Insurance Claims Management Training Program

8 – 12 August 2027
Amman (Jordan)



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Introduction

Claims management lies at the core of the insurance industry, shaping customer trust, regulatory compliance, and overall operational efficiency. Effective handling of insurance claims requires a systematic approach that blends technical expertise, investigative methods, customer care, and awareness of legal frameworks.

This one-week training program equips participants with the skills and tools to manage claims across various lines of business, including motor, medical, property, and liability. Through case studies, practical exercises, and global best practices, participants will gain the ability to detect fraud, resolve disputes, ensure compliance, and deliver a superior customer experience.

Course Objectives

By the end of this program, participants will be able to:

- Understand the full claims lifecycle, from notification to settlement.
- Analyze and process motor, medical, property, and liability claims.
- Apply techniques for claim verification, loss assessment, and dispute resolution.
- Detect and address fraudulent claims using investigative approaches.
- Strengthen communication and negotiation skills with customers and stakeholders.
- Ensure compliance with insurance regulations and governance requirements.
- Implement strategies for claims efficiency and performance improvement.

Course Outlines

Day 1: Fundamentals of Claims Management

- Introduction to claims and their role in insurance.
- Types of claims: motor, medical, property, and liability.
- The claims lifecycle: reporting, assessment, and settlement.
- Roles and responsibilities of claims professionals.
- Case study discussion.



Day 2: Claims Processes and Verification

- Documentation and registration of claims.
- Verification and validation of claims.
- Loss assessment and damage evaluation.
- Collaboration with adjusters, investigators, and experts.
- Quality assurance in claims handling.

Day 3: Fraud Detection and Dispute Resolution

- Common fraud indicators in insurance claims.
- Tools and techniques for fraud detection.
- Investigating suspicious claims.
- Managing disputes and conflict resolution.
- Ethical and legal considerations in claims management.

Day 4: Customer Service and Regulatory Compliance

- Effective communication with policyholders.
- Managing customer expectations and enhancing satisfaction.
- Insurance regulations and compliance requirements.
- Governance frameworks and international best practices.
- Improving the customer experience in claims.

Day 5: Performance Improvement and Future Trends

- Key performance indicators KPIs in claims management.
- Digital transformation and InsurTech in claims processes.
- Process improvement strategies to reduce costs and delays.
- Group workshop: building a claims improvement plan.
- Final review, knowledge assessment, and wrap-up.

Why Attend this Course: Wins & Losses

- Gain comprehensive knowledge of insurance claims management processes.
- Build strong skills in fraud detection and dispute resolution.
- Enhance customer service and professional communication.
- Learn from real-world case studies and international best practices.
- Understand compliance requirements and governance frameworks.
- Improve operational efficiency with performance improvement strategies.
- Explore the role of InsurTech and digital transformation in claims.
- Develop practical solutions through hands-on workshops.



Conclusion

The Insurance Claims Management Training Program provides participants with advanced tools and strategies to manage the entire claims lifecycle efficiently and effectively. From fraud detection and dispute resolution to regulatory compliance and digital transformation, this course empowers professionals to deliver value to their organizations while strengthening customer trust.

By applying international best practices and focusing on performance improvement, participants will be well-prepared to excel in the dynamic world of insurance claims management.

