


Name:	
Enrolment No:	

UPES
End Semester Examination, December 2024

Course: Insurance Claim Management
Program: INT-B-COM(H)-MBA
Course Code: FINC8040

Semester: VII
Time: 03 hrs.
Max. Marks: 100

Instructions:

SECTION A
10Qx2M=20Marks

S. No.	Question	Marks	CO
Q 1	What type of claim occurs if the insured dies after the policy's term but before receiving the maturity benefit? a) Maturity Claim b) Surrender Claim c) Concession Claim d) Death Claim	2	CO1
Q2	Which policy type typically includes a survival benefit claim? a) Term Insurance b) Money-Back Policy c) Single-Premium Policy d) Joint Life Policy	2	CO1
Q3	What is 'surrender value' in life insurance? a) The amount payable when the policy matures b) The value received if the policy is prematurely terminated c) A value equivalent to the sum assured d) The bonus amount accrued	2	CO1
Q4	Which factor is considered while calculating surrender value? a) Only the premiums paid in the first year b) The total number of premiums paid c) The duration of policy maturity d) None of the above	2	CO1
Q5	What document must a policyholder submit if the original policy document is lost? a) Discharge Form b) Duplicate Policy Form c) Indemnity Bond d) Proof of Age	2	CO1

Q6	If a claim is submitted for a death occurring within two years of policy issuance, it is known as a: a) Standard Claim b) Delayed Claim c) Early Death Claim d) Grace Claim	2	CO1
Q7	In which type of claim does the nominee usually have no significance? a) Surrender Claim b) Maturity Claim c) Death Claim d) Paid-up Claim	2	CO1
Q8	What is required for a policyholder to settle a discounted maturity claim? a) Full payment of the premium b) A discharge voucher and the original policy document c) A nominee's certificate d) An affidavit	2	CO1
Q9	In the context of insurance claims, 'subrogation' allows the insurer to: a) Avoid paying claims b) Recover the claim amount from a third party responsible for the loss c) Increase premiums d) Lower the sum assured	2	CO1
Q10	Who is considered the 'third party' in third-party insurance? a) The insurance company b) The claimant or person impacted by the policyholder's actions c) The policyholder's family d) None of the above	2	CO1
SECTION B 4Qx5M= 20 Marks			
Q11	Define 'surrender value' and 'paid-up value' in the context of life insurance policies. How do these values differ in terms of accessibility and benefits for the policyholder?	5	CO2
Q12	In claims settlement, what are the primary steps involved in negotiating and finalizing a claim? How does each step contribute to reaching a fair settlement for both parties?	5	CO2
Q13	Explain how historical claims information assists insurers in risk assessment and underwriting. How is this information used to influence premium pricing and policy terms?	5	CO2
Q14	Identify the challenges insurance companies face in detecting fraudulent claims. What strategies do insurers employ to minimize fraud while ensuring genuine claims are honored?	5	CO2
SECTION-C 3Qx10M=30 Marks			

Q15	Analyze the challenges involved in detecting and handling fraudulent claims in the insurance industry. How do insurers use claims information and data analytics to mitigate fraud effectively?	10	CO3
Q16	Illustrate the key stages in negotiating claim settlements. Analyze how each stage contributes to achieving a fair outcome for both the insurer and the policyholder.	10	CO3
Q17	Compare the documents and procedures required for processing a maturity claim versus a death claim in life insurance. What are the implications of documentation on the claim process efficiency and fraud prevention? OR Explain the significance of third-party insurance coverage in risk management. Discuss how it provides financial protection and addresses the liabilities of the policyholder.	10	CO3
SECTION-D 2Qx15M= 30 Marks			
Q18	An insurance company is reviewing historical claims data to detect patterns and reduce the risk of fraudulent claims. Explain how claims information can be used as a tool for fraud detection. Illustrate the strategies the company might adopt to identify and address potential fraudulent claims and discuss how these practices help protect genuine policyholders.	15	CO4
Q19	A policyholder with a health insurance policy submits a claim for a surgical procedure. During the investigation, it is discovered that the procedure was for a pre-existing condition not covered by the policy. Analyse how the insurer would assess the claim, applying the concepts of policy coverage, proximate cause, and claim investigation. What steps would the insurer take to communicate this decision effectively to the policyholder? OR A policyholder files a maturity claim but passes away shortly before receiving the maturity amount. Describe the procedure the insurer must follow to settle this claim. What issues might arise if there is no nominee, and how would the insurer address these issues legally?	15	CO4