



Responding to a market in flux

What does the pandemic mean
for the insurance industry?

The coronavirus pandemic will bring about lasting change for the insurance industry. While the precise form of that change may take years to solidify, the immediate and dramatic impact of the spread of COVID-19 is shifting the insurance dial on multiple fronts, as companies rethink business strategies, revise forecasts and reassess objectives in response to shifting priorities, a volatile marketplace and changes in customer demand and expectation.

In this report, Crawford & Company® considers the macro dynamics created by the COVID-19 pandemic and how they will potentially disrupt current operating “norms” and alter the future insurance landscape and risk management practices.

Transitioning to a new norm

Benedict Burke, chief client officer, global client development, Crawford®, provides a brief introduction to the report.

A macroeconomic perspective on COVID-19

The societal impacts of the coronavirus pandemic and how these impacts are providing the context in which a new insurance market norm will emerge.

The direct impact on the insurance market

How changes at the macroeconomic level may reverberate through the insurance sector, addressing forecast losses, expected premium declines and longer-term liability issues.

Addressing uncertainty in BI policies

How the scope of wordings used in business interruption policies has been exposed by the pandemic and the role that regulators are playing in achieving resolution.

Potential repercussions for insurance buyers

How changes in the dynamics of the insurance market will filter through to the policyholder level and affect policy and renewal negotiations.

Demonstrating effective risk management

As market conditions evolve, how the ability to demonstrate the maturity of risk management programs will help differentiate insurance buyers.

The evolving role of the adjuster

How changing market dynamics are bringing to the fore the potential for claims adjusters to play a more proactive role at every stage in the insurance cycle.



Step-by-step

Reintegrating into the workplace



Technology to the fore

Advancing claims capabilities

Transitioning to a new norm

The impact of COVID-19 on the insurance market will undoubtedly cause a paradigm shift in how the sector operates. It has wreaked havoc on the global economy and fundamentally altered societal norms.

While it is still too early to describe with clarity what form this 'new norm' will take, the developments that will shape it are evident. At a macroeconomic level, the world currently faces significant recessionary pressure, with a slow recovery predicted. Numerous market sectors will struggle to restart, and insolvency will be prevalent, while employee cuts will be a necessary evil for the survival of many organisations.

For the insurance sector, a contracted global marketplace will inevitably bring a decline in GWP due to diminished exposures, while reduced investment returns will place greater pressure on profitable underwriting. Rates will begin or continue to harden across numerous lines – both COVID-19 affected and not – while insurers reassess capacity allocation as the profitability of some lines comes under scrutiny.

At the buyer level, we will likely see the introduction of more rigid terms and conditions, with more prescriptive wordings to remove uncertainty and ensure coverage accurately reflects the specific exposure submitted. Higher deductibles are to be expected while the scope of cover may contract. There will also be a greater onus on companies to demonstrate effective risk management practices and mitigation measures to secure cover or complete renewal negotiations at acceptable terms.

Changes will also be apparent on the claim frontline. Class actions emerging out of the complexities of a COVID-19 world will continue. In addition, economic hardship will spark increases in fraudulent activity and claims exaggeration, as witnessed during the 2008 financial crisis. In response, there will be an increased burden of proof applied and stricter causation examination requirements, with insurers keen to ensure insureds have met the risk management requirements stipulated in the original contract terms.

There is no doubt transitioning to a new market norm will be challenging. However, as with every successful strategy, considered planning and close collaboration will be critical to making that transition as smooth as possible.



**Benedict Burke
Crawford**

Chief Client Officer,
Global Client Development

A macroeconomic perspective on COVID-19

The world has been shaken by the coronavirus, with seismic waves fracturing many of the pillars that support societies around the globe.

Global economies are facing significant recessionary pressures and prolonged economic hardship is inevitable given the colossal financial toll the pandemic has taken. As governments work to create economic stimulus programs, recovery is expected to take a 'U-shaped' form – while some liken the trajectory to the Nike swoosh symbol, with a sharp decline followed by a labored upward climb.

Such a fractured global economy will see numerous companies fall through the cracks as the impact of lockdown and long-term financial constraints lead to a sharp rise in insolvency and business closures, and a commensurate spike in global unemployment figures. For those that remain open, activity in numerous sectors such as hospitality, leisure and travel will likely remain depressed for the foreseeable future.

Supply chains will also require much closer monitoring during this period of economic uncertainty. The increasing complexity and scale of supply networks means procuring companies will now be more exposed to potential disruption as the risk of insolvencies in the chain rises. This could see a flight to security, with companies rebalancing networks in favor of more financial robust organizations.

The cost of furlough schemes and additional expenditure on multiple fronts is driving a rapid acceleration in government debt levels, which is expected to drive tax increases at both personal and corporate level to refill empty coffers. To stimulate investment, interest rates are dropping to record low levels.

On the international stock markets, prices have plummeted in response to the unparalleled economic uncertainty in virtually every sector. And while there are some signs of stability being re-established, overall markets are likely to remain fragile for some time to come.

On the geopolitical front, tensions between global superpowers continue to rise, with trade sanctions and increased levels of protectionism the fallout of growing political tension. There is an increasing focus on self-sufficiency as international supply chains come under greater scrutiny. Further, the potential upheaval of a 'no-deal' Brexit – which remains a possible outcome – is contributing further uncertainty to markets already in uncharted territory.



The direct impact on the insurance market

At a macroeconomic level, the economic shake-up brought about by the pandemic will reverberate through the insurance sector. The anticipated surge in bankruptcies, decline in employment figures and increase in consolidation and M&A activity may well drive a drop in overall premium levels as economies contract.

While the financial impact of COVID-19 on the industry will not be fully grasped for a period of time, initial estimates of the direct cost to P&C insurers unsurprisingly show considerable variation.

In May, Lloyd's of London estimated the global underwriting losses for 2020 resulting from COVID-19 at approximately \$107bn, a figure it stated was on par with major claims years for the industry, including the 2005 hurricane series Katrina, Rita and Wilma and 2017 hurricanes Harvey, Irma and Maria. The Market added that it expected to pay out \$3bn to \$4.3bn globally due to the pandemic, a figure in line with that paid out in the aftermath of 9/11 in 2001.

According to a Moody's report in July, the rating agency estimates the potential financial cost to P&C insurers at between EUR50bn – EUR80bn. This puts the impact in the range of a large-scale natural catastrophe, with the agency adding that while pandemic-related losses will have a severe effect on earnings, it is unlikely that it will have a detrimental impact on capital. This remains to be seen. There are commentators who believe the industry may well face a “capital crunch”.

At the individual company level, the impact is clear on second half 2020 results, as both insurers and reinsurers count the claims resulting from COVID-19.

Swiss Re, for example, has stated that its first half results were negatively impacted by \$1.5B in claims and reserves related to the COVID-19 crisis, reflecting “affirmative non-damage business interruption, cancelled or postponed events, casualty and credit & surety losses”. Munich Re put the pandemic impact for

the period at €1.5B, with approximately €1.4B attributable to property/casualty reinsurance and the remainder to life and health reinsurance.

On the insurance front, QBE attributed \$335M to a COVID-19 underwriting impact on its first half performance, including net incurred claims of \$150M; with its ultimate losses from COVID-19 expected to be \$600M. Hiscox announced it had \$232M reserved for COVID-19 related claims, including \$150M for previously reported claims relating to event cancellation and abandonment, media and entertainment and other segments including travel. At Zurich UK, the company stated that its first half results included £182M for notified and expected claims relating to COVID-19, where its policies provided cover.



The potential for liability claims is a major unknown, and we are seeing rumblings of class actions. During the early stages of the first COVID-19 wave we were learning new things about the virus daily, so proving negligence in cases where employees and the public may have been put at risk was challenging. However, as we see the second wave develop and lockdown restrictions are relaxed to restart economies, companies now have a much clearer idea of what they are dealing with, so if employees are put at risk the potential for litigation is much greater.

Pat Van Bakel

President, Canada, Crawford



However, for Pat Van Bakel, president, Canada, Crawford, a major market concern is the also expected liability fallout that may result from current events, with class actions on the increase.

According to a recent US study by Lex Machina, from March 1 to July 4, the leading practice areas with confirmed case filings directly resulting from COVID-19 were insurance, contracts, and employment – 424, 397, and 102 cases, respectively that would not have been filed if not for the pandemic, and/or have claims substantially exacerbated by the pandemic.

The market is also predicted to experience a marked near-term decline in GWP reflecting a drop in insurance demand. A recent Swiss Re Sigma report forecast that global life premiums will contract by 6% in 2020, with savings products likely to be worst affected, with the non-life sector broadly flat (-0.1%) despite a 3.5% rise in 2019, buoyed by the continued hardening across multiple non-life lines. The report stated that trade, marine, aviation and credit lines are expected to be hardest hit.

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This expected decline in GWP will undoubtedly be a big issue for the insurance market. Increased instances of insolvency, reduced level of employment and an uptick in potential M&A activity will inevitably lead to diminished exposures across a number of lines, and may result in companies seeking a return on premiums due to changes in their risk profile.

Benedict Burke

Chief Client Officer, Global Client Development

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Addressing uncertainty in BI policies

Uncertainty around pandemic coverage under business interruption (BI) policies has become a government-level agenda issue in many countries since the spread of COVID-19 began.

At time of writing the UK's Financial Conduct Authority has brought a test case to the High Court to provide clarity around BI coverage disputes for policyholders and insurers. The case, which involves eight insurers and focuses on 17 policy wordings that the FCA stated, "capture the majority of the key issues that could be in dispute" is likely to affect some 60 insurers, 700 different types of policy and 370,000 policyholders.

The global insurance market awaits the findings, with the outcome likely to have a significant bearing on how such claims are settled in countries outside of the UK. Yet the potential scale of market disruption the result might generate will vary significantly from one region to another.

Of the BI related notifications resulting from the pandemic in Asia only a very small number have the potential to generate liability. This is because BI-related wordings are much more standardized in the region, with events such as SARS driving more stringent policy terms.

Veronica Grigg
President, Asia

However, where there is uncertainty, the FCA test case could prove decisive, particularly if the findings of the Orient-Express Hotels Limited v Assicurazioni Generali Spa (UK) case are reversed.

The FCA's call to reverse the findings of the Orient Express Hotels decision could be significant as it is often applied to how the market views BI in general. It is likely that BI-related settlements in Asia may be delayed until a decision on this is reached.

Veronica Grigg
President, Asia

More recently, the Insurance Council of Australia (ICA) and the Australian Financial Complaints Authority (AFCA) have agreed to file a test case focusing on the application of infectious diseases cover in BI policies and aims to secure a decision on "whether references to a quarantinable disease under the Quarantine Act 1908 should be construed as a reference to a listed human disease under the Biosecurity Act 2015 in various policies issued to small businesses containing business interruption cover."

The AFCA plans to use the outcomes of the test case to help determine relevant complaints arising in respect of business interruption claims.

Potential repercussions for insurance buyers

Rate hardening was already in evidence across several sectors prior to the global spread of the coronavirus, and the pandemic is likely to serve as a major catalyst for further market-wide rate increases. The industry has experienced an extended soft period and given declining investment returns, a predicted drop in GWP and the renewed focus on underwriting profits, it is expected insurers will work hard to maintain upward rate momentum to counter any drop in earnings.

According to Fitch Ratings, 2019 saw global non-life commercial insurers record double-digit price increases across a number of lines, with prices having risen for nine consecutive quarters. Adding the impact of the pandemic, the rating agency stated that some companies have hike rates “drastically” in loss-affected lines with others withdrawing from particular sectors or territories.

“*There is already clear evidence of a significant market swing, and insurers will also be looking to introduce more stringent terms and conditions, increasing the precision of policy wordings and refining the scope of cover to reduce potential exposures and remove any coverage uncertainty that may emerge at the point of claim.*”

Benedict Burke

Chief Client Officer, Global Client Development

Such market developments will undoubtedly create a more challenging environment as companies and their brokers begin the renewals negotiation process.

“*We would expect to see these change dynamics result in greater pressure on insureds during the renewals process or when securing additional coverage. The demand for more granular information during representations will undoubtedly increase as insurers seek clearer evidence of risk management and mitigation procedures, and also details of robust claims planning procedures and effective claims management practices during negotiations.*”

Benedict Burke

Chief Client Officer, Global Client Development

“*Fundamentally, the negotiation process will be about ensuring greater clarity in terms of both exposure and coverage.*”

“*As the uncertainty regarding pandemic coverage in the context of business interruption policies has demonstrated, the negotiation process must ensure that the risk itself is presented clearly and that similar clarity is achieved around the coverage on offer - without that level of understanding on both sides problems will always arise at the point of claim. I would certainly expect to see a more involved negotiation process developing as we move forward.*”

Mike Jones

President, Europe, Crawford

Evolving market dynamics could also impact the claims process, with insurers placing a greater burden of proof on claimants in the event of a loss and require a more intensive causation examination to ensure that the specifics of the incident are within the parameters of the policy. There is growing market concern that during the current period of financial hardship this will spark an increase in fraudulent or over-exaggerated claims.

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We are seeing evidence of an increase in opportunistic fraud and as more and more businesses find they no longer have the capacity to absorb the financial impact of the pandemic, we would expect to see more instances of fraud. The attention of insurers will out of necessity be elevated. Every insurer promises to pay legitimate claims - which is why they collect premium - and in turn they have an obligation to protect against fraud.

Pat Van Bakel

President, Canada, Crawford

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Demonstrating effective risk management

Enterprise risk management has evolved significantly over the last decade, particularly given the increased frequency and severity of large-scale losses, the globalization of the working environment, the expanding complexity of supply chain networks and the rapid emergence of new risks such as cyber threats in an ever more digitalized workplace.

Yet few companies had the risk management scope to encompass an event such as the COVID-19 pandemic which in a matter of months brought virtually every economy to a juddering halt. At a time when demonstrating your risk credentials during coverage negotiations looks set to become an increasingly important differentiator, many organizations are reassessing their exposures to reflect both the near and longer-term impacts of this global event.

“*There will undoubtedly be a period of considerable risk reflection, as companies scrutinize their current exposures not only in response to the pandemic. But also recognizing the extensive upheaval caused across virtually every aspect of business operations. Many companies will be re-evaluating business objectives to reflect the current economic environment, with performance projections and growth targets being reconfigured to align with a radically altered marketplace. During this time of considerable uncertainty and volatility, enterprise risk management will be a vital component of the recovery process.*”

Benedict Burke

Chief Client Officer, Global Client Development

With insolvencies expected to rise in the coming months, supply-chain disruption is set to become an increasingly significant risk for companies. Given the complexities inherent in global supply networks it will be imperative that companies maintain strict monitoring practices to quickly

spot weak links in the chain. Network resilience will be a business imperative, and companies may need to consider focusing on more financially robust suppliers to avoid breaks in the chain.

“*Comprehensive, sophisticated pre-loss scenario planning will become an increasingly important component of how organizations address their exposure profile. While it is not a panacea - and clearly the scope and complexity of exposures generated by the pandemic demonstrates that no plan can be all-encompassing - what such planning can and will do if conducted effectively is help organizations prepare for a range of possible outcomes based on key scenarios and provide a 'playbook' comprehensive enough to give clear guidance in responding to most situations.*”

Pat Van Bakel

President, Canada, Crawford

“The fact that not just companies, but governments and economies were caught off guard by the scale, speed and intensity of the pandemic has also brought into light potential shortfalls in scenario planning. While some may well question whether any organization can adequately plan for an event of this magnitude, what the last few months have proved is that they have to.”

Such a playbook could also form a key part of submission documentation and renewal negotiations, with companies able to demonstrate a more sophisticated approach to risk management that can act as a differentiator in insurer discussions.

Policy coverage will inevitably be put under the microscope, as companies assess the overall scope of current programs in the context of a changed business environment, a rapidly evolving risk landscape, and refocusing of business objectives.

As employees return to the workplace, the reintegration process will inevitably introduce new exposures not previously on the risk agenda. Strict health and safety protocols and clear guidance on workplace restrictions will be vital to reducing risk of infection to both employees and customers – and the potential for litigation resulting from failing in duty of care. There will also be a greater need to monitor the mental wellbeing of employees during this period due to heightened stress levels resulting from the return to work.

As companies raise the shutters on their businesses, there is the potential that the restarting process may aggravate risk conditions, as systems are brought back on-line and machinery that has been mothballed for months is fired up.

For those organizations that plan to continue to operate remote working practices, there will need to be a re-evaluation of cyber security measures. The transition to a mobile workforce, while for some companies a boon in terms of efficiency, productivity and cost-effectiveness, has also opened the cyber door to attackers in recent months, with many organizations recording a significant spike in threat activity, including phishing attacks, ransomware attacks and ‘malspam’.

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We are certainly keeping our eye on the potential for increased losses as business start to reopen. It may be a situation where the correct procedures were not followed when the equipment for shutdown or restart, or cases where OEM (original equipment manufacturer) guidelines relating to decommissioning or recommissioning machinery were not followed correctly, as this could affect claims for machinery breakdown cover.

Veronica Grigg
President, Asia

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There will also undoubtedly be a critical examination of the performance of coverage that may have been triggered during the pandemic. Clearly in the case of BI policies, the issue of causation has been the core bone of contention, and for those with outstanding claims the findings of the FCA test case and other similar developments were bring clarity to the contention.



The evolving role of the adjuster

There is the potential that the combined impact of these evolving market conditions may slow the insurance process. More challenging and involved discussions at renewals at a time of reduced capacity in certain lines, more restrictive terms and conditions; insurers reassessing conditions for larger and more complex risks; and an increased burden of proof and more intensive causation examination could stall the insurance cycle at multiple stages.

For Burke, this is where applying the full scope of the role of the claims adjuster can make a significant difference.

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In my view, the loss adjuster will continue to act as the oil that lubricates the cogs of the insurance machinery. Our role as an impartial operator in the insurance process is a unique one and our purpose is to ensure the smooth and efficient management of any claim by playing an increasingly proactive role.

Benedict Burke

Chief Client Officer, Global Client Development

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Looking at how the adjuster can best fulfil that function, Burke sees multiple stages within the insurance claim where their services, specialist knowledge and access to unique data will become increasingly important in the current market climate.

To ensure that the claims process can run as smoothly as possible, particularly where the potential for large or highly complex risks exists, Crawford has been working with clients to create company-specific claims programs.

As companies begin to restart operations as restrictions in many countries are relaxed, Crawford has also been working with a number of its clients to support them in this transition, providing a range of practical services that range from decontamination services to designing and implementing comprehensive reintegration programs developed to ensure that operations can recommence in an environment in which employee health and safety is maintained.

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It is imperative that claims managers provide support both pre and post loss. Pre-loss, it is about working with companies to support their scenario planning efforts, working closely with companies during renewals negotiations to ensure that intent is clear and representation is complete, and engaging with them to develop comprehensive and effective claims programs. Post loss, it is about bringing fairness and impartiality to the burden of proof process and making sure that causation analysis is properly understood. These are the various phases that the adjuster can help to support.

Benedict Burke

Chief Client Officer, Global Client Development

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We have helped several clients to create and embed comprehensive claims program, which are customized to reflect both the risk profile and culture of the organization. These programs are codified to ensure efficiency and responsiveness at the time of loss, and cover all partners within the chain - clarifying responsibilities at every stage - and creating a network that supports effective communication pre, during and post loss, while promoting effective collaboration between adjuster, insured, insurer and broker.

Veronica Grigg

President, Asia

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The COVID-19 pandemic has brought about an unparalleled level of change that will affect how every organization operates for many years to come. We must all find ways to adapt to this new environment and evolve our processes, practices and procedures accordingly - and Crawford is no different. Yet moving forward, one thing that will not change is our steadfast commitment to helping restore and enhance lives, businesses and communities during even the most challenging of situations.

Benedict Burke

Chief Client Officer, Global Client Development

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Step-by-step

Reintegrating into the workplace

Many businesses are taking their first tentative steps into planning for the months ahead. Assessing the risk is key in that planning stage, but one of the most challenging phases will be how to access customer and business premises.

At Crawford, our mission is to restore lives, businesses and communities and maintain a range of solutions designed to support that mission. Many of these services are aimed at preparing and maintaining safe workplaces, along with using technology to complete necessary tasks that may ordinarily have been completed in person.

Crawford has also worked with clients and business partners to identify five key steps to help companies reopen in a way that is best for the long-term health and safety of employees, customers and businesses. The SAFER program involves:



Sanitize and clean the workplace before and after reopening.



Assess options for reintroducing employees.



Follow social distancing protocols in the workplace.



Establish support structures for employees who may feel sick or anxious.



React quickly to workplace infections.

Crawford Contractor Connection® has also created a network of deep cleaning and decontamination specialists that provide a range of services including electrostatic cleaning, biohazard cleaning and decontamination delivered by teams qualified,

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We've been working with a number of clients to support their reintegration planning and implementation. Given the range of expertise and services that we offer, we can work with employers to develop protocols and best practice procedures, while also providing the platform and technologies to facilitate the reintegration program.

Pat Van Bakel

President, Canada, Crawford

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experienced personnel, whether it is a preventative clean or full decontamination, following an outbreak in the workplace.

Crawford® Building Consultancy is also working with organizations, applying its technical, design, project management and health and safety knowledge to help identify, plan and deliver a safe workplace re-entry. The team is advising on issues relating to social distancing, government guidance and practical applications relating to buildings to help ensure a safe, orderly and planned approach to re-occupation.

The Broadspire team is also bringing their medical management to the fore as they develop end-to-end clinical management programs to meet the evolving needs of clients in the midst of the pandemic. The team's case managers, who include registered nurses, vocational counselors and social workers have been working closely with clients to help them address the intricacies of the psychosocial, environmental, financial, legal and other health-related needs their employees face.

Technology to the fore

Advancing claims capabilities

The impact of COVID-19 has accelerated the technology transition more than any other event in the history of the insurance sector.

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The pandemic has supercharged the shift to a more tech-enabled operating environment. Companies are looking at how best to integrate technology into internal processes and how they interact with clients to achieve the efficiency, cost reductions and performance enhancements that they have long acknowledged are possible.

Veronica Grigg

President, Asia

Remote and desk-based adjusting has become the default position during the pandemic, and in my view the adoption of digital technology has progressed nearly a decade in only a few months. This pendulum has swung considerably during this period and will naturally fall back to a new center as we emerge from the pandemic.

Pat Van Bakel

President, Canada, Crawford

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At Crawford, that swing has been taking place for a number of years, with the company investing heavily in technology across its claims and data management infrastructure – an investment that has paid dividends during the pandemic. 90 percent of its employees shifted to remote working in lockdown yet there was zero disruption to client services due to its range of remote claims handling capabilities.

These include its YouGoLook assisted self-service application which allows customers to report and document claims conditions via their smartphones. Designed around the needs of the policyholder, the system includes a built-in step-by-step guide which ensures that every stage of the process from the collection of the images and data through to the submission is straightforward.

The submission process is also underpinned by an intelligent triage system. Robotic process automation means each claim is instantly evaluated and routed through the most appropriate channel, with larger complex risks being handled directly by specialist adjusting teams, while non-complex losses are processed swiftly with limited human intervention.

At the loss site, Crawford is also introducing virtual technologies which generate detailed 360o views of the affected location. These images can be viewed remotely by specialist adjusters as well as insurers, allowing all parties to conduct a virtual site walkthrough to speed up the claims process. Crawford also operates a range of video collaboration tools which enable adjusting teams to engage directly with insurers and policyholders in real time to ensure effective claims resolution.

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Prior to lockdown we were having some really good conversations with clients about the adoption of new claims technologies, but there was a degree of inertia at the industry level. But in recent months we have seen those discussions develop significantly.

At Crawford, we have such a range of different response solutions integrated into our operating model, so rather than having a single way to manage claims and describing it as ‘best practice’, we offer the full spectrum of options from straight-through process to hands-on expert adjusting for the complex scenarios, that gives us the flexibility and agility to always deliver the most appropriate claims response in every individual circumstance.

Pat Van Bakel

President, Canada, Crawford

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Run-off

Under starters orders

As the market impact of COVID-19 bites, there are clear signs emerging of efforts by insurers to de-risk balance sheets.

Poor performing business lines and troublesome back-year liabilities are coming under the spotlight as companies seek to jettison weight and focus on more profitable market sectors to protect solvency ratios. In recent months, a number of insurers have announced plans to exit specific lines and in the coming months further departures are likely.

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We do expect to see developments on the run-off front due to the impact of the hardening market which is likely to see companies exiting certain lines of business resulting in an uptick in activity in the run-off space.

Mike Jones

President, Europe, Crawford

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Speed and efficiency of run-off will be of the essence for many operations, particularly those primed for a further uptick in claims activity, either dependent on the outcome of the business interruption test case ruling or as potential claims on the liability side come through,

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Companies will either take over the liabilities and contract with third-party administrators such as Crawford to run-off the claims or the insurers will close the book and look to ensure that the run-off process is conducted in the most efficient way possible. We are certainly seeing more movement on this front and are in a position to offer the expertise and capabilities to facilitate an efficient run-off process.

Mike Jones

President, Europe, Crawford

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About Crawford & Company®

For over 75 years, Crawford has solved the world's claims handling challenges and helped businesses keep their focus where it belongs – on people.



Loss
Adjusting



Third Party
Administration



Managed
Repair



Medical
Management



On-Demand
Services



Catastrophe
Response

9,000 employees | **50,000** field resources | **70** countries | **\$18B** annual claims payments