

CLAIMS GUIDELINES

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- All types of insurance complaints are lodged with IRA
- Use of vehicles
- Delays in claims settlement
- Delay in repairs
- The complaints are both long term and short term
- Declinature of claims
- Unsatisfactory settlement of claims
- Non-disclosure of facts by providers/intermediaries
- Complaints by intermediaries





- Payment of commissions
- Claw-back
- Lost policies
- Third party Motor claims
- Lawyers not remitting benefits
- Lawyers abandoning cases mid-stream
- Complaints against collapsed companies

CLAIMS GUIDELINES

Why the Guidelines



- •The insurance industry faced with challenges in claims management
- Poor image of the industry
- Low penetration of insurance services
- Most complaints relate to claims management
- •Need for action by the regulator







- The Authority has developed this set of claims management guidelines in order to enhance
 - ≻Efficiency;
 - ➢Transparency;
 - Disclosure of information to policyholders;
 - >Increase consumer satisfaction;
 - Enhance compliance with the provisions of section 203 of the insurance act.



Pre-loss information



While issuing the policy, insurer shall inform policyholders on what to do;

- Need for policyholders to cooperate
- Allow the insurer to handle inspection and assessment prior to settlement.
- Explain what subrogation, contribution, excess, average clauses are.
- Loss minimization.
- Report the claim in a timely manner
- to preserving evidence

Notification & acknowledgement



- Use any fast means of communicating;
- (a) Direct reporting
- (b) Telephone call
- (c) Text message
- (d) E-mail
- (e) Fax
- (f) Letter
- (g) Use of social sites or websites
- (h) Any other form of technology of wide usage.



Upon Receipt of the Notification



The insurer shall take the following action not later than seven working days;

- Acknowledge the notification.
- Avail appropriate claim form;
- Avail a list of specific documents required;
- Provide any necessary additional information;
- Contact any other insurer involved
- Appoint a service provider(s) where necessary.





- Pay within 90 days where a claim is admissible;
- *Appoint* a service provider where further assessment is necessary;
- •Upon receipt of the assessment report make an offer for settlement;
- •*Notify* the claimant where further investigation is necessary;
- •Explain to the claimant the need to **cooperate** with the investigators.

Upon receipt of a claim



- •Where is not covered by the policy, explain to the claimant;
- If the amount offered is different from the amount claimed, explain to the claimant;
- •Notify the claimant where insurer is not responsible for the claim;

Claims Handling procedures



 Develop a manual on claims handling procedures including;

- ⇒Steps from claim intimation to settlement
- ⇒Timeframes in each of the steps
- Include in the manual
 ⇒clearly defined control and
 ⇒reporting systems and processes.
- •File the manual with the Authority
- Notify the Authority of any changes to the manual.

Claims Handling procedures



- Inform the claimants about;
 - ⇒Procedures, Formalities and Common time frames for claims settlement.
- Inform the claimant about the status of the claim.
- Explain claims conditions such as depreciation, average, pre-loss value, reinstatement, excess/deductibles etc.
- Issue a copy of the *report* to the claimant on request.
- Refund excess of subrogation to the insured

Issues specific to Motor Claims



- Need for *valuation* of motor vehicles at inception and renewal of cover;
- Need to determine *pre-accident values* after a loss;

Issues specific to Motor Claims



- Contribution for Motor Vehicle *repairs*;
 - ⇒insured only **contributes** towards **repairs** where;
 - Components in the vehicle are subject to continuous wear and tear with such components include but are not limited to;
- (i) Tires and tubes
- (iii) Batteries
- (iv) Engine overhaul parts
- (v) Gear box, transmission and transfer cases.

Issues particular to motor claims



- •(b) Where the vehicle requires rebranding after repairs.
- •(c) The repair requires a set of similar items to be replaced whilst only one of the items was damaged in the accident.





- A motor vehicle will be considered a writeoff if the *repair estimate value* as per the assessment report *exceeds economical level*.
- The insurer shall accord the claimant the opportunity to contest the basis of valuation leading to the write-off.





- Where the vehicle is a *write-off but repairable*, accord insured opportunity to *retain* the salvage;
- If he *forfeits* he shall be *indemnified* on the basis of the pre-accident value;
- No insurer shall dispose of salvage before the insured is indemnified;
- •Where the *insured* chooses to *retain* the salvage, the insurer may *deduct* salvage value from the settlement amount;

Duty Free Vehicles



Insured on *Market value* basis

- •Where a duty free vehicle is insured at market value there will be no contribution for repairs since the insurer is paying market rates.
- In case of a *write off* or *theft*, the insured shall be required to *clear with KRA* for *market rate* compensation to be made.
- Where the insured wants to retain the salvage, he will be indemnified on duty free basis.





Insured on *Duty free* basis

- •Here the insurer will share the cost of repairs with the insured in *proportion* of *duty free value* and the vehicle market vehicle market value (KES 7m/15m * Cost of repairs.
- In case a duty free vehicle is a write off or stolen, indemnity will be on *duty free basis* with the insured retaining the salvage (KES 7m).

State owned vehicles (GK)



State owns the vehicleInsures at market value

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Leasing firm owns the vehicleInsures at market value



Dealer owns the vehicleInsure at market value

Customer Care Desk



- Establish a customer service desk where queries and complaints will be *lodged* and *resolved*.
- The desk will be used to lodge, route enquiries and complaints.
- The desk shall be equipped with skilled and competent officers.
- Have in place a documented system and procedure for receiving, registering and disposing of complaints.





- •Keep *updating* the claimant on the claim progress.
- Provide the *final response* in *writing* within a reasonable time.
- If complainant is *dissatisfied* with the *final response*, provide advice on availability of *external complaints settlement procedures* including Authority.

Disposing off claims



- A complaint will be considered as disposed off when;
 - ➤The company has *fully acceded* to the request of the complainant.
 - ➢All parties to the complaint have been satisfied and the matter marked as closed.

Submission of Claims Returns



- Every Insurer shall *file* with the Authority *monthly* and *annual* returns in a;
 - ⇒ **Prescribed** format as provided under
 - ⇒ **Section 203** as read together with
 - ⇔Principal *Regulation 48* of the Insurance Act.





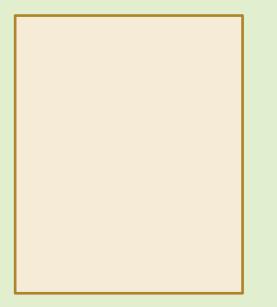


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Q & A