



**Insurance**  
INSTITUTE OF EAST AFRICA

# Claims Handling Fundamentals



**In-House  
Training**

**KAPLAN** FINANCIAL  
EDUCATION

| Accredited |

# Introduction

To properly handle claims, claim representatives must know how to apply information about the claim and the insurance policy in a systematic process that reinforces good claim handling practices

## The Claims Professional

Insurance claim management is an important and prestigious profession involving interesting and sometimes unusual situations that can require a wide variety of tasks. It's also a highly responsible position that requires important decisions that can greatly impact the financial affairs of the insurance company, its policyholders and others.

The individuals in the Claim Department who manage claims are known by various titles. One of the oldest and most commonly known is claim adjuster. This title is derived from the word "adjust," which can be defined as bringing to a more satisfactory state; settling; resolving.

Through the years, however, other titles have been substituted in an effort toward more modern language or to better describe the role of the person who manages claims.

Because so many different titles exist, when people speak of those who manage claims, they often use these titles interchangeably. And while we use most of these titles throughout the course, we prefer the title claim professional. It's all encompassing and, most importantly, it expresses the goal that all claim people should set for themselves: professionalism. And this course is designed to develop claims teams into professionals.

## Objectives of This Course

After completing this training, participants should be able to:

- Explain how a Claim Department operates and how other departments in the company contribute to the claims function
- State what skills and resources are required for claim handling
- Identify the elements of the claim handling process
- Describe common procedures involved in investigating, evaluating and disposing of claims
- Explain the importance of various ethical issues in claim handling

# Suitability

It takes many people working together before an insurance claim can reach its final resolution. Although most of the activities related to claims revolve around the person who is in charge of managing the claim, many others also make valuable contributions. This includes Claim Department support personnel and others within an insurance company who do not manage or process claims but whose work indirectly affects claims against the company's policies.

So, while this training is primarily directed toward those who have the greatest and most direct responsibilities for resolving insurance claims, it also provides information of interest to others whose work is not directly associated with claims.

## What is Covered

### Day One

#### Module 1

##### The Claims Function

#### Learning Objectives

After completing this module, participants will be able to:

- Explain how a claim department operates and how other departments in an insurance company contribute to the claims function;
- Identify the primary reason insurance companies are in business;
- Compare and contrast various types of claim handlers;
- Define the various types of insurance claims;
- Identify the first, second, and third parties in an insurance claim; and
- Explain how claim handling is regulated.

#### Module 2

##### Claim Handling Skills and Ethical Issues

#### Learning Objectives

After completing this module, participants will be able to:

- Explain why it is important for claim handlers to have strong interpersonal and communication skills;
- Summarize the basic insurance and legal principles needed to handle claims;
- Describe specialized knowledge required to handle certain types of claims;
- Discuss personal traits that play a role in a successful career in claim handling and;
- Explain the importance of various ethical issues in claim handling.

## Module 3

### Claim Investigation

#### Learning Objectives

After completing this module, participants will be able to:

- Identify the elements of the claim handling process and when this process begins;
- Describe the purpose of a claim file;
- Explain how claim handlers determine the direction of a claim investigation and create an action plan;
- Discuss the specific areas of an insurance policy that are reviewed to determine if a claim is covered;
- Describe sources used to obtain information about a claim; and
- Discuss methods of verifying claim information.

## Day Two

## Module 4

### Claim Evaluation and Disposition

#### Learning Objectives

After completing this module, participants will be able to:

- Define the two types of reserves and explain how they are calculated;
- Explain how estimates are obtained for property insurance claims;
- Describe the types of damages that are considered when evaluating liability insurance claims;
- Describe the purpose of a settlement range;
- Identify policy provisions in both property and liability insurance policies that may affect the amount paid for a claim;
- Describe the four methods used to resolve claims and identify circumstances where each method would be used; and
- Describe the purpose of a release.

## Module 5

### Insurance Fraud Overview

#### Learning Objectives

This course will provide the insurance professional with an overview to Insurance Fraud, including the effects of insurance fraud, the growing statistics of insurance fraud, examples and current fraud schemes as well as their consequences, the efforts to reduce insurance fraud and the role that you play to combat fraud. You will learn successful investigative techniques that can be used by you or the field investigators. We will provide you what outside field investigators can do, what they need to do, how to plan for the investigation and learn the types of investigations that can be conducted. This course also includes fraud reduction tactics and red flag indicators for insurance fraud.



## Course Delivery

This course combines formal but highly interactive lectures and discussions with dynamic exercises. Delegates will also be examined at the end of the training to qualify for a Certificate of Participation.

## Course Summary

<b>Location:</b>	To be provided by Client
<b>Duration:</b>	2 Days
<b>Fee:</b>	Ksh 520,000 + VAT Per Group - Max 30
<b>Dates:</b>	Open

The image shows a close-up of an insurance claim form titled "INSURANCE CLAIM FORM". The form is divided into several sections:

- PRIMARY CUSTOMER INFORMATION: Primary Customer complete this section**
  - A1. PRIMARY CUSTOMER'S NAME (Last Name), (First Name), (City)
  - A2. GENDER (M, F)
  - B. DATE OF BIRTH (MM, DD, YYYY)
  - C. PRIMARY CUSTOMER'S MAILING ADDRESS (No., Street)
  - D. CIGNA ID NUMBER OR PRIMARY CUSTOMER SOCIAL SECURITY NUMBER (on the front of your Cigna ID card)
  - E. ACCOUNT NO. (on the front of your ID card)
  - F. EMPLOYER NAME
  - G. PRIMARY CUSTOMER STATUS (EMPLOYED, COBRA, RETIRED, DISABLED)
- PATIENT INFORMATION: Complete this section only if the patient is not the primary customer**
  - A. PATIENT'S NAME (Last Name), (First Name), (City)
  - B. RELATIONSHIP TO PRIMARY CUSTOMER (Spouse, Child, Other)
  - C. DATE OF BIRTH (MM, DD, YYYY)
  - D. SERVICE WAS PROVIDED AS THE PATIENT: (EMPLOYED FULL-TIME, STUDENT FULL-TIME, N/A)
- ACCIDENT/OCCUPATIONAL CLAIM INFORMATION: Complete this section only if you are filing the claim because of an accident or occupational (work-related) illness or injury**
  - A. DATE OF ACCIDENT OR BEGINNING OF ILLNESS (MM, DD, YYYY)
  - B. INJURY DUE TO AUTO ACCIDENT? (YES, NO)
  - C. DESCRIPTION OF HOW ACCIDENT OR WORK-RELATED ILLNESS/INJURY OCCURRED
  - D. ARE YOU OR YOUR DEPENDENTS FILING A CLAIM OR LAWSUIT AGAINST A THIRD PARTY IN ORDER TO RECOVER THE COST OF EXPENSES INCURRED AS A RESULT OF THIS ACCIDENT OR ILLNESS? (YES, NO)
  - E. NAME OF THIRD PARTY (First Name, Last Name, City)
- FAMILY/OTHER COVERAGE INFORMATION: Complete this section only if claim is for a dependent and/or other coverage is in effect**
  - A. NAME OF SPOUSE (Last Name), (First Name), (City)

**Contact us to book for the Training**

Phone : +254 20 6530128 Safaricom: +254 723 334 408 Airtel: +254 -733 812 695  
or Email: [Elijah.mogere@iiea.co.ke](mailto:Elijah.mogere@iiea.co.ke) or [info@iiea.co.ke](mailto:info@iiea.co.ke)

Insurance Institute of East Africa  
Brunei House, 3rd Floor | Witu Road off Lusaka Road  
P.O. Box 16481 - 00100 Nairobi, Kenya  
Tel: +254 20 6530128 | 6530298  
Mobile: + 254 723 334 408 | 733 812 695  
E-Mail: [info@iiea.co.ke](mailto:info@iiea.co.ke) | [www.iiea.co.ke](http://www.iiea.co.ke)