

## **Head of Claims - Kenya**

Our Client, a leading international private health insurance company, whose purpose is to help people live longer, healthier, happier lives and making a better world. We are looking for a highly qualified and experienced professional to fill the Head of Claims role.

Reporting to the Chief Executive Officer with a functional reporting line to the Global, Head of Claims, the role holder will lead and manage the Claims function and ensure the delivery of high-quality and efficient claims services to members and healthcare providers.

### Key roles and responsibilities

### i. Policy development and implementation

- Develop and implement claims policies, procedures, and standards in line with the company's vision, mission, and values.
- Ensure adherence to the company's enterprise policies, and relevant regulations and legislations in Kenya.

### ii. Operations management

- Responsible for claim operations, budget, performance, and customer experience.
- Ensure the timely and accurate processing and payment of claims, delivering a good customer experience while ensuring regulatory compliance.
- Work closely with Head of Group Claims Management to ensure the claims process activities outsourced to service entities or third-party suppliers, are delivered effectively and in accordance with service agreements.

## iii. Performance monitoring and reporting

- Monitor and analyze claims data and trends, providing regular management information (MI) and operational performance reports to management committees and the Board.
- Review and update the claims service level agreements and key performance indicators to ensure target achievement and customer satisfaction.
- Oversee the risk and controls in the claims operation, ensuring compliance with enterprise policies, procedures and regulatory requirements.
- Manage service quality through robust quality assurance to ensure adherence to the quality and compliance standards.

# iv. Risk management and compliance

 Provide the Board with sound advice, assurance and useful and timely reports from the Audit committee.

- Manage relationships with external stakeholders including Head of Internal Audit and external regulatory bodies, external Audit Partner and auditors.
- Identify, assess, monitor, and manage operational risks associated with the claims handling process with support from the risk management function.
- Collaborate with the claims fraud, waste, and abuse (FWA) function on prevention and detection measures and in driving adherence to anti-fraud policies and regulations.
- Ensure adequate operational resilience and business continuity planning within the claims process to minimize customer impact during disruptions.

### V. Continuous improvement and innovation

- Collaborate with the centralized Claims Process and Payment Integrity function to recommend improvements to local claims policies, procedures, and standards in line with the company's vision, mission, and values.
- Handle complex and escalated claims cases and complaints, ensuring fair and satisfactory resolution.
- Identify and implement best practices and innovations in the claims handling process, enhancing the efficiency and effectiveness of claims systems and processes.
- Drive continuous improvement initiatives within the department to deliver change through innovative solutions, including automation, data analytics, and Al.

## **Academic/Professional qualifications and Experience:**

- A bachelor's degree in Business Administration, Finance, Management, or a related field from an accredited reputable institution.
- A minimum of 5 years of experience in claims management in international private medical insurance (IPMI), or other financial services industries such as domestic private medical insurance or life insurance.
- Experienced claims management and customer service professional.
- Strong ability and proven track record in driving significant claims savings and operational expense cost reductions.
- Proven ability to deliver strong KPI performance in a claim management function through excellent leadership and a strong focus on results.
- Strong problem-solving and decision-making skills with a strong leaning towards innovation and improvement.
- Excellent communication, teamwork and collaboration skills, with the ability to work effectively and cooperatively with others.

If you are interested in this exciting opportunity, Please send your application for your consideration to this email: hrservices@kpmg.co.ke quoting 'Head of Claims, Kenya' by 4 October 2024.

Please note that only shortlisted candidates will be contacted.