CMR INSTITUTE OF TECHNOLOGY, BENGALURU



Internal Assesment Test – III Answer Kev

Answer Key	Answer Key							
Sub: Risk Management and Insurance		Cod	le:	e: 20MBAFM401				
Date: 01-08-2022 Duration: 90 Max Marks: 50	Sem: IV	Bra	nch:	h: MBA				
		,		OBE				
			Mark	cs CO	RBT			
Part A - Answer Any Two Full Questions (2*2	20 = 40 marks	s)						
1 (a) What do you mean by claims management? Claim management is a collective term for the m services provided by firms in respect of claims reparation, restitution or any other remedy for fina of contractual obligation. In the context of internatit generally refers to the services provided by trade firm's claims against risk mitigation products shonds, sureties or conventional insurance who commercial party has breached the terms of their commercial party has breached the terms of t	for compens incial loss or b tional trade fir e financiers to such as guara nen their op ontract.	ation, preach nance, settle ntees, posite	[07] CO4] CO4	L1			
Good health refers to being in a condition of compland social well-being but not mere absence of illneget health insurance cover when leading a healthy comprehensive health insurance cover may be deand dear ones on acquiring some illness. Certain mare difficult to foresee or prevent. However, we can account for them with our variety plans based on customer's needs.	ess. It is possi y life. But get enied for you nedical emerge	ble to ting a near encies						
Plans Suitable For								
Individual Health Insurance Individual								
Family Health Insurance Entire Family-Children, and F								
Critical Illness Insurance Used for funding treatments	ng expensive							
Senior Citizen Health Insurance Citizens of age	65 and above							
Top Up Health Insurance when the sum i existing policy	insured of the							
Hospital Daily Cash Daily hospital of	expenses							
Personal Accident Insurance It can be used i or damage to the								
+	ic owner or ur	IVCI.						

	Group Health Insurance	For a group of employees			
	Disease-Specific (M-Care, Corona Kavach, etc.)	Suitable for those who are suffering from pandemic-manifested conditions or prone to one.			
	ULIPs	The dual benefit of insurance and investment			
	and value of the car, state where the manufacture. Two Wheeler Insurance: It condrivers of the two wheeler vehicle. Commercial Vehicle Insurance vehicles which are not used for prevehicles like the Trucks, Tempos and Third Party Insurance Policy: Third person who has been damaged the owner is accountable. It cover third parties' loss caused by an accident.	e In The Market: bulsory for all the new cars to have brance for vehicles not used for of premium depends on the make the car is registered and the year of overs accidental insurance for the extension of premium depends on the make the car is registered and the year of overs accidental insurance for the extension of purposes, goods carrying and HMVs. This type of policy only covers the end or injured in an accident where the insured person's liability to ident involving the auto vehicle of imum risks that are to be covered (Act Liability). It doesn't cover the of the owner. This type of plan is a. This type of plan has a wider mentioned liability along with the penses and injuries in result of an type of policy can be extended to	[10]	CO4	L2
	Liability only policy: It covers this and/or death and property damage. driver is also included.	rd party liability for bodily injuries			
2 (a)	Define marine insurance. A contract of marine insurance is undertakes to indemnify the insurance thereby agreed, against transit loss transit. A contract of marine insurance usage of trade be extended so as to on inland waters or any land risk woyage.	an agreement whereby the insurer ed, in the manner and to the extent es, that is to saylosses incidental to ance may by its express terms or by a protect the insured against losses which may be incidental to any sea	[03]	CO4	L1
	Explain the types of insurance or 8 types of insurance organizations a	are;	[07]	CO4	L2

7. Lloyd's Association,
8. State Insurance.

(c) Explain the claim settlement in general insurance.
An insurance claim is a formal request to an insurance company asking for a payment based on the terms of the insurance policy. The insurance company reviews the claim for its validity and then pays out

approved.

The non-life insurance industry is witnessing shifting trends across policy administration, and claims—the two core functions in insurance.

to the insured or requesting party (on behalf of the insured) once

The claims process is the defining moment in a non-life insurance customer relationship. To retain and grow market share and improve customer acquisition and retention rates, insurers are focused on enhancing customers' claims experience.

In a highly competitive insurance market, differentiation through new and more effective claims management practices is one of the most important and effective ways to maintain market share and profitability.

Formalities for a health insurance claim

You can make a claim under a Health insurance policy in two ways:

- 1. Cashless basis and
- 2. Reimbursement basis

On a Cashless basis: For a claim on cashless basis, your treatment must be only at a network hospital of the Third Party Administrator (TPA) who is servicing your policy. You have to seek authorization for availing the treatment on a cashless basis as per procedures laid down and in the prescribed form. Please read the policy document as soon as you receive it to familiarize yourself with the process rather than wait for a claim to arise.

Claims on reimbursement basis: Read the clause relating to claims in your policy document as soon as you receive it to ensure that you understand the procedure and the documents required for making a claim on reimbursement basis. When a claim arises you should inform the insurance company as per procedures required. After hospitalization, you have to ensure that you obtain and keep ready documents such as claim form, discharge summary, prescriptions and bills that you should submit for a claim.

Formalities for making a property insurance claim

- There could be several types of policies that cover property and the property itself could be stationery - like a building, or moving around - like your household goods being transported.
- When you receive your policy familiarize yourself with the
 documents required for a claim as well as the procedures to be
 followed. Whether or not a claim arises you must follow the
 various dos and don'ts in respect of your property for the
 duration of the policy. These dos and don'ts are termed
 warranties and conditions in your policy document.
- In general, losses and damages, including those due to theft, fire and flood need be intimated to the relevant authorities such as the police, the fire brigade and so on. It is important to ensure that you intimate your insurance company to enable it to send a surveyor for surveying and assessing the loss.

3 (a) Define personal accident policy.	[03]	CO4	L1
This policy provides compensation in the event of insured sustaining			
injuries, solely and directly from an accident caused by violent, visible			
and external means, resulting into death or disablement be it temporary			
or permanent.			
(b) Explain the organizational structure in insurance companies.	[07]	CO4	L2
Chairman			
Vice Chairman CEO			
Territory Manager			
Marketing Department Department			
Online marketing department Direct marketing department Accounts team Funds collecting team			
Agents			
(c) Explain the claim settlement in life insurance.	[10]	CO4	L2
Selection of the right policy from a good life insurance company with			
a healthy claim settlement ratio is the main requirement for buying a			
life insurance. The main function of an insurance company is to ensure			
easy and timely settlement of a valid claim in return for the premium			
paid by the insurer/ policy holder.			
Before intimating the insurance company, the nominee/claimant			
should check some basic facts:			
If the insurance policy is active and all the premiums have been			
paid?			
Does the particular situation for which the claim is being made			
is covered in the policy?			
Exclusions of the policy			
Formalities for a death claim			
• When a person with a life insurance policy – called a life			
assured – dies, a claim intimation should be sent to the			
insurance company as early as possible. The assignee or			
nominee under the policy can do this. So can any close relative			
or the agent who handles the policy.			
• The claim intimation should contain information like the date,			
place and cause of death. The insurance agent has the duty to			
help the life assured's family/ assignee to deal with the			
insurance company to fulfil the formalities for a claim.			
The insurance company will respond to this intimation and will ask for			
the following documents:			
 Filled-up claim form (provided by the insurance company) Certificate of death 			
 Policy document Deeds of assignments/re-assignments if any 			
beeds of assignments, to assignments if any			
 Legal evidence of title, if the policy is not assigned or nominated 			
Form of discharge executed and witnessed			
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Other documents such as medical attendant's certificate,			
hospital certificate, employer's certificate, police inquest report, post			
mortem report etc could be called for, as applicable.			
Claims procedure in respect of a life insurance policy:			
 A life insurance policy shall state the primary documents which 			
are normally required to be submitted by a claimant in support			
of a claim.			
 A life insurance company, upon receiving a claim, shall 			
process the claim without delay. Any queries or requirement of			
additional documents, to the extent possible, shall be raised all			
at once and not in a piece-meal manner, within a period of 15			
days of the receipt of the claim.			
 A claim under a life policy shall be paid or be disputed giving 			
all the relevant reasons, within 30 days from the date of receipt			
of all relevant papers and clarifications required. However,			
where the circumstances of a claim warrant an investigation in			
the opinion of the insurance company, it shall initiate and			
complete such investigation at the earliest. Where in the			
opinion of the insurance company the circumstances of a claim			
warrant an investigation, it shall initiate and complete such			
investigation at the earliest, in any case not later than 6 months			
from the time of lodging the claim.			
• Subject to the provisions of section 47 of the Act, where a			
claim is ready for payment but the payment cannot be made			
due to any reasons of a proper identification of the payee, the			
life insurer shall hold the amount for the benefit of the payee			
and such an amount shall earn interest at the rate applicable to a			
savings bank account with a scheduled bank (effective from 30			
days following the submission of all papers and information).			
Where there is a delay on the part of the insurer in processing a			
claim for a reason other than the one covered by sub-regulation			
(4), the life insurance company shall pay interest on the claim			
amount at a rate which is 2% above the bank rate prevalent at			
the beginning of the financial year in which the claim is			
reviewed by it. Part B - Compulsory (01*10=10 marks)			
The bus for school company provides school bus transportation to			
public schools in London. It owns 50 buses that are garaged is four			
different brought and it provides school bus service to over 20 public			
schools. The firm faces competition from two large bus companies that			
operate in the same area. Public school boards general awards			
contracts to the lowest bidder, but the level of service and overall performance are also considered.			
(a) Identify the major loss exposure faced by bus for school?	[5]	CO4	L3
Loss of Human Life, Physical Assets loss and Financial Loss.	ן ניין		L 3
(b) Suggest suitable insurance policy based on the loss exposure	[5]	CO4	L3
faced by bus?			
Vehicle Insurance and Group Insurance.			
