

ENHANCING CONSUMER SUPPORT



Table of Contents



About	3
Message from the Chair	4
Message from the ED and O	6
Analytics & Reporting	9
Case Studies	16
Audited Financial Statements	20
Member Companies	24
Board of Directors	25
Our Service Promise	30

OLHI - Supporting Consumers Every Day





The OmbudService for Life and Health Insurance (OLHI) is a free, fast, independent, and impartial alternative dispute resolution public service for Canadian life and health insurance consumers.

OLHI provides accurate and accessible information about life and health insurance concerns.

This includes guiding consumers through the complaints process, answering their questions, and helping them find lost policies or policies of deceased loved ones.

Our services are:

Free	Fast	Impartial	Independent
Our services are completely free to consumers.	OLHI is faster than going to the courts. We make every effort to complete our review of complaints within 120 days.	We take an impartial look at all the facts. We don't take the side of the consumer or the insurance company.	We are governed by a Board of Directors with a majority of independent directors. OLHI operates in accordance with a framework of ongoing collaboration among insurance sector OmbudServices and the Canadian Council of Insurance Regulators.
	Visit olhi.ca	to learn more	

Message from the Chair: Dr. Janice MacKinnon

Fourth Independent Review

The past year has been one in which our achievements to date have been recognized and a new path forward has been charted. Our fourth independent review conducted by Serge Dupont, former Deputy Clerk of the Privy Council of Canada, and Laurie Wright, a former senior leader with Canada's Department of Justice, was completed. It highlighted some of our significant achievements including a vastly enhanced website, substantial efforts on public education outreach, salutary changes to the complaints review process, and "more careful assessment before reaching a decision that a complaint is outside OLHI's jurisdiction."

The reviewers also assessed the governance policies and practices of the Board of Directors. The report commended the Board for making changes to improve our governance: for example, the Board established a very thorough and transparent process, including the development of a skills matrix for recruiting independent directors. The reviewers stated: "We conclude that OLHI is very well governed by its Board which is strong and committed."

2021-2024 Strategic Plan and Ongoing Initiatives

The 2023-24 fiscal year was also the final year of the strategic plan, which served as a guide for all our activities during this 3-year period. The outcomes are positive. More consumers are aware of OLHI's existence, we have used data analytics to enhance our operations and most importantly, we have taken numerous steps to improve our public service mandate.

Over the current year and beyond, we will continue to dedicate our efforts to ongoing improvements in the provision of independent, impartial, and free alternative dispute resolution services in accordance with OLHI's governing principles.

Our path forward will be guided, in part, by the independent review's recommendations to improve our services and accountability. For example, we are working to implement the recommendation to make our services more accessible. We also welcome the recommendation that OLHI undertake "a consumer satisfaction survey [that] would further support the organization's accountability to consumers on matters not covered by the real time consumer perception surveys." We will also adopt the recommendation that the consumer satisfaction survey would "look at consumer perceptions related to timeliness, courtesy and impartiality of services."

Message from the Chair...continued

OLHI will also be participating in the working group to update the Insurance Ombudservices Cooperation Framework with the CCIR, and other stakeholders. The working group will be collaborative with consensus-based decision making and will consider ways to improve the framework while at the same preserving OLHI's independence and the privacy and confidentiality of our information.

New Leadership

A new path forward is also reflected in a change of leadership at OLHI. In March, the previous CEO and Ombudsman, Glenn O'Farrell, resigned; on behalf of the Board of Directors, I want to thank him for his contribution to OLHI. The Board undertook a national search for a new Executive Director and Ombudsman that was extensive and involved consultation with our key stakeholders.

After a lengthy search, the Board appointed Stéphanie Robillard, B. Soc. Sc., LL.L., LL.M., as OLHI's new Executive Director and Ombudsman. This decision marks a new chapter in our leadership. Stéphanie has extensive academic credentials, an impressive track record, and expertise in life and health insurance and alternative dispute resolution services. We are confident that under her leadership, OLHI will build on the successes of the past to chart an even more impressive future for our organization.

Thank You to our partners and the Team

While our world continues to change, one constant from year to year is our commitment to maintaining solid working relationships with Member Companies and Regulators across the country.

On this note, I would like to express, on behalf of OLHI's Board and management, our thanks and appreciation to OLHI's Member Companies, for your ongoing goodwill and your continued trust in and support of our work.

I would also like to acknowledge the hard work and diligence of our Board members, who take their fiduciary responsibilities very seriously.

Finally, I want to acknowledge and thank our OLHI staff. OLHI is a small organization with a big mandate, and we have a strong and dedicated team whose hard work is critical to our success.

Message from the Executive Director and Ombudsman: Stéphanie Robillard

I am proud to take on the position of Executive Director and Ombudsman. My experience as an accredited mediator and in private legal practice with the insurance industry for more than twenty years, has prepared me well for the role. Alternative dispute resolution has always been a fundamental aspect of my career. Having joined OLHI as an OmbudService Officer in 2019 and serving as the Senior Deputy Ombudsman since 2020, I am pleased to fulfill this new role and eager to contribute to OLHI's continued success.



Fourth Independent Review

We are encouraged by the fourth independent review's acknowledgment of our dedication to giving our consumers and members a fair, impartial and objective complaint review process. We are also pleased with the Bennett Jones report's finding that "the review of case files substantiates that OLHI does indeed put a fair process at the heart of its work."

Among the highlighted developments, the reviewers note improved strategic planning including using metrics based on better data quality and analysis and operational changes to the complaints review process designed to increase efficiency. The report recognizes the efforts made by OLHI's team to work closely with the consumers to better understand and help them articulate their complaints and to improve written communications with consumers, providing more information to explain decisions.

In terms of the scope of our services, the report also acknowledges significant strides made by OLHI in the past years to meet the public policy objective of consumer protection in adopting a more generous approach in the interpretation of our terms of reference. This includes determining whether a part of a complaint could be considered even if other aspects are not within OLHI's mandate.

Most of the recommendations concern implementation and improvements in website accessibility, periodic consumer surveys, as well as changes in the final stage of OLHI's complaint review and the development of a written standard for such escalation. We shall continue to work closely with the Board to implement the recommendations of the fourth independent review in the coming year.

Message from the Executive Director and Ombudsman...continued

Operational Updates and Key Metrics

In respect of key metrics, OLHI saw a total of 1618 complaint inquiries this year. Some 17% of these inquiries were referred to complaint analysts for review, 8% more than last year. We continue to maintain a strong online presence and saw a 14% increase in overall web sessions across OLHI's websites.

Significant efforts have been made since April 2023 to adopt a more careful approach and a less restrictive interpretation of our terms of reference. We have also had ongoing success with negotiations at the complaint analyst review level for timely and efficient complaint resolution.

Finally, our transition to a new software version was completed in the winter of 2024, giving us more flexibility and potential for data analysis. We are especially interested in identifying ways to raise our complaint review efficiency and are currently collecting the data to do so.

New Senior Deputy Ombudsman

I am pleased to announce and welcome Dorothée Beaupré Bernier as our new Senior Deputy Ombudsman. She joined the team at OLHI on September 9, 2024. Dorothée has a law degree and is currently completing her Masters in Dispute Prevention and Resolution (DPR). She has wide-ranging experience in the life and health insurance industry and ombudsman services. Her expertise will undoubtedly be a great asset for our organization.

Stakeholder Relations

I was gratified to attend the Canadian Life and Health Insurance Association (CLHIA) Compliance and Consumer Complaints Conference in May of 2024. Our presence at the conference gave us a chance to showcase OLHI's commitment to maintaining strong partnerships with our member companies and other stakeholders. I want to express my sincere gratitude to all my colleagues at the Canadian Council of Insurance Regulators (CCIR), the CLHIA, the General Insurance OmbudService (GIO), and other partners who have lent their support and commitment to OLHI. Your collaboration is essential to our success, and we look forward to continuing our work together in the coming year.

Message from the Executive Director & Ombudsman...continued

Thank You to the Team

The dedication and hard work of the entire OLHI team were crucial to achieving these milestones. I would like to offer special thanks to the team for their constant efforts. We are eager to advance our mission and serve Canadian consumers and our member companies with integrity and excellence. Thank you to Glenn O'Farrell, previous CEO & Ombudsman for sharing his extensive knowledge and experience with me and to Tim Wilson, previous Head of Public Education and Strategic Planning for the creation of new ideas. I am also grateful to the Board of Directors for their trust and invaluable support throughout this transition.





Analytics & Reporting

Our Intake Process



Consumers come to OLHI for information or guidance.

OLHI responds to three types of inquiries: consumer assistance, complaints, and policy search requests from consumers looking for a policy of a deceased.

OLHI can review a complaint if:

- The complaint involves one of our member companies and falls within OLHI's mandate; and
- The consumer has received a final position letter from the insurer.

OLHI's Complaints Manager ensures the consumer complaint meets the above conditions.

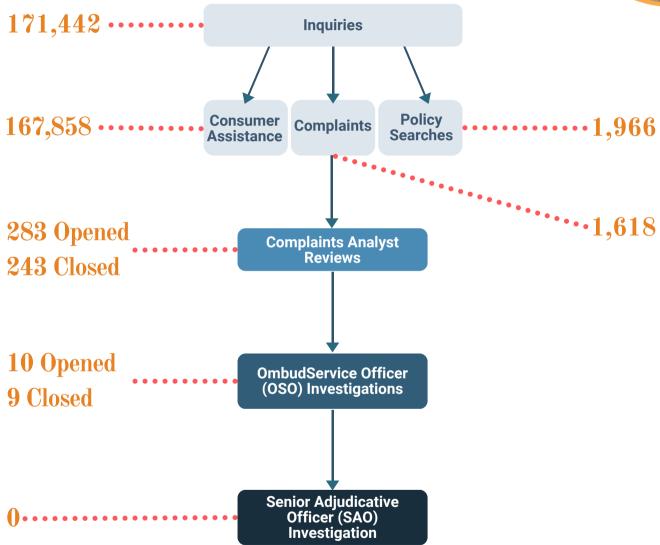
If the complaint is deemed reviewable, a Complaints Analyst starts an impartial review to determine if it has merit, discussing it with both the insurer and the consumer and gathering more information. OLHI's complaints team works with the consumer and the insurance company to resolve cases as quickly as possible.

If the Complaints Analyst finds the complaint has merit, an OmbudService Officer (OSO) investigates the complaint. If the OSO determines there is merit to the complaint, OLHI will facilitate discussions with the insurer and consumer to try to find an acceptable solution for the parties.

If a settlement is not reached at the OSO level, a Senior Adjudicative Officer (SAO) may investigate the complaint. If the SAO finds merit, OLHI will make a non-binding settlement recommendation. OLHI will publish the names of insurers that do not accept our recommendations. Insurers have always accepted SAO recommendations.

Our Intake Process: 2023-24 Overview





In 2023-24,OLHI received and assessed 1,618 complaint inquiries; 283 were deemed to be reviewable complaints.

All Inquiries

1,618
Complaint Inquiries

167,858

Consumer Assistance Inquiries

Consumer Assistance Inquiries include all types of consumer inquiries including fax, email, mail, phone, web forms and web sessions. The majority of OLHI's inquiries are web sessions.

1,966

Policy Search Inquiries

Total of 171,442







1,404 Calls



40 Mail

A **Web Session** refers to a consumer inquiry that leads to a series of interactions between the consumer and OLHI on our French or English portals.



2,428 Webforms



32 Email



/ Fax

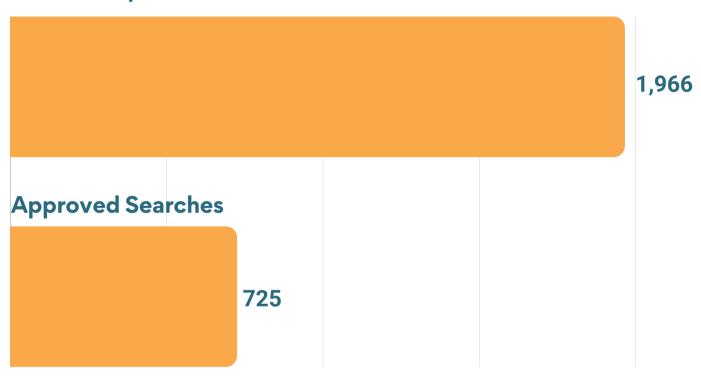
Webform refers to a consumer who submits an inquiry directly on one of OLHI's French or English web portals.

Policy Searches

If a consumer is unable to find a life insurance policy of a deceased, OLHI may be able to do the search on the consumer's behalf by contacting our member companies.

Every year, OLHI responds to hundreds of such search requests we receive from consumers on our French or English web portals. A Policy Search request is approved if it meets specific criteria related to when the deceased passed away.

Search Requests Received

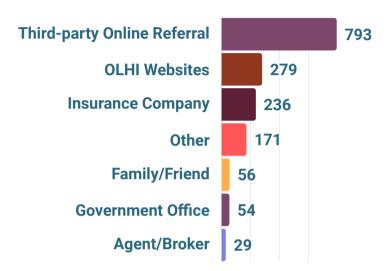


Complaint Inquiries

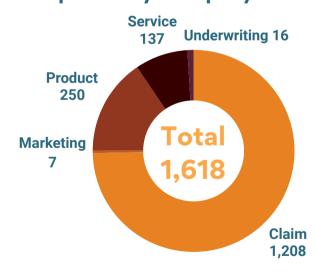
Complaints by product



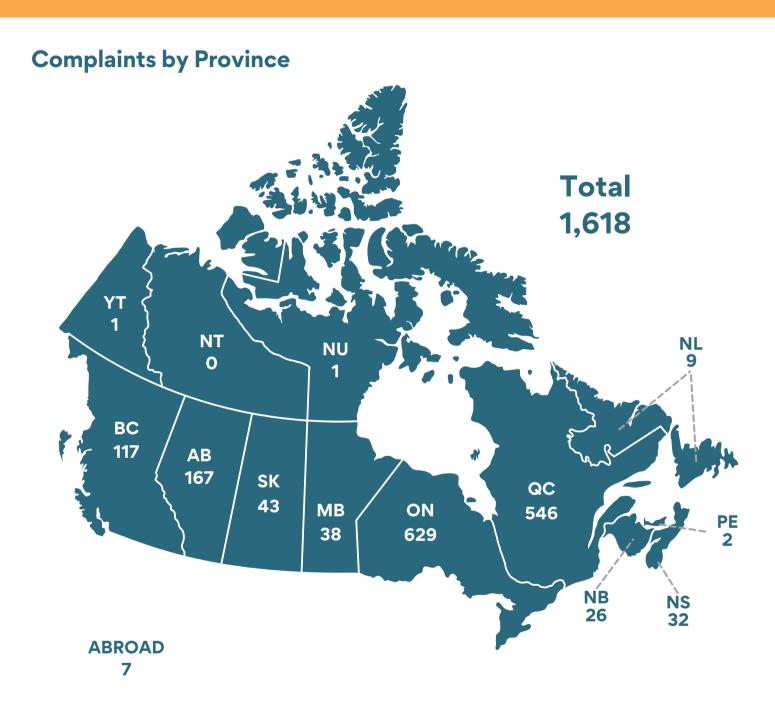
Complaints by Referral Source



Complaints by Company Function



Complaint Inquiries: Where They Come From



Case Studies

Case Study 1: Birth date causes premium miscalculation

Date of Birt

Lucy took out a 20-year term life insurance policy with a \$100,000 death benefit in the early 2000s. 15 years later, she called her insurer to change her address. At that time, the insurer realized that Lucy's birth date on its records was incorrect.

Because of this error, the insurer told Lucy she had been undercharged for her premiums for over 15 years, and that she needed to pay the premium difference to keep the \$100,000 death benefit. When Lucy opted not to pay the premium difference, the insurer reduced the death benefit by almost half.

Lucy then completed her insurer's internal complaints process and received a final position letter; she then submitted a complaint to OLHI. OLHI reviewed the complaint, establishing these material facts:

- The original birthdate the insurer entered on Lucy's file was incorrect; Lucy was 40 years old when she applied for the coverage, but she was 41 when the insurer issued the policy.
- The insurer had calculated lower monthly premiums based on the incorrect age when the
 policy was issued. They would have been higher if calculated using Lucy's actual age of 41
 on the date of issue.
- Lucy received no documentation when the policy was issued that listed the incorrect birth date. Subsequent annual statements she received did not list her date of birth.
- It was over 15 years after the issue date that the insurer realized its error.

Our complaints team found Lucy's complaint had merit because it was the insurer that made the original error with the birthdate; there was no reasonable expectation that Lucy would have known about the mistake. The insurer accepted OLHI's recommendation to return the death benefit to \$100,000 and absorb the higher premium. In return, Lucy agreed to pay a higher premium going forward.

Case Study 2: Automatic renewal complaint resolves with partial refund

Sidney and Jeanne had a 20-year term life insurance policy. They were surprised to learn the insurer had continued to withdraw premiums at a higher rate from their bank account for over a year after the initial 20-year term.



The couple raised their concerns with the insurer, requesting a refund of all premiums paid after the original expiry date of the policy. When the insurer declined to refund the charges, Sidney and Jeanne obtained a final position letter and submitted a complaint to OLHI.

OLHI's review of the complaint found that the policy showed an increase in the premium table after the end of the 20-year term, but there was no wording in the contract that said the insurer could automatically renew the policy. As consumers thought the policy would come to an end by default, they did not advise the insurer of their address change and therefore, did not receive the premium increase notice.

Our complaints team told the insurer we believed the complaint had merit because the policy did not specifically say that it could be renewed automatically at the end of the original 20-year term. While the couple should have also noticed the withdrawals from their bank account earlier, it is understandable that Sidney and Jeanne thought their policy would lapse automatically as there was no mention of term renewal in the contract.

Due to the amount of time it took to notify the insurer of this problem and accounting for the fact that the insurer was still providing coverage to the couple for over a year, a partial refund representing the amount of the premium increase was issued to the couple after OLHI's discussion with the insurer. Considering the facts, this settlement seemed fair and was agreed upon by both parties.

Case Study 3: Complaint Review helps consumer get back on disability payments

Ruby had a successful career in transportation, travelling around her province and managing several clients. When she fell ill due to mental health, she went on short-term and then long-term disability (LTD).

After several months, Ruby felt better and asked her healthcare team to help her return to her work duties. Her team advised she could work if it did not involve travelling and similar accommodations. Ruby's LTD payments stopped when she returned to work, as she was no longer considered "totally disabled" according to her policy wording.

Unfortunately, Ruby's symptoms came back just one month later. When she provided documentation indicating that she was again, "totally disabled" and unable to work, her insurer did not restart the LTD payments. In its view, they did not have evidence that Ruby's condition met the definition of "totally disabled."

After Ruby received her insurer's final position letter, she submitted a complaint to OLHI. We confirmed the following:

- Ruby's mental health condition, symptom severity and resulting limitations were well documented in her medical records.
- She had complied with all medical advice, attended all appointments, and followed all prescribed treatments.
- The policy included a provision of "recurrence" of a disability, where if the insured becomes sick again within six months, they do not have to file a new claim. Instead, the initial claim is continued when the insurer receives supportive medical documents.
- Ruby's symptoms came back within six months after the end of the original period of LTD coverage, well before the cutoff date.

Based on the above, OLHI's complaints analyst made a recommendation for the insurer to approve Ruby's claim and provide long-term disability payments according to the policy wording. The insurer agreed and reinstated Ruby's monthly payments.

Audited Financial Statements

Statement of Financial Position

March 31, 2024, with comparative information for 2023

		2024	2023
Assets			
Current assets:	920		
Cash and cash equivalents	\$	1,941,924	\$ 1,677,804
Prepaid expenses and deposits		55,718	44,648
Accounts receivable		250	2,786
		1,997,892	1,725,238
Capital assets		-	9,193
	\$	1,997,892	\$ 1,734,431
Current liabilities: Accounts payable and accrued liabilities	\$	675,623	\$ 291,101
Fixed belower			
Fund balance: Operating fund:			
Operating fund: Invested in capital assets		-	9,193
Operating fund:		1,322,269	1,434,137
Operating fund: Invested in capital assets		1,322,269 1,322,269	

Audited Financial Statements continued...

Statement of Operations

Year ended March 31, 2024, with comparative information for 2023

	2024	2023
Revenue:		
General assessment fees	\$ 2,519,115	\$ 2,436,803
Investment income	50,594	9,420
	2,569,709	2,446,223
Expenses:		
Staff and adjudicative services	1,839,974	1,741,460
Professional fees	271,646	136,722
Board of Directors' fees	187,278	172,048
Board meetings and travel	96,368	92,694
Management fees	90,661	92,587
Information technology	44,461	90,088
Rent and occupancy	39,049	72,452
Staff meetings and travel	29,458	34,099
Communications	24,426	39,662
Telecommunications	17,733	19,249
Insurance	15,868	7,903
Supplies and services	10,549	18,472
Training and development	10,011	7,142
Amortization of capital assets and intangible assets	9,193	45,937
Translation	4,095	972
	2,690,770	2,571,487
Deficiency of revenue over expenses	\$ (121,061)	\$ (125,264)

Audited Financial Statements continued...

Statement of Changes in Operating Fund Balance

Year ended March 31, 2024, with comparative information for 2023

	2024							2023			
	-	nvested n capital assets	ι	Inrestricted operating fund		Total		Invested in capital assets	ι	Inrestricted operating fund	Total
Net assets, beginning of year	\$	9,193	\$	1,434,137	\$	1,443,330	\$	55,130	\$	1,513,464	\$ 1,568,594
Deficiency of revenue over expenses		(9,193)		(111,868)		(121,061)		(45,937)		(79,327)	(125,264)
Net assets, end of year	\$	_	\$	1,322,269	\$	1,322,269	\$	9,193	\$	1,434,137	\$ 1,443,330

Audited Financial Statements continued...

Statement of Cash Flows

Year ended March 31, 2024, with comparative information for 2023

	2024	2023
Cash provided by (used in):		
Operating activities:		
Deficiency of revenue over expenses	\$ (121,061)	\$ (125,264)
Items not affecting cash:		
Amortization of capital assets and intangible assets	9,193	45,937
Change in non-cash operating working capital:		
Prepaid expenses and deposits	(11,070)	(20,218)
Accounts receivable	2,536	81,178
Accounts payable and accrued liabilities	384,522	124,069
Deferred lease inducement	_	(14,566)
		_
Increase in cash and cash equivalents	264,120	91,136
Cash and cash equivalents, beginning of year	1,677,804	1,586,668
Cash and cash equivalents, end of year	\$ 1,941,924	\$ 1,677,804

Our Members

- Acadie Vie
- Actra Fraternal Benefit Society
- Aetna Life Insurance Company
- Alberta Blue Cross
- Allianz Care
- American Health and Life Insurance Company
- Assomption Compagnie Mutuelle d'Assurance-Vie
- Assurance-Vie Banque Nationale
- Assurant
- Aviva Canada
- Beneva
- BMO Life Assurance Company
- BMO Life Insurance Company
- Brookfield Annuity Company
- Canada Life Assurance Company
- Canassurance (Association d'Hospitalisation Canassurance)
- Chubb Life (Chubb Insurance)
- CIBC Life Insurance Company Limited
- CIGNA Life Insurance Company of Canada
- Combined Insurance Company of America
- CompCorp Life Insurance Company
- Co-operators Life Insurance Company
- Desjardins Sécurité Financière
- Europ Assistance S.A. Canada Branch
- First Canadian Insurance Corporation
- Foresters
- Foresters Life Insurance Company
- · Green Shield Canada
- Group Medical Services
- Humania Assurance Inc.

- Industrielle Alliance, Assurance et Services
- ivari
- Knights of Columbus
- L'Union-Vie, Compagnie Mutuelle d'assurance
- Manitoba Blue Cross
- Manulife Financial
- Medavie Blue Cross
- Munich Reinsurance America Inc.
- New York Life Insurance Company
- Pacific Blue Cross
- Pavonia Life Insurance Company of Michigan
- Primerica Life Insurance Company of Canada
- RBC Life Insurance Company
- Reliable Life Insurance Company
- Saskatchewan Blue Cross
- Scotia Life Insurance Company
- Securian Canada Canadian Premier Life
- Serenia
- Starr Insurance & Reinsurance Limited, Canadian Branch
- Sun Life Financial Inc.
- TD Life Insurance Company
- Teachers Life Insurance
- The Empire Life Insurance Company
- The Equitable Life Insurance Company of Canada
- The Wawanesa Life Insurance Company
- Trans Global Insurance Company
- TruStage Life of Canada
- Zurich Canada

Our Board: Independent Directors



Dr. Janice MacKinnon Independent Director and Chair of the Board

Dr. Janice MacKinnon is a Fellow of the Royal Society of Canada, a member of the Order of Canada, and a former Saskatchewan Finance Minister, who also served as Minister of Economic Development and Social Services. During her tenure as Finance Minister, Saskatchewan became the first government in Canada to balance its budget in the 1990s.

She is a Professor of fiscal policy at the University of Saskatchewan and an Executive Fellow at the University of Calgary School of Public Policy and is the author of three books and many articles on public policy issues. She has also served as the Chair of the Board of the Institute for Research on Public Policy, as a board member of the Canada West Foundation, and is currently on the Advisory board of the Canadian Global Affairs Institute.

She served as Chair of Canada's Economic Advisory Council from 2010 to 2015. She was also appointed to the federal advisory panel on NAFTA and the environment. She co-chaired the Manitoba Commission reviewing the province's K-12 education system. In 2019, Alberta Premier Jason Kenney appointed her as Chair of Alberta's Blue Ribbon Panel on Alberta's Finances. She currently serves on the Board of Governors of the University of Alberta.

As Chair of the OLHI Board of Directors, Dr. MacKinnon brings considerable expertise in finance, public policy, government relations, strategic planning, and governance.



Dan Levert
Independent Director

Dan Levert is a Professional Engineer and Construction Lawyer from St. John's, Newfoundland. He is a Fellow of the Engineering Institute of Canada, and of the Canadian College of Construction Lawyers. He served as President and CEO of Engineers Canada from 1998 – 2000. Prior to his retirement in 2015, Mr. Levert was Associate General Counsel for the Kiewit Corporation, a construction company with an annual volume of \$12 billion.

In a career that has spanned more than thirty years, Mr. Levert has been involved in many of Canada's largest infrastructure, hydroelectric, mining, and oil and gas projects. Most of these mega-projects involved complex multiparty negotiations with First Nations, federal, provincial, and local governments as well as the owners, designers and contractors building the work.

Since 2000, he has been involved with the Newfoundland and Labrador oil and gas and mining industries. As Project Counsel for the design and construction of the \$10 billion Hebron Offshore Oil Platform, he served as a member of the board of the Hebron Project Employers' Association, which maintained labour peace throughout the seven-year project. Mr. Levert, a trained arbitrator and mediator, has focused on resolving disputes in an amicable and fair manner, thereby avoiding costly, time-consuming litigation.

A francophone from New Brunswick, Mr. Levert has strong ties to his home Province where his siblings reside, and to his alma mater, the University of New Brunswick.

As an Independent Director on the OLHI Board, Mr. Levert brings a wealth of experience in dealing with multiple stakeholders, consensus building, alternative dispute resolution, and the law.

Our Board: Independent Directors continued...



Leah Myers
Independent Director

Leah Myers is an experienced public policy executive, with a proven track record over her 30-year career with the Ontario government of shaping new strategic directions, working collaboratively with a broad array of stakeholders, and leading complex initiatives. She is a certified Board Director (ICD.D).

As Assistant Deputy Minister (ADM) for Income Security and Pension Policy at the Ministry of Finance, Ms. Myers developed and implemented comprehensive pension policy reforms, including an enhancement to the Canada Pension Plan, a new framework for the Stelco pension plans as the company restructured under CCAA, and a new regulatory framework for defined benefit pension plans. She also led the Financial Services Policy Division on an interim basis at a time of significant policy development in auto insurance regulation.

As Executive Lead for the Commission for the Review of Social Assistance in Ontario, Ms. Myers helped deliver the first comprehensive review of Ontario's social assistance system in over 20 years. She supported political decision-making on a range of strategic issues as ADM of Health, Social and Education Policy at the Cabinet Office.

Ms. Myers is currently involved in various consulting projects, advising on strategic priorities, stakeholder relations and governance matters. She is the Chair of the Bruce Trail Conservancy, a member-driven, volunteer-based charitable organization and one of Ontario's largest land trusts. She also serves on the Board of Directors of the Michael Garron Hospital in Toronto.

Ms. Myers brings her strategic communications and partnership-building skills, extensive experience in regulatory matters and strong consumer /member protection orientation to the OLHI Board of Directors.



Geoff Plant, OBC KC Independent Director

Geoff Plant is a lawyer based in Vancouver. Mr. Plant is counsel with Gall, Legge, Grant & Zwack LLP. Mr. Plant was a Member of the British Columbia Legislative Assembly from 1996-2005 and served as Attorney General of British Columbia and Minister responsible for Treaty Negotiation. He was also the Minister responsible for the Citizens' Assembly on Electoral Reform.

After leaving politics, Mr. Plant has provided public service in a number of other capacities, including serving as Board Chair of Providence Health Care and Board Vice-Chair of BC Ferries, and leading negotiations on behalf of the government with First Nations political organizations. Recently, Mr. Plant was appointed to the Order of British Columbia, the province's highest form of recognition.

Mr. Plant has served as Board Chair of the British Columbia Land Title & Survey Authority, the Canada West Foundation, and the Dalai Lama Center for Peace and Education. He also recently served as Chancellor of the Emily Carr University of Art + Design.

He was also named as one of Canada's Most Influential Lawyers by Canadian Lawyer Magazine and served as Vancouver's Civil City Commissioner. Mr. Plant brings a wealth of experience in government relations and governance to the OLHI Board of Directors as well as expertise in dispute resolution, mediation, and law.

Our Board: Independent Directors continued...



Louise Shiller
Independent Director

Louise Shiller is an Ombudsperson, currently serving in the education sector at the post-secondary level. Her work in ombudservices has focused on best practices, including appraisals, policy development, fair investigation, empowerment, mediation, reconciliation, and positive systemic change.

Ms. Shiller has held senior positions in both the public and private sectors, building expertise in the areas of behaviour management, school administration, student services, and educational leadership. She also has extensive experience in crisis intervention, harassment/violence prevention, and labour relations. She was instrumental in developing and establishing several essential programs throughout Québec and improving the delivery of services at various organizations and school boards. She served as President of the Québec Counselling Association and President of the RSB Professionals Association, having negotiated agreements and insurance plan benefits. Earlier in her career, Ms. Shiller worked for the Department of Youth Protection and later became the Director of Federation CJA West Island, leading the strategic planning process and making decisions on behalf of the community at large.

In 2010, Ms. Shiller was appointed as Concordia University's Director and Senior Advisor of Rights and Responsibilities, promoting values of diversity, civility, equity, respect, inclusion, and non-discrimination. Her mandate included resolving conflicts, behavioural incidents, and rights violations in an effective and constructive manner, while overseeing intervention and redress. In this important role, she developed, revised, and administered policies, public documents, and training programs. During her tenure, she led task forces and committees, as well as continuously made systemic recommendations and improvements.

As a member of the Board of Directors and Chair of OLHI's Standards Committee, Ms. Shiller brings leadership and distinctive skills to the areas of programming, public policy and education, governance, and impartial dispute resolution.

Our Board: Industry Directors



Claude Garcia
Industry Director

Claude Garcia joined the Québec Ministry of Social Affairs in 1969, occupying various positions, including Assistant Deputy Minister. He later returned to the private sector in 1978 as Partner with Hébert, LeHouillier et associés, consulting actuaries. He joined the Standard Life Assurance Company in 1983, starting his career with the insurer as Senior Vice-President and later becoming President of Canadian Operations for Standard Life in 1991. He retired from that position in 2004.

During his career, Mr. Garcia has served on numerous boards in the private and public sectors. He has acted as chairman of the Chambre de Commerce du Montréal Métropolitain, the Montreal YMCA Foundation and of l'Agence des partenariats public-privé du Québec. He has been a director of the Standard Life Assurance Company, the Caisse de dépôt et placement du Québec, Quno, the Montreal Exchange, Cogeco and Cogeco Communications, Jarislowsky Fraser, l'Institut de recherches cliniques de Montréal and BTB Reit. Mr. Garcia is also past Chairman of the board of Goodfellow.

Having spent most of his career in insurance, he brings extensive knowledge of the insurance industry to the OLHI Board. His experience in the public and private sectors has built his expertise in product, consumer affairs, leadership, public policy direction, government relations, finance, strategic planning, and governance.



Dr. Dieter Kays

Industry Director

A corporate director with his ICD.D, Dr. Dieter Kays has a Ph.D. in leadership and organizational effectiveness. He is currently chair on the Lutheran Church-Canada Worker Pension and Benefits Board. From 2010 to 2019, he served on the board of St. Mary's Hospital in Kitchener, including as board chair. In June 2022, Dr. Kays was appointed to the Grand River Hospital Board of Directors and serves on its Pension Committee.

A graduate of the Stanford International Executive Program, Dr. Kays was the CEO and President of FaithLife Financial (FLF), one of the largest fraternal life insurance companies in Canada and prior to retiring from FLF in 2010, he was on the board of directors of the Canadian Life and Health Insurance Association (CLHIA).

Prior to that time, Dr. Kays also had a distinguished career as CEO of Lutherwood, a multi-service social service agency. Lutherwood was repeatedly identified in national culture surveys as one of the top 10 medium-sized organizations in Canada. Having served on numerous boards and provincial task forces, he has consulted with organizations in Canada and abroad. He is known for his expertise in governance, leadership, and strategic planning.

Our Board: Industry Directors continued...



Frank Swedlove Industry Director

Frank Swedlove is the Immediate Past President of the Canadian Life and Health Insurance Association (CLHIA) and served as the first Chair of the Global Federation of Insurance Associations (GFIA).

Mr. Swedlove spent most of his career with the Department of Finance in Ottawa, with his last position being the Assistant Deputy Minister of Financial Sector Policy Branch. He was also President of the Financial Action Task Force, an international body responsible for fighting global money laundering and terrorist financing. Mr. Swedlove is now serving as Chair of the Board of Assuris, the policyholder protection organization that protects policyholders in the case of a life insurance company failure.

Mr. Swedlove is also a recipient of both the Queen's Golden Jubilee medal for public service and the Queen's Diamond Jubilee medal for service to the insurance industry.

His experience with the federal government and time spent as President of CLHIA give Mr. Swedlove a unique and insightful perspective on the insurance industry, consumer affairs, public policy, government relations, working with Regulators and strategic planning.

Our Service Promise

Accessibility: Our free services are always available by phone or online.

Timeliness: We respond within 48 hours.

Courtesy: Courtesy, professionalism and respect define every interaction.

Clarity: We ensure consumers understand insurance policies and our advice.

Accuracy: Our goal is to accurately document complaints to effectively resolve disputes.

Fairness & Impartiality: We are unbiased and impartial.

Consistency: We follow a rigorous, consistent process.

Knowledge: We have specialized insurance knowledge and dispute resolution expertise.

Privacy: All of our files and cases are 100% confidential.

Independence & Objectivity: OLHI operates in accordance with a framework of ongoing collaboration among insurance sector OmbudServices and the Canadian Council of Insurance Regulators.



Contact OLHI

Online English: olhi.ca

French: oapcanada.ca

Phone Toll Free Canada: 1-888-295-8112

Toll Free Québec: 1-866-582-2088

Bell Relay Service (hearing impaired): 1-800-855-

0511

Mail 2 Bloor Street West, Suite 700

Toronto, ON M4W 3E2