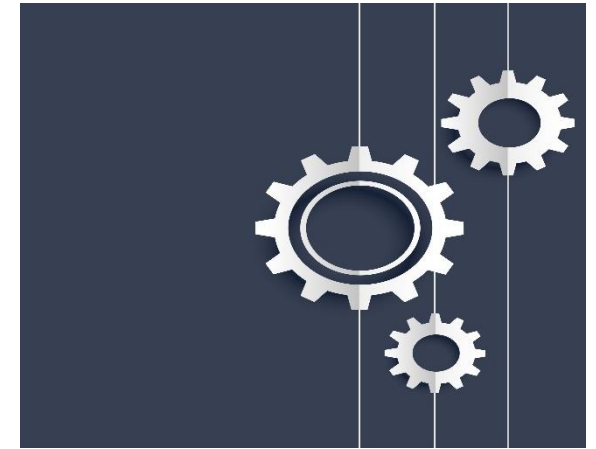


NON MOTOR CLAIMS PROCESS

PRESENTED BY
FREDRICK OKEENO



- ❖ Aviation
- ❖ Engineering
- ❖ Fire
- ❖ Liability
- ❖ Marine



- ❖ Personal Accident
- ❖ Theft
- ❖ Workmen's Compensation
- ❖ Miscellaneous



1. Events giving rise to the claim

This may be an insured loss event, often provokes a discussion between the insured and insurer as to whether the event is a circumstance worthy of notification.



2. Claim Notification

Is when insured reports the claim to the insurer in the prescribed format (by phone, email, claim forms etc.)

The purpose is to enable the insurer to take steps to investigate the claim (or occurrences of which might give rise to the claim) in order to minimize its exposure under the policy



3. *Claim Review*

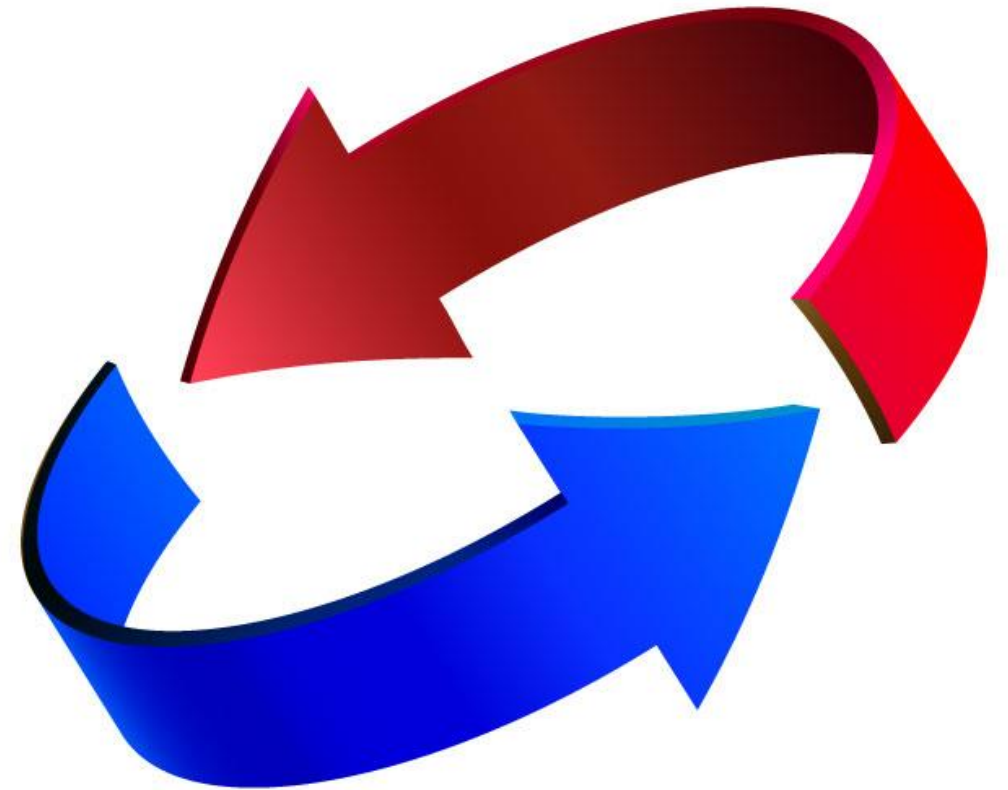
Reviewing the claim involves analyzing the claim in light of:

- The amounts involved
- The proposal form
- Exact terms of the policy
- Market practice



4. Response to Claimant

The insurer's first response to the insured may only be an acknowledgement or a request for more information.



5. Claim Investigation

In order to establish facts surrounding the claim, it may be necessary to instruct an investigator or loss adjuster to undertake further investigations.

6. Claim Negotiation & Settlement

Armed with the full facts of the case the insurer may decide that a lesser amount should be offered than that originally claimed.



7. Claim Recoveries

Following payment of the claim, often the insurer will be able to recover all or part of the outlay from other sources e.g. negligent third parties, reinsurers etc.

8. *Review of Performance*

Reviews are normally carried out in respect of a sample of outstanding/closed files, or any particular problematic claims.



Description

1. Response on notification of claim
2. Appointment of service providers
3. Registration of Claim

TAT

Within 24 Hours

Within 24 hours

Within 3 days

Description

TAT

- | | |
|--|-----------------|
| 4. Issuance of DV on full documentation & receipt of adjuster's report | Within 24 hours |
| 5. Issuance of settlement cheque on return of DV duly executed | 7 Days |

GA prides itself in its ability to settle claims. However, we are cognizant of the possibility of fraudulently presented claims.

This occurs at two levels either a genuine claim is **exaggerated** or **non-existent claim** is presented for settlement.



The under noted are the measures we have put in place to manage fraudulently presented claims:

1. The existent of a claims procedure manual
2. The existent of Underwriting and Claims policy papers
3. The existence of a robust IT system that ensures that claims are lodged against existing and current policies

4. Continuous training of staff
5. The setting up of approval levels for the various persons responsible for claim processing and payment
6. Having agreements with suppliers/service providers and ensuring that they know the standards of service expected.
7. Ensuring that expertise is outsourced as and when necessary to give input to the settlement process of various claims.

**THANK YOU
&
STAY SAFE**