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Transforming Insurance Customer Service Models: An In-depth Study on the Role of Comprehensive Support, Policy Advisory, and Claims Assistance in Building Customer Trust and Retention

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Abstract

The Insurance Brokers and Agents of the West (IBA West) is an insurance trade organization based in California. The purpose of this qualitative single case study is to explore what support is provided by the IBA West to individual licensees who purchase their client service agreement and abide by the agreement, with the hope to prevent losing commission income from the termination of the agency contract with a managing general agency by an insurance company client. The problem is that if a retail insurance agent can no longer service the policies following the termination of the agency contract with an MGA, the insurance company can then move the policies to its direct writer channel and effectively cut off the agent from the policy commission revenue. Noting that policies only renew once a year or, at most, quarterly for certain commercial lines, this problem is still expected to significantly affect the cash flow of loss-prevention agents and ultimately the trip insurance producers and IBA West itself. The critical knowledge gap is that the IBA West has no previous research to evaluate the effectiveness of the program in the perspective of participating licensees. The primary research question is what comprehensive support is provided by the IBA West to individual licensees who purchase their client service agreement and abide by the agreement after the termination of the agency contract with an MGA by an insurance company client to retain their book of business? The sub-questions involve an exploration of what specific services and communication are included in the policyholder claim assistance, what information and direction are offered in the Alliance's support for arbitration, and what advocacy action is taken on behalf of the participating licensees. The conceptual framework includes the theoretical foundation of wealth management, fiduciary duty and client interest, client acquisition cost, and the history and background of the IBA West, the nature and description of the comprehensive support, and a detailed chain of events after the MGA

Keywords: Insurance, comprehensive support, policy advisory, claims assistance, customer trust, customer retention, Insurance customer service, Customer trust in insurance, Policy advisory services, Claims assistance, Customer retention in insurance, Insurance support models, Transforming insurance services, Customer experience in insurance, Insurance service innovation, Digital transformation in insurance, Personalized insurance support, Omnichannel customer service, Insurance customer loyalty, Customer-centric insurance strategies, Insurance service quality.

1. Introduction

Term after term, insurance providers manage to attract customers, but they often struggle with keeping customers loyal in the long run. As the novelty factor of the promotions wears off, many customers either start to shop around for better deals or consider quitting the service altogether. Therefore, designing an efficient customer service strategy that is capable of preserving customer engagement, trust, and loyalty is crucial for insurance providers seeking competitive advantage in the long run. The objective of this study is to identify the key components of a customer service model that maximizes customer trust and loyalty. Three services frequently needed by customers are taken into account: Comprehensive support for selecting the most suitable policies, policy advisory based on customers' profile and customized risk survey reports, Help with filing claims and obtaining the compensations owed. Two common types of channels to deliver these services, human agents and AI-based systems, are simultaneously considered. By analyzing the field data collected from a local insurance provider, three types of studies are conducted to deepen the insights on enhancing customer trust and loyalty. First, from the perspective of service requests and the corresponding responses, an unsupervised deep learning model is developed to predict the trustworthiness scores of service providers. Second, the insurance providers' detailed actions and the claims' results, such as the dollar amounts and whether the claims are successfully rendered, are meticulously modeled. An approach based on inverse probability weighting is developed to account for the selection bias when estimating the effects of taking specific actions. Finally, a stylized game-theoretic model is constructed to reveal the impact of a service usage fee on customer loyalty, as well as its implications concerning consumers' demand for insurance.

It is a widely accepted premise that analyzing production differentiation leads to a greater rate of innovation, increased accuracy of service design, and increased production efficiency. Research on oriented differentiation related policies and practices is vast. However, the role of theater in grounding customer service models and shaping customer loyalty strategies in the insurance industry is neglected by existing literature.

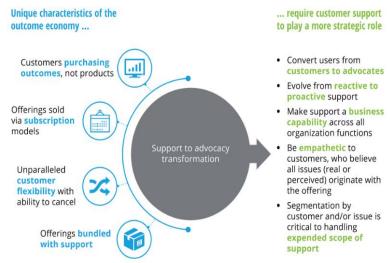


Fig 1: Customer Support Model Transformation

1.1. Background and Rationale

1.2. Despite the efforts of participants in the insurance industry to create original advertising and marketing strategies appealing to generational, cultural, and lifestyle preferences, the cultural perception of Western "service industries sells protection" continues to dominate insurance. Insurance itself is not the "type of consumption we are all proud of" even though the need for insurance protection remains adequately enjoyed by customers and "certain" by providing coverage and now complies with "disarmament" coverage expansion. The insurance policy suddenly disappears from the "cloak of the ambiguous ember" that abounds, can feel the role of keeping customers' lifestyles "cool and clear" for their choice in the market, to guide insurance preferences that help to understand the protection and compromise adequately, but the insurance agency and the white belief regulate the foundation of customers' preferences. Southeast Asia's rich cultural beliefs and distinctive way of life provide insights for exploring the role of four types of travel around the world: Thailand, Indonesia, Malaysia, and Singapore.

This is an important research gap given the essential nature of insurance services which rely on both their intangible core and the service front lines to attract and retain customers. Furthermore, in related studies, a comprehensive review of how complex supportive combined policies and securities assistance will delight customers and build trust is insufficient. The above-mentioned research containment provides a fertile ground for mapping the results of well-thought-out empirical studies encompassing in-depth and interactive research of insurance agency experts. And since insurance customers obviously rely on consultants and agents for information, there is a broad empirical-based scope to investigate how customers can be attracted and supported by the transparency of security products to help providers.

Equ 1: Customer Service Quality Equation

where:

- ullet P_a reflects how well customers are guided through policies.
- $C_s = f(P_a, C_a, S_c)$
- ullet C_a captures how effective the claims process is.
- ullet S_c reflects the availability and effectiveness of support channels.

1.2. Research Aim and Objectives

Health insurance is a growing \$695-billion industry, representing nearly 4% of the U.S. gross national product. At present, it has 2.5 million employees and serves almost 200 million policyholders. But the relentless focus on cost containment is causing enormous pressure for the 1,000+ health insurance companies in the United States to drive down costs, which has led to national healthcare plans even being considered. Many consumers are complaining about the declining customer service in view of the continuing high premium rates. Older adult policyholders are particularly querying why they must continue to pay high premiums even when their health insurance needs have significantly changed. Rising consumerism means insurance companies will have to work much harder to build trust and customer loyalty. Consumers see healthcare coverage as less and less a belief in a face-to-face promise of the health insurance company. Staying close and regularly communicating with the customer is one way to build trust and loyalty. The Macintosh executive team is interested in exploring how such contact could lead to a new customer service model, which would act as a reassuring umbrella for the health insurance company and as surety for their policyholders.

The strategic aim is to explore how the delivery of comprehensive customer support, inclusive of 24-hour nurse hotline, could be developed by a health insurance company so as to strongly build trust in the quality and appropriateness of that service, resulting in a stickiness factor. This then lends policyholders the assurance to stick with the insurance carrier across lifetime

changing events, such as job lay-offs or critical illness. These comprehensive service packages should also contain an online service for policy advisory and the 2-way real time appointment booking. A package that could enhance the efficient flourish of maximal policy benefits would also act as a trust and retention factor. On the other hand, a yearly plan maximum refund of unused policy benefits, issued electronically within 30 days of the policy renewal, would also create an unparalleled trust and retention factor. The strategic objectives to be addressed include the exploration of the most important customer service attributes becoming trustworthiness drivers, the investigation of how the economic and demographic backgrounds of policyholder groups would demand the customer support service features differently, as well as the current telephone customer support appraisal on customer trust and policy retention.

2. Literature Review

The United States insurance market has experienced dramatic changes in customer service over the years. The smartphone revolution and the rise of InsurTech have transformed how customers interact with insurance agencies, yet insurance agents are expected to provide traditional service requirements. However, findings show that the most successful agencies are those that experiment with contemporary practices such as personalized care. It follows that the theory of customer trust in relationship marketing may be valuable in helping long-term survival and growth strategies in contemporary contexts. There is absence in the literature that provides comprehensive explorations of how the support provided by insurance agents for policy advice and claims processing shapes customer trust and customer retention by drawing on the concept of relationship marketing. In order to fill this gap, data from interviews with agency managers in diverse geographic locations in the United States are used here to explore the niche findings. Unceremonious customer-relationship suggestions are made to

maintain or broaden customer care under conditions that trade service failure has a preferred insurance agency operation.

2.1. Evolution of Insurance Customer Service Models

In this competitive environment of the insurance industry, keeping customers happy after getting an insurance policy is important and necessary for any growing company. Customer service is the critical success factor in this kind of industry, which involves understanding the need and requirement of the customer. Insurance industry has to maintain a unique customer service, since the product / service remains intangible up until the time of consumption and varies greatly between providers and customer. Hence the performance assurance to customers before, during and after the purchase cycle. Here customer service should gain more importance and play a major role in achieving a competitive edge over the competitors. The better service quality helps to maintain the customer satisfaction on their products. Insurance customers are keen and sensitive in their selection in terms of reliability and security of the insurance company. The insurance service runs up with high special involvement, the sufficient service provider is important to be part of the service quality management of the insurance industry. Worldwide there are different types of changes taking place according to the changing trends and customer attitude.

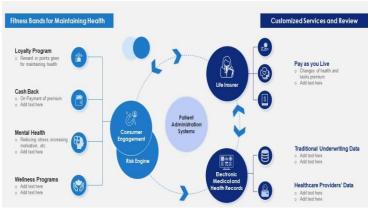


Fig 2: The Evolution of Insurance Ecosystems

2.2. Importance of Customer Trust and Retention in the Insurance Industry

Insurance organizations, which operate in significant value chains in the financial sector, play a critical role in reducing the uncovered risk of the business world and the public. Insurance organizations have the advantage of preventing the economic crisis that may arise as a result of the occurrence of unplanned events and bring a more stable and continuous structure to the economy, while eliminating the uninsured risk that may arise. The insurance organization must keep its share in the market and increase its market share in the competitive business world while maintaining a strong corporate structure. Market share is defined as the ratio of market share within the sector by the total sector. In this context, maintaining strong relationships with customers, especially in traditional areas where the supply sector is strong, is much more important. In this logic, keeping human resources about customer relations, especially call centers, within the insurance organization is of great importance in terms of retaining customers. In the insurance industry, depending on the economy, fluctuating customer flows occur, and the customer profile is generally aged between 35-70. Cultivating customers in this age group means keeping young and actually creating brand loyalty. Therefore, comprehensive support, policy advisory, and claims assistance must be given to push-based service and, by mutual agreement with the customer, various forms of communication must be transferred, such

as e-mails, SMS, telephone or color printing mailing, on the most appropriate course of action. The content of the communication should enable the conversation to be returned in order to build trust. In this way, the expectation of future re-purchasing is awakened and brings customer retention.

3. Methodology

This research paper reports on a study of insurance customer service models and their impacts on the customer in building trust and retention. Comprehensive support, policy advisory, and claims assistance in insurance services from three insurance companies were analyzed and the hypothetical associations of these services with the customer trust and retention were tested. This research found that comprehensive support was the most critical dimension for insurance companies in building customer trust and retention, followed by policy advisory and claims assistance. The service quality and tangibles evaluation for each insurance company presented in this paper will be helpful and beneficial to the modeling of comprehensive insurance services among the insurance industry. Moreover, insurance companies could figure out their own strength and weakness of services in the view of customer trust and retention from the proposed model.

Insurance is considered as an invisible product. The intangibility of insurance exacerbates customers' uncertainty and insecurity regarding purchasing insurance services. Accordingly, it is recognized that an important issue for the insurance company is to gain customer trust. Furthermore, customer trust has been recognized as the major basis of the establishment of a long-term relationship. There is empirical evidence to suggest that trust must be gained through early-stage customer encounters with the company. Given the importance of timely and reliable service delivery to fulfill the service function, effective risk management may possibly consist in part of the building of considerable transparency and predictability in the customer service process.

Equ 2: Customer Retention Equation

- C_t reflects the trust in the company.
- $R = f(C_t, F_q, R_p)$
- F_q is the overall feedback quality (from surveys, etc.).
- ullet R_p is the rate of policy renewals, representing customers

3.1. Research Design

This study commenced its endeavor for gathering information before a decade and over its first two years by focusing deeply on the life-cycle patterns of insurance consumption based on data in Germany; its observations could be confirmed by further surveys of European as well as other non-life insurance markets. Nevertheless, the relatively narrow scope of the previous research plans a substantial unexplored territory, while the influences of specific channels, notably Independent Financial Advisers (IFAs), on customer service arrangements and provision have not been studied. Alongside theoretical interests like chemical substance and professional service markets, the current study extends previous research, primarily with an empirical analysis across lines of insurance business. Given the old life, but new non-life insurance markets with recent and ongoing deregulation and interesting consumer behaviour found, this research provides a valuable context for the specific analyses regarding the growth prospects in non-life insurance in general, and consumer-behaviour based analysis of how these markets function in Germany, in particular.



Fig 3: Customer Support Model

3.2. Data Collection Methods

This study utilized qualitative research methods to gather data regarding strategies insurance carrier and agency representatives employ to provide satisfactory customer service with the aim to retain customers and increase profitability. At the core of this inquiry lies the effort to transform customer service models typically limited to the handling of routine customer inquiries and

the processing of service requests to comprehensive support including, but not limited to comprehensive support, policy advisory, and claims assistance. Additionally, the proposed study aims to determine the extent consistency in these forms of customer service has an effect on improving customer trust and loyalty.

Data sources include 1–2-hour semistructured interviews with 10 insurance carrier and agency representatives from 10 separate organizations. Time was also set aside for pilot testing of the intended interview questions and for the comparison of the synthesized notes and codes to their respective original recordings. The use of snowball and chain-referral sampling further enabled access to potential participants involved in the efforts to fortify a relatively understudied area of the financial services industry. All the focus group interviews were audiotaped and then transcribed for the purpose of thematic analysis. The decision to utilize thematic analysis was primarily made on account of this research question's utility 'when examining the experiences and perceptions of a relatively homogeneous group of people in relation to broad topic areas.' Also, 'ensuring a clear, accurate discrepancy between transcribed spoken word and the respondents' perspective transcription of the data can act as reliable evidence of the study's acceptability, rigour and validity.' For these reasons, it was essential to ensure the effectiveness of data transcription.

Critiquing the effectiveness of the data transcription provided further valuable insights into the data collection process in terms of the manner to best prepare the data collected during the focus group interviews for analysis. The focus group interviews identified the potential for misunderstandings and misinterpretation in the process of preparing the focus group data for analysis. This prompted greater attention to the precision and rigour with which the data from the focus group interviews was transcribed. Efforts to adhere to stringent accuracy and consistency in transcription proved valuable as discrepancies between transcriptions ultimately warranted retranscription of certain focus group datasets.

4. Comprehensive Support in Insurance Customer Service

The convergence of fast-evolving technologies and different channels is changing the ways of operations and service delivery management of insurance. Research and focus group studies show that insurance customer service agents, policy advisories, can build a positive relation such as trust and satisfaction while providing comprehensive support to clients. The quality of comprehensive support agents depend on their efficiency and help more than politeness or respect to the customer. The humane touch is considered to be crucial for these agents. Typically, the personal representatives of insured services such as insurance claim assessors have to deal with customer's sensitive situations. The stakes of insurance claims could be high, because almost a third of personal economic resources in modern society is in the form of property; a lot of claims are indivisible and represent emergency expenses; considerable health and liabilities issues are involved. However, it is found out that a lot of insurance clients experience determinedly poor personal touch with claim assessors. It is argued that if the claim agent is polite, respectful, giving time to the insured and answering queries even if the answer is no, that it will enhance client's understanding and hence, the client will be content with a decision. Furthermore, it is suggested that the client's good understanding procedure and decision making process increases the chances of arbitration. Agencies' readiness to offer additional explanations and detailed rationale supporting the decision, although the rationale can be provided ex post, could enhance praises for fairness of the decision and procedural fairness.

It is argued that insurance agents have the dual role of a patron and vendor for a client's insurance. When a client claim arises, all the stakes that were dormant before coverage purchase are being activated. Insurers take care to deny potential clients with staggering risks. This could imply that most clients could just be underinsured. The suggestion is that as a patron, insurance agents would possibly have to contemplate the premia client has paid under the obligations of entire contract upon the claim submission and either provide more comprehensive service in an informal guidance background or, more formal-letter type advisory on issues such as what professional help client should seek privately to review the process of claim establishment or has there been professional negligence, or insurance need to know that the legality of claim establishment after this time period will be unbearable. All of this should aid in the establishing of a trustful relation.

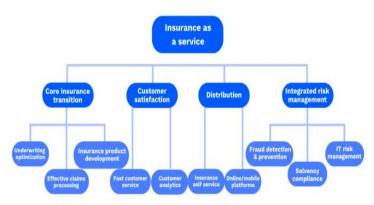


Fig 4: Insurance as a service

4.1. Definition and Components of Comprehensive Support

Comprehensive Support includes policy-based service request, support solution provision, and follow-up assistance. Policy-based service request refers to the provision of services such as the requesting of a policy renewal, the change of insured subjects, the upgrading of insurance coverage, the inquiry about expiration date, or the purchase of new insurance on the basis

of existing policies. It always pertains to a combination of insurance policies, but the healthcare and pension policies are excluded from the support target for the experimental system due to their unique attributes. Healthcare insurance is typified by multiple benefit payments in the form of bills, while the pension insurance utilizes insurance premiums and the interest generated by the insurance company as retirement pension payments on a periodic basis and/or as lump sum payments in the event of retirement age or loss of labor capacity. Therefore, when there is a need for healthcare services or a retirement event in the relevant policies, it is the case that the insurance-specific issuing agent receives requests for the use or termination of healthcare, respectively. The latter decision is of the policyholder and requires a confirmation process, so that it is omitted from the support target. As such, in the request of service policies, support solutions are presented to extract specific feasible measures likely to be requested by the customer facing a variety of scenarios. Finally, the outcome of the processed request is presented as follow-up assistance. Support is inevitable when it comes to the use or investment of large amounts of money, and 98% of the insurance policies are financial products with long-term contracts and financial investments. Most of the insured take out insurance with a relatively low level of expertise, so too many restrictions can also bring about inconvenience. In addition, when listing the help categories before the scenarios in tensification, major items such as the increasing the problem due to the policy or the process of the policy that is not understood other than the help for the request appear, and such inquiries are frequent not when taking out but after the policy is signed. Thus, this part is eventually processed separately even before the testing in a more stable manner. Most services are based on a combination of existing insurance contracts that have been recognized for their purpose, but more detailed supplemented products, rather than basic insurance products, are increasingly being formed. These policyholders use underwriting expertise in this broader scope, which has various attributes depending on the situation or the field, it should be supported with this system. It cannot recognize all forms of help, so general policy-based support is considered.

4.2. Best Practices and Case Studies

The function of these hybrid roles perfectly aligns with the approach insurance companies are adopting in offering comprehensive assistance to their customers. Commercial NSOs have been building comprehensive support, integrating detailed support in a highly regulated environment, while the role of NSOs in customer sales mirrors the role of insurance agents. Commercial support then involves phone support and e-mail support. It also provides help in choosing and purchasing insurance that is best suited to the customer's business nature and needs. The organization of customer service agents has been adjusted according to the nature of advertisements. This enables the agents to provide detailed support in line with the campaign messages.

On the other hand, financial support involves inquiries and complaints regarding payments and refunds. Cost estimates on insurance fees and expenses are often requested by the customers; when the request is complex and the customer requires guidance, the support contains an enumeration of various scenarios that can affect the estimates. The complaints about sudden rises in insurance premiums need to be checked by agents as they are often the result of changes in the criteria used in configuring premiums, such as age or location. Domestic NSO account managers are responsible for creating the customized management plans for their client companies. The role closely mirrors that of insurance agents in advising and selling policies. Each account is handled by a single manager, similar to the "one insurance agent for one client" practice of some insurance companies. Beyond managing the policies, this pluri-annual-role has been expanded into a comprehensive account management. Preventive advice to prevent future non-covered accidents or give guidance on how to manage the claims can benefit both parties in terms of trust and profits. Even when an accident is still uncontested (for example, when the guilt is not clear), an ongoing management is required before any policy can be activated. Finally, once the documents have been submitted and the policy forms have been filed correctly, a validation needs to be done by the NSO within a limited time span, to make sure the benefits will be granted.

5. Policy Advisory in Insurance Customer Service

Underwriting as the implementation of the decisions as to the acceptance or rejection of the risk, the determination of the appropriate premium and conditions for the insurance coverage and creating the policy portfolio accordingly is an important function in the insurance sector. However, the underwriting function in Turkey has been acting by the insurance companies limits mainly the decision of acceptance and rates (including the selection of some standard or fixed rates). The customers and agents are not generally provided with an understandable and reasonable explanation about why their policies are accepted or why not. In case an explanation is given this explanation is generally made by reminding the general conditions of the insurance coverage and trying to lead the customer and agent by saying that "insurance rules require that". Diagnosis and evaluation of underwriting function in insurance sector changes is another important methodology of this thesis. After analyzing the importance of underwriting function the investigation of the changes in the underwriting practices in the insurance market from the perspective of the agents are emphasized. By the term agent a wide sense is meant so that wherever an insurance intermediary is meant they are named agent as well as agencies or producers are also named as agents. It is well known that the business environment and the consumer perceptions rapidly change. These fast changes bring different expectations, conditions and restrictions for the industry. Activities are continuously developing new techniques for providing more reliable risk selection and pricing. In this sense some insurance companies and brokers use credit scoring techniques for their risk selection and pricing. Policy advisory involves offering customers quality and knowledgeable advice that helps them make an informed decision about insurance coverage. This can take on the role of providing customers an opportunity to discuss their insurance needs, lifestyle and how much they can afford. The agent will analyze the risk jointly with the customer and they will search for the ideal insurance program. This type of advisory service allows the customer to have considerable input in

determining what coverage the personalized policy will provide. Personal access to a professional agent to discuss one's particular exposures and insurance coverage is considered a key reason why customers value the agent after policy purchase. The agent provides the advice based on professional expertise and refers to the agent's "army of lawyers" representing the wealth of legal knowledge. On the first notice of a claim the agent is relied to provide advice on the claims process, as this is the first time that the customer may have had a claim. In the complex and specialized field of insurance, it is expected that people will pay an agent to be knowledgeable about something many find confusing and technical.

5.1. Role and Significance of Policy Advisory

Given the increasing rate of competition in the insurance industry, providers are challenged with responding to customer needs and requests around the clock. The intense rivalry among insurance companies makes it difficult for an insurer to sustain its established clientele. Strategic initiatives must be actively pursued by the organization to maintain customer loyalty. On the Indian subcontinent, the topic of investigations is customer service provided by Life Insurance Corporation (LIC), the only company that is licensed to create employment opportunities.

It is widely recognized that as coverage of LIC policies increases, so too do the demands of policy holders regarding information on payment of premiums, policy terms, bonuses, policy conditions, and other standard and / or additional benefits. The right advice must be given to customers, especially as LIC policy terms are generally complex. This is a major challenge, not only for LIC but also for its clients to fully understand the facts. It is not easy to explain about 42 different policies. As a result, people find it difficult to obtain this information, and the rate of lapsation is higher. Gradually the competition in the insurance sector has increased. Private insurance companies are also starting some special savings and protection policies. Customers may or may not be aware of these policies. In some cases, people do not receive the benefits of this policy due to insufficient information. They may also lapse in future insurance policy. So policy advisory services are also useful for customers. In return, the credit for seeking advice will go to LIC and the popularity among the public will increase. With regard to insurance, awareness is less than that of other financial instruments, hence the knowledge level should be increased for financial industry trends and how it is useful for the consumer.

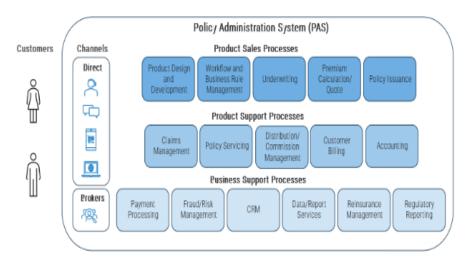


Fig 5: Insurance Policy Administration

5.2. Implementation Strategies and Challenges

This study attempts to bridge the gap in the insurance literature and contribute to insurance management policy development by undertaking an in-depth search in the leading insurance companies in well-established insurance markets, i.e., Japan and the U.S. Following a total of 26 in-depth interviews with the top three insurance companies concerning customer service companies, three main customer service models emerged: building a comprehensive support system; establishing a care center for policy advisory and day-to-day support; and setting up a one-stop contact point for claims assistance. Although three major mail insurance markets in Italy, the U.S. and Japan, insurance studies on the advantages of in-depth customer care and claims assistance in relation to building customer trust and ultimately detaining them are lacking. This research also examines the implementation strategy for effective customer care service systems and the internal and external challenges of insurance companies that plan to invest in these systems, thereby being more amenable to its theoretical and practical implications.

Equ 3: Policy Renewal Equation

C_t is the level of customer trust.

• C_a is the quality of the claims experience.

- $R_p = f(C_t, C_a, F_q)$
- ullet F_q is the customer's overall satisfaction and feedback.

6. Conclusion and Recommendations

Customer insurance is of paramount concern during a time in which the rise of financial profits remains heavy, as the growth of company premiums continues to generate. To meet the evolving needs of the customer, the time of choosing the appropriate model to satisfy the expense and experience demands of the customer is necessary. The role played by complete service, commitment and resolution of complaints is checked empirically to create confidence among customers. After that, the influence of customer trust on the customer's comparative preference is reported. With regards to the results from the analysis technique, the results indicate that the insurance claim service is closest to the insurance client facet, customer support was determined to be the closest link between the facets of increased experience and confidence among clients, and increased confidence among customers.

Service companies, in particular insurance agencies, will aim to provide good service to customers with high quality considerations, as good service will draw customers to come again. Nevertheless, the customer's need for the service is not only seen. Several complaints regarding insurance may also arise from the customer, thus relevant staff are required to properly handle the claim quickly and efficiently. It is suggested that the insurance company should spend further time enhancing its efficiency in managing demands without interruption at the office in order to enhance consumer confidence with the applicable theory.

The findings further indicate that customer trust has a substantial effect on comparative preference of customers. Customer insurance firms must use consumer loyalty plans that can enhance consumer confidence in convincing them to select the plans offered. A five-stage investigation was carried out.

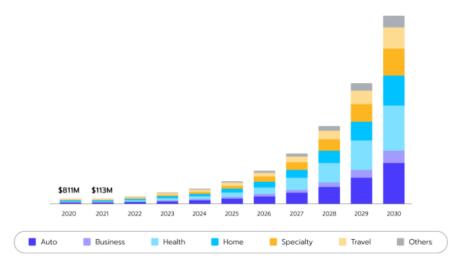


Fig: Insurance industry trends

6.1. Future Trends

Insurance providers are working to offer comprehensive support facilities to all its customers. With the rise of digitisation and the current norms, Covid-19 insurance customer care agents are actively deployed for work from home. It would be akin to a handshake between old technology and new norms. India finds a spike in the number of complaints registered against non-life insurance providers by insurance clients in this particular working environment. In this background, it is important to understand the new form of customer service that insurance clients expect in the non-life business segment. This empirical research uses primary data collection methods and a structured questionnaire to find the perception of insurance clients regarding the future delivery of customer service by non-life insurance providers. In the search for new client concerns, this work analyses three different models for customer support. Insurance clients hope for a claim, policy advice, and comprehensive support to establish a partnership with the product provider. Servqual analysis for each model suggests that the diagnosis of laws is required for all three new service types. Addressing customer complaints quickly can help insurance agents improve trust and maintain consumer loyalty. Thus, a data mining approach is used. The management of the six highest reported issues is discussed, offering a strategy to solve them. The findings have implications for non-life product providers and for the department's Insurance Regulatory and Development Authority. The industry can curate and supervise business models for customer service delivery by market players that support the consumer and concern. On the other hand, new measures may be taken which ensure the protection of the rights of clients.

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