at them together, in simple words.

You cannot complain to the AAS:

- if your complaint concerns a contract that has not been concluded, i.e. it has not been signed;
- if your dispute concerns a road accident where intervention is required from the **Guarantee Fund for Victims of Road Accidents** (such as where the vehicle liable for the damage has not been identified, was uninsured, or was stolen) or from the **Guarantee Fund for Hunting Victims**, in the event of hunting accidents caused by uninsured hunters;
- if the matter falls within the remit of **CONSAP** (such as, for example, the conduct of loss adjusters);
- if you have a policy covering "**large risks**" used in specific areas such as industry, shipping, or air transport;
- if it is necessary to take **witness evidence or expert reports** in order to resolve the matter. **Bear in mind that the AAS decides only on the basis of the documents submitted by the parties;**
- if you **have already pursued court action, initiated a mediation or an assisted negotiation** for the same issue (but you can complain to the AAS if a mediation or assisted negotiation procedure has concluded without an agreement);
- if the AAS **has already ruled on the merits** of your dispute.

Moreover, as we shall see more clearly below, you cannot lodge a complaint when:

- the undertaking or intermediary against whom you wish to file a complaint is from another country belonging to the EEA (European Economic Area), carries on business in Italy under the FOS regime (freedom of service: i.e. without a permanent presence) and **has joined another out-of-court redress system in their home country;**
- you have not submitted a **claim to the company or intermediary**, or you submitted it more than one year ago;
- the facts on which your complaint is based date back **more than three years before** the presentation of the claim to the company or intermediary.

Against whom a complaint may be filed

You can only lodge a complaint with the AAS against certain subjects.



Insurance undertakings
with head office in Italy



Insurance intermediaries
with head office in Italy



Insurance undertakings and/or insurance
intermediaries having their head office
in another EEA country and pursuing
business in Italy through a branch
(**right of establishment**)



Insurance undertakings and/or insurance
intermediaries having their head office
in another EEA country and pursuing
business in Italy without a branch
(**FOS - freedom of service**)

provided that they have not declared
that they have joined another ADR
within the FIN-NET



Insurance undertakings with head office
in a non-EEA country pursuing business in
Italy through a branch

You can lodge a complaint against
the company or the intermediary,
or against both if you have **separate
reasons against each**.

You can use the **interactive
questionnaire** available on the
AAS website to identify the subject
against whom to file the complaint.





What is FIN-NET?

FIN-NET is the European network that promotes cooperation among national ADR schemes for disputes in the **insurance, banking, and financial** sectors.

FIN-NET provides consumers with easy access to alternative dispute resolution procedures in disputes about cross-border provision of financial services.

Further information is available on the [FIN-NET website](#) and on the AAS website.

What do you have to do before contacting the AAS

Before submitting a complaint to the AAS, **you must have lodged a written claim with the insurance undertaking or intermediary, which has 45 days to reply.** If you do not receive a response within this timeframe, or if the reply you receive is not satisfactory, you can contact the AAS.

When filing the complaint, you must also verify that:

1. no more than 12 months have passed since the date on which you submitted the claim;
2. the subject matter of the complaint must not have occurred more than 3 years before you submitted the claim



Be careful: without a prior claim and beyond the stipulated time limits, your complaint may not be decided.

It is not mandatory to submit a claim to IVASS before complaining to the AAS. It is sufficient that you have filed a claim with the company and/or intermediary. If a complaint is submitted to the AAS and a claim is simultaneously filed with IVASS concerning the same issue, IVASS automatically ends its handling of the claim.

Who should you submit your claim to?

To identify the recipient of your **claim**, follow these simple instructions:

- if the problem concerns an **insurance company**, the claim should be sent **directly to the company**;
- if it concerns an **insurance agent** (registered in section A of the RUI), a **direct canvasser** (section C), an **ancillary intermediary** (section F), or one of their **collaborators or employees** (section E), you must always send the claim **to the company they work for or to the intermediary**;
- if it concerns a **broker** (section B of the RUI), send the claim **directly to the broker**;

- if it concerns a **bank or other financial intermediary** (section D of the RUI), send the claim to the **bank or financial intermediary**;
- if the dispute involves an **employee or collaborator** of a broker, bank, or other financial intermediary (section E), the claim should be sent to the **broker, bank, or financial intermediary they work for**;
- if it concerns a **foreign intermediary** (registered in the list annexed to the RUI), the claim should be sent **directly to the foreign intermediary**.

How much does a complaint cost and how is it paid

To lodge a complaint with the AAS, you must pay **a fee of €20** to cover the procedural costs.

If the complaint is upheld, or even only partially upheld, the undertaking or the intermediary must reimburse you the fee.

Payment is made **via the PagoPA platform**, directly from the **AAS Portal**, following a guided procedure.

How long does it take to receive a reply

Once your complaint is received, a procedure is initiated that follows a specific timeline and is managed by the Technical Secretariat established at IVASS:

- the undertaking or intermediary has **40 days** from receiving the complaint to transmit its defence brief; you then have **20 days** to reply to the defence brief; the undertaking or intermediary may in turn reply with a rejoinder within **20 days**;
- **within 90 days** from the date of completion of the file you will receive the communication of the outcome of your complaint.

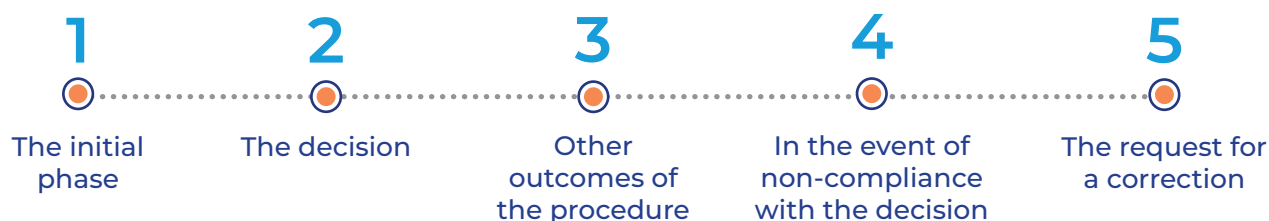
If the dispute is particularly complex, the 90-day term may be **extended only once for a further period not exceeding 90 days**. In this case, the Technical Secretariat will inform you of this extension and of the new deadline for the conclusion of the procedure.



The procedure
step by step

3

The procedure consists of 5 phases:



1

The initial phase

The complaint is submitted online, through the **AAS Web Portal**. This is a simple and interactive tool that assists users in filing a complaint through a guided procedure.

After the complaint is submitted, the **Technical Secretariat** verifies the completeness, regularity and timeliness of the documentation submitted. If the documentation you submitted is incomplete or illegible, you will be asked to **supplement the missing information** within **10 days**.

2

The decision

The complaint is decided by the Panel based exclusively on the documentation filed. You will be notified of the decision and its **reasoning**.

The Panel normally decides **on the basis of the law**, but in some cases, it may decide **according to equity**, for example, for disputes on **motor liability insurance** or at the mutual request of the parties.

If your complaint is upheld, even if only partially, **the insurance undertaking and/or the intermediary** must comply within **30 days** and reimburse you the **fee to cover the procedural costs**.

3

Other outcomes of the procedure

The procedure may conclude without a decision on the merits, i.e. when the Panel decides who is wrong or right.

The Panel may for example make a **conciliation proposal** to the parties. If the proposal is accepted, the procedure concludes without a decision. Another possibility is that the parties independently reach an agreement to settle the dispute amicably.

The Panel could also establish that, to decide the complaint, **further investigations** are required that the AAS cannot order. In this case, the Panel may not decide on the merits of the dispute.

Finally, the Panel does not decide on the complaint when the latter is **inadmissible**, for example when:

- the dispute does not fall within the jurisdiction of the AAS, either by subject matter or by value;
- no preliminary claim has been filed with the undertaking and/or intermediary or the relevant time-limits have not been complied with;
- you have not paid the fee to cover the procedural costs;
- another ADR proceeding, or a court judgment, is already pending on the same issue;
- the documentation submitted is incomplete and has not been regularised.

Keep in mind that you may also decide to **withdraw the complaint**. This is possible until the Panel has issued its decision.

In all cases where a decision on the merits is not made, the €20 fee to cover the procedural costs is not refunded.

4

In the event of non-compliance with the decision

The insurance company or intermediary is deemed to be **non-compliant if they do not implement the provisions stated** in the AAS's decision.

In the event of non-compliance, the information is published for **five years** on the AAS's website, in the list of **non-compliant companies and intermediaries**. In addition, the non-compliance is prominently displayed on the **home page of the company's or intermediary's website** for the duration of **six months**. Remember that if the intermediary does not have a website, the information must be made public in its premises. The company and/or the intermediary shall notify the Technical Secretariat that they have arranged for the publication or posting in their premises. Failing this, this fact is recorded on the AAS website.

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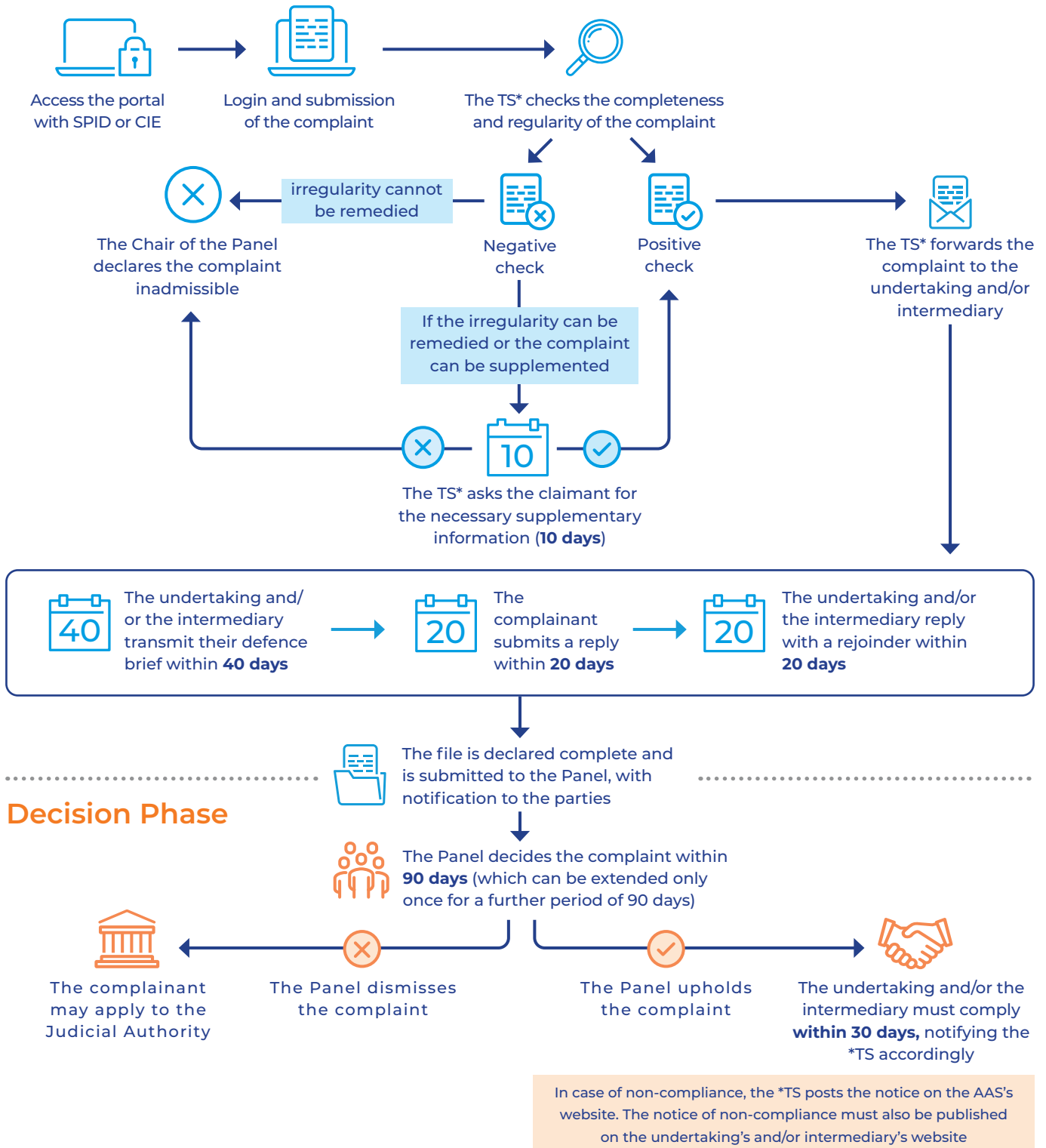
The request for a correction

If the decision contains **omissions or material or calculation errors**, you may ask for it to be corrected within the term of **30 days** of the communication of the decision. The **insurance company** or the **intermediary** may also file a request for correction within the same deadline.

The procedure in an image

Investigation Phase

*TS: Technical Secretariat



Contacts

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Consumer contact center

IVASS Consumer Contact Center provides information, guidance, and assistance to consumers in the field of insurance, informing them of their rights, the applicable insurance regulations, and the regular pursuit of insurance business by undertakings and intermediaries, as well as the functioning of the AAS, how to lodge a complaint and use the relevant portal, and the status of a complaint that has already been lodged.

You can call the IVASS Consumer Contact Center:

- from Italy, at the **toll-free number** 800 486661 (available from Monday to Friday from 8:30 to 14:30);
- **for calls from abroad, dial** +39 06 9435 8604.

Request for support through the portal

You can request support directly through the AAS Portal, by accessing the Reserved Area to submit assistance requests concerning complaints already submitted or in the process of being completed.





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ISTITUTO PER LA VIGILANZA
SULLE ASSICURAZIONI

