JOB TITLE	**CLAIMS MANAGER (LEGAL & NON-LEGAL)**
REPORTS TO	**CHIEF EXECUTIVE OFFICER**

JOB PURPOSE:

The Claims Manager is responsible for leading and overseeing all functions of the Claims Department across both legal and non-legal claims, including budget management, staffing, talent development, performance management, expense control, quality assurance and service delivery to internal and external customers.

The role is responsible for ensuring efficient end-to-end claims management processes across legal and non-legal claims, in line with the Company's quality standards, service level benchmarks, policies and budgetary requirements. The Claims Manager will ensure timely resolution and follow-up of claims matters, effective management of claims diaries and customer complaints, and adherence to service level agreements with all service providers, including legal and non-legal providers.

KEY TASKS, DUTIES AND RESPONSIBILITIES

- Ensure timely and effective communication with clients, claimants, intermediaries and service providers, including responding to emails within 24 hours, letters within five days and returning calls within the same working day.
- Ensure all legal and non-legal claims are processed expeditiously within the Company's established turnaround times and performance benchmarks.
- Handle and resolve customer complaints within 48 hours of reporting and ensure clients, claimants and intermediaries are treated fairly and professionally throughout the claims process.
- Coordinate efforts among claims staff, clients, claimants, intermediaries and other stakeholders to ensure timely, equitable and efficient resolution of claims.
- Manage complex and high-exposure claims through effective, customer-focused claims handling.
- Attend scheduled client meetings and collaborate with relevant departments, particularly Underwriting and Customer Experience, to enhance the claims experience.
- Ensure both legal and non-legal claims teams adhere to the Company's customer service standards and Service Charter.
- Establish, maintain and monitor service level agreements with legal and non-legal service providers, including advocates, auctioneers, garages, assessors, loss adjusters and investigators.
- Ensure service providers' queries are addressed within 48 hours, maintain positive working

relationships and ensure invoices are settled within agreed timelines and contractual terms.

- Oversee claims reserving and ensure compliance with initial and subsequent reserving requirements across all reported claims.
- Review and analyse claims to ensure payments and settlements are made in accordance with Company policies, procedures and authorization limits.
- Approve admissible claims within delegated authority limits and ensure timely settlement.
- Develop and enforce the reserving policy in collaboration with the Actuarial Department.
- Collaborate with Finance to manage claims costs, negotiate outstanding payables and drive cost efficiency.
- Prepare and manage the annual Claims Department budget and ensure effective budgetary control.
- Monitor claims turnaround times throughout the claims cycle and ensure adherence to established timelines.
- Ensure claims exceeding the Company's retention are accurately and promptly reported to Reinsurance in accordance with laid-down procedures.
- Ensure accurate preparation and timely submission of statutory claims returns to the IRA on or before the 15th of every month.
- Monitor, maintain and ensure timely updating of legal and non-legal claims registers and shared records.
- Oversee salvage management, including monitoring the salvage register, forwarding salvages due for disposal to the Administration Department bi-weekly and ensuring fully paid salvages are processed for disposal.
- Ensure proceeds from sold salvages are receipted and appropriately applied against claims to reduce claims costs.
- Manage Cash-in-Lieu settlements, encourage the use of Company-approved garages and drive a reduction in Cash-in-Lieu settlements by 95%.
- Negotiate service provider fees and ensure settlements are made in accordance with agreed terms, signed service level agreements and AKI-approved rates.
- Manage legal claims judgments through appropriate settlement strategies, including out-of-court settlements, and monitor appeals to ensure timely follow-up and resolution.
- Oversee auctioneers' fees and ensure they are managed and settled in accordance with approved scales.
- Monitor and facilitate the recovery of appeal deposits held in joint earning accounts in line with the progress and outcome of appeals.
- Drive annual recoveries of at least Ksh 20 million through the Legal Claims team and ensure

recoveries approaching statutory limitation are promptly referred to advocates for action.

- Establish and implement effective systems and controls to monitor, manage and regulate legal and non-legal claims.
- Implement and monitor adherence to claims and legal authorization matrices.
- In collaboration with the Managing Director, establish claims management objectives and develop strategies to achieve agreed productivity targets, claims ratios, loss and loss adjustment expenses and other performance indicators.
- Ensure compliance with statutory and regulatory requirements and act as the primary contact on claims-related regulatory matters.
- Analyse claims data to identify trends, risks and areas for improvement, and communicate relevant findings relating to underwriting policies, reinsurance arrangements and product pricing to the respective departments.
- Prepare periodic legal and non-legal claims reports and management reports, and ensure timely implementation of corrective measures.
- Ensure compliance with internal audit controls, governance requirements and internal processes recommended by Management, Internal Audit and Risk & Compliance.
- Investigate, evaluate and settle claims through effective application of technical expertise and sound judgement to ensure fair, timely and cost-effective claims resolution.
- Verify and analyse claims documentation and supporting data to establish validity, admissibility and appropriate settlement in accordance with Company policies and procedures.
- Oversee thorough claims investigations through engagement with policyholders, claimants, physicians, contractors and other relevant parties, and ensure suspected fraud cases are handled in line with Company guidelines.
- Develop and implement claims risk management and fraud detection tools and strategies.
- Identify, appoint, manage and maintain effective panels of non-legal claims service providers, including garages, assessors, loss adjusters and investigators.
- Review, implement and update salvage management processes to ensure adherence to established guidelines.
- Direct and oversee the activities of defence counsel, either directly or through the legal claims team.
- Identify, appoint, manage and maintain an effective panel of advocates and other legal service providers.
- Review, monitor and ensure timely updating of the judgment register and assess the Company's exposure and liability arising from legal claims.

- Ensure all legal matters are promptly attended to through effective management of claims diaries, court dates, hearings, deadlines and pending matters.
- Monitor industry trends and developments and proactively implement appropriate claims management strategies.
- Review, maintain and update claims Standard Operating Procedures (SOPs) to enhance efficiency, consistency and compliance across both legal and non-legal claims.
- Ensure adherence to established claims turnaround times and implement effective escalation mechanisms for urgent and pending matters.
- Develop and implement a claims repudiation matrix to guide consistency in claims decisions.
- Ensure full implementation and adherence to the Company's claims reserving policy across legal and non-legal claims.
- Establish initial reserves for all reported claims and ensure reserves are reviewed and adjusted appropriately throughout the claims lifecycle.
- Provide administrative oversight, leadership and supervision of all legal and non-legal claims staff.
- Recruit, develop, motivate and retain competent staff in line with the Company's strategic objectives and HR policies and procedures.
- Lead, coach, mentor and develop the claims teams to enhance technical competence, productivity and achievement of departmental objectives.
- Ensure staff are adequately supervised, trained and equipped to effectively discharge their responsibilities.
- Drive the Performance Management process to promote accountability, productivity, efficient service delivery and achievement of Company objectives.
- Facilitate continuous learning, talent development and on-the-job training to strengthen technical expertise and professional growth.
- Maintain professional and technical knowledge through continuous learning, professional development and review of industry publications.
- Uphold and demonstrate the KOIL values of Integrity, Excellence, Customer Driven, Innovation and Team Work.

BEHAVIORAL COMPETENCIES

- Relationship building for influence
- Result oriented
- Accountability
- Committed and self-driven
- High standards of integrity and professionalism

- Self-initiative and innovative

SKILLS

- Thorough knowledge of insurance products
- Analytical thinking
- Good judgment and prompt decision making
- Managerial skills, including legal management skills
- Risk management
- Effective communication, good negotiation and great presentation skills
- Leadership skills

REQUIREMENTS

- Bachelor's degree from a recognized university.
- A diploma in Insurance (ACII, AIIK or equivalent).
- A diploma in legal studies (KSL).
- Nine (9) years' relevant working experience, five (5) of which should be in Claims Management at Manager level or above within General Insurance.

HOW TO APPLY:

If you are interested in the position and have the required qualifications, skills and experience, kindly Click Here and apply on or before **Friday, November 27, 2026.**