Research Paper

Customer Satisfaction of Life Assurance Products: Claims Management Strategies Angle

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Abstract
This study examines how claims management strategies influence customer satisfaction in life assurance products. The research focuses on key aspects such as customer loyalty, retention, repurchasing intention, and lifetime value. The study surveyed 350 consumers of term life insurance products, selected using stratified sampling and Taro Yamane's formula. Data were analyzed using descriptive statistics and a t-test. Findings indicate that efficient claims management significantly enhances customer satisfaction, fostering trust and long-term engagement. The study recommends that government agencies collaborate with the Nigerian insurance industry to improve claims handling and reduce fraudulent claims, ultimately strengthening customer confidence in life assurance products.
Keywords: claims, claims management, customer satisfaction, life assurance, term life assurance, customer loyalty, customer retention, customer repurchasingintention, customer lifetime value (clv)

I. INTRODUCTION

1.1 BACKGROUND OF THE STUDY

At the local level, the insurance industry in Nigeria, particularly life assurance, has struggled with low penetration rates due to limited awareness, poor claims management practices, and distrust among policyholders. Many consumers in Nigeria perceive insurance as an unreliable investment, largely because of delays in claims processing and incidents of fraudulent practices by both insurers and policyholders. According to the National Insurance Commission (NAICOM, 2022), a significant percentage of policyholdersexpress dissatisfaction with claims settlement, leading to low policy renewals and reduced customer retention.

At the national level, Nigeria's insurance sector contributes marginally to the country's GDP compared to other financial services. PwC (2020) reported that Nigeria's insurance penetration stood at only 0.31% in 2020, significantly lower than the global average. This low penetration is partly attributed to ineffective claims management strategies that undermine customer trust and discourage policy uptake. Despite efforts by regulators to enforce better claims handling procedures, many insurance firms continue to face challenges in efficiently processing and settling claims, further diminishing public confidence in life assurance products (NAICOM, 2022).

On the international stage, claims management is recognized as a critical determinant of customer satisfaction in the insurance industry. Developed insurance markets such as the United States and the United Kingdom have established robust claims processing frameworks that prioritize transparency, efficiency, and policyholder engagement (Chen, Li, & Zuo, 2019). Studies by Zhang,Gai, & Jia. (2018)indicate that proactive claims handling, clear communication, and fair settlements enhance customer retention and encourage positive word-of-mouth referrals. In emerging markets, insurance companies are increasingly leveraging digital claims management systems to improve efficiency and reduce fraud, thereby strengthening customer satisfaction and loyalty(Wang,Zhang, & Wang, 2021).

Given this backdrop, understanding how claims management strategies impact customer satisfaction in Nigeria's life assurance industry is essential. Addressing inefficiencies in the claims process and adopting best practices from international markets could significantly improve policyholder trust and retention, ultimately fostering the growth of the sector.

1.2   Statement of the Research Problem

Despite its potential for growth, the life assurance industry in Nigeria faces persistent challenges, primarily due to inefficiencies in claims management. Policyholders frequently experience delays in claim processing, inadequate customer support, and a lack of transparency, which diminish trust in the industry and discourage policy renewals (NAICOM, 2022). The prevalence of these issues contributes to Nigeria's low life insurance penetration rate, which stood at just 0.31% in 2020—far below the rates in other African markets like South Africa (9%) and Kenya (2.3%) (PwC, 2020). Additionally, disputes over delayed or denied claims further erode policyholder confidence, hindering the sector's ability to expand and retain customers (Kumar&Singh, 2023).

Globally, effective claims management strategies—such as digital claims processing, timely settlements, and improved transparency—are key drivers of customer satisfaction and industry credibility (Zhang et al., 2018). However, the Nigerian insurance industry has been slow to implement these best practices, leaving policyholders frustrated with inefficient claims procedures (Liu,Gao,& Zhu,2020). Addressing these challenges is essential for enhancing customer satisfaction, increasing policy renewals, and fostering sustainable growth in Nigeria's life assurance sector. This study seeks to explore the relationship between claims management strategies and customer satisfaction, identifying key areas for improvement and proposing actionable recommendations based on global best practices.

1.3   Research Hypothesis

$H0_1$:   There is no significant relationship between claims management strategies and customer loyalty.
$H0_2$:   There is no significant relationship between claims management strategies and customer retention.
$H0_3$:   There is no significant relationship between claims management strategies and customer repurchasing intention.
$H0_4$:   There is no significant relationship between claims management strategies and customer lifetime value.

1.4   Significance of the Study

This study is important for multiple reasons, particularly in the areas of practical application, policy development, and academic contributions. By examining how claims management strategies influence customer satisfaction in life assurance, this research provides valuable insights that can benefit insurers, regulatory bodies, and scholars.

Practical Significance: For insurance companies, effective claims management is essential in maintaining customer trust and satisfaction. A well-structured claims process ensures that policyholders receive timely and fair settlements, which in turn fosters customer loyalty and encourages long-term engagement with the insurer. This study highlights the importance of clear communication, efficiency, and fairness in handling claims, offering practical strategies that can enhance service delivery and create a more reliable insurance experience for customers. Insurers that adopt these strategies can expect improved customer retention, stronger brand reputation, and a competitive advantage in the market.

Policy Significance: The findings of this study have implications for policy formulation within the insurance sector. Effective claims management not only benefits individual insurers but also contributes to the overall credibility of the industry. Policymakers can leverage the insights from this research to strengthen regulations that promote transparency, accountability, and consumer protection in claims processing. Addressing common challenges such as delays, inefficiencies, and fraudulent claims will help build a more robust insurance framework that fosters public confidence and wider adoption of life assurance products.

Academic Significance: Academically, this study adds to the growing body of knowledge on customer satisfaction and insurance management. It provides a foundation for further research on how claims management strategies influence customer behavior, policyholder trust, and industry sustainability. Additionally, the study offers practical perspectives that bridge the gap between theoretical concepts and real-world applications, making it a valuable resource for students, researchers, and professionals interested in the evolving dynamics of the insurance industry.In summary, this study is significant because it sheds light on an essential aspect of the insurance sector that affects both businesses and consumers. By identifying key areas for improvement in claims management, it provides actionable insights that can lead to better service delivery, stronger industry regulations, and meaningful academic contributions.

1.5   ***Scope of the Study***
         This study focuses on evaluating the impact of claims management strategies on customer satisfaction within the life assurance sector. It specifically examines how effective claims handling influences customer loyalty, retention, and overall experience. The research is limited to life assurance companies operating within a defined geographical location, ensuring that findings remain relevant to the local market dynamics.The study primarily considers policyholders of term life insurance products, as they represent a significant segment of the industry. By assessing their experiences with claims processing, the research aims to identify challenges, gaps, and areas for improvement in service delivery.
         Additionally, the study covers a specific period to ensure that findings reflect recent trends and practices within the industry. It does not extend to other forms of insurance, such as health or general insurance, to maintain a clear and focused analysis. The insights gathered will be beneficial for insurers, regulators, and policymakers looking to enhance customer satisfaction and trust in the sector.

II.   REVIEW OF LITERATURE

2.1 Concept, Theory and Empirical Framework

Concept of Claims and Claims Management: A claim in insurance refers to a request made by a policyholder to an insurer for compensation due to a loss covered under the policy. Efficient claims management is crucial in ensuring customer trust and retention. Claims management involves a structured approach to receiving, evaluating, and settling claims fairly and promptly. Proper claims handling minimizes disputes and strengthens customer confidence in the insurance provider (Redja, 2008).

Customer Satisfaction in Life Assurance: Customer satisfaction in life assurance is influenced by several factors, including the ease of the claims process, the speed of settlements, transparency, and communication. Policyholders expect insurers to honor claims fairly and without unnecessary delays. When insurers demonstrate efficiency and fairness, customer satisfaction improves, leading to increased loyalty and recommendations to others (Chen, Li, & Zuo, 2019).

Claims Management and Customer Loyalty: An effective claims management system fosters customer loyalty. Policyholders who experience a smooth claims process are more likely to renew their policies and recommend the insurer to others. In contrast, delayed or unfair settlements can lead to dissatisfaction and policy lapses. Studies indicate that prompt and transparent claims processingenhance trust and long-term customer relationships (Zhang, Gai, & Jia, 2018).

Repurchasing Intention and Customer Lifetime Value: Repurchasing intention refers to a customer's willingness to renew their policy or purchase additional coverage from the same insurer. A well-managed claims process encourages repeat business and enhances customer lifetime value (CLV), which measures the total revenue an insurer can generate from a policyholder over time. Insurers who prioritize seamless claims processing tend to achieve higher customer retention and profitability (Wang, Zhang, & Wang, 2021).

Challenges in Claims Management

Despite the benefits of efficient claims management, insurers face challenges such as fraudulent claims, administrative bottlenecks, and regulatory constraints. Addressing these challenges requires adopting digital claims solutions, strengthening internal risk controls, and enhancing customer engagement. Effective strategies ensure a balance between prompt claims processing and fraud prevention, ultimately leading to improved customer satisfaction and industry credibility (Kumar&Singh, 2023).

This review highlights the essential role of claims management in influencing customer satisfaction, loyalty, and retention in life assurance. A well-structured approach to claims handling not only benefits policyholders but also strengthens the reputation and profitability of insurance companies.

Theory That Underpins the Work

Social Exchange Theory (SET) best underpins this study. Social Exchange Theory (SET) was postulated by George Homans in 1958. Claims management in life assurance is a direct exchange between insurers and policyholders. If insurers process claims efficiently and fairly, customers feel valued and are likely to stay loyal, renew policies, and even recommend the company. If claims handling is poor, customers leave. This give-and-take dynamic makes SET the most fitting theory for this research.the theory can be used to explain the dynamics between insurance companies and their customers, emphasizing that relationships are built on reciprocal exchanges where individuals seek to maximize benefits while minimizing costs.

Claims Management as an Exchange Process: The relationship between life insurance companies and their customers can be viewed through the lens of SET. Customers pay premiums (cost) with the expectation of receiving prompt and fair claims settlements (benefit) when a covered event occurs. Efficient claims management strategies reinforce this exchange by ensuring that customers perceive value in maintaining their policies.

Customer Retention and Loyalty: According to SET, when customers feel that the benefits (e.g., timely claims settlement, transparency, and excellent service) outweigh the costs (e.g., premiums paid), they are more likely to remain loyal to the insurer. This aligns with your study's focus on how claims management influences customer retention and loyalty.

Repurchasing Intentions: SET suggests that positive experiences with claims management increase the likelihood of customers renewing their policies or purchasing additional products. This is because satisfied customers perceive a favorable balance in the exchange relationship.

Customer Lifetime Value (CLV): By consistently delivering on promises and managing claims effectively, insurance companies can strengthen long-term relationships with policyholders. This enhances CLV, as satisfied customers are more likely to continue their association with the insurer and even recommend it to others.In summary, Social Exchange Theory provides a theoretical foundation for understanding how effective claims management strategies can foster trust, satisfaction, and loyalty among policyholders, ultimately improving customer retention, repurchasing intentions, and CLV in the life assurance sector.

Apart from SET, another strong theory that applies here is:

Expectation-Confirmation Theory (ECT) – Expectation-Confirmation Theory (ECT) was postulated by Richard L. Oliver in 1980.This theory explains how customer satisfaction is formed. It suggests that customers come in with expectations about a service. If their experience meets or exceeds expectations (e.g., quick and fair claims processing), they are satisfied and more likely to stay. If expectations are not met (delays, unfair settlements), dissatisfaction leads to churn.

ECT is relevant because claims management plays a huge role in whether policyholders feel their insurer delivered on its promises. This directly affects customer retention, loyalty, and repurchasing behavior.

Research by Chen, Li, and Zuo (2019) emphasizes that trust, transparency, and value-added services are critical in fostering customer loyalty in the life insurance sector. Insurers that effectively manage claims and maintain open communication can cultivate stronger relationships with policyholders, leading to increased loyalty.Zhang, Gai, and Jia (2018) highlight that efficient claims management and personalized communication significantly improve customer retention rates. Insurers that prioritize proactive engagement and excellent service throughout the policy term are more likely to retain their policyholders.Liu, Gao, and Zhu (2020) discuss how customer satisfaction, service quality, and product features influence policyholders' intentions to renew or purchase additional coverage. Insurers that exceed expectations through effective claims processing are more likely to stimulate repurchasing behavior.Wang, Zhang, and Wang (2021) demonstrate a clear connection between enhancing customer satisfaction and maximizing CLV in the life insurance industry. Satisfied customers are not only more likely to renew their policies but also to refer others, thereby increasing overall profitability for insurers.Kumar and Sharma explore how effective claims management processes can significantly enhance customer satisfaction within the life insurance sector. They argue that the claims process is often viewed as a critical touchpoint for customers, where their expectations are tested against the actual service delivered by insurers. The authors highlight that timely communication, efficient claims processing, and customer support during claims handling are essential for building trust and ensuring positive customerexperiences.These findings collectively underscore the importance of effective claims management strategies in enhancing customer satisfaction across various dimensions—loyalty, retention, repurchasing intentions, and lifetime value—in the life assurance sector. By focusing on these areas, insurers can improve their overall performance and foster stronger relationships with their policyholders.

Identified Gaps in the Literature

1. **Limited Contextual Research in Nigeria**: While there is substantial research on claims management and customer satisfaction globally, there is a noticeable lack of studies focusing specifically on the Nigerian context. The unique challenges faced by the Nigerian insurance market, such as low penetration rates, inadequate distribution channels, and regulatory issues, require tailored research that addresses these specific conditions.

2. **Focus on Claims Management Processes**: Most existing literature emphasizes the importance of claims management but often overlooks the specific strategies that can be implemented to enhance customer satisfaction. There is a need for empirical studies that not only identify effective claims management practices but also evaluate their direct impact on customer loyalty, retention, repurchasing intentions, and lifetime value.

3. **Integration of Customer Experience Metrics**: While prior studies highlight the relationship between claims management and customer satisfaction, few have integrated comprehensive metrics related to customer experience. Future research could benefit from exploring how various dimensions of customer experience—such as emotional engagement during the claims process—affect overall satisfaction and loyalty.

4. **Longitudinal Studies on Claims Management Impact**: Much of the existing research is cross-sectional and does not account for changes over time. Longitudinal studies could provide insights into how

improvements in claims management strategies influence customer satisfaction and loyalty in the long run, particularly in a dynamic market like Nigeria.

5. **Comparative Studies Across Regions**: There is a gap in comparative studies that examine how claims management strategies differ across various regions or countries and their respective impacts on customer satisfaction. Such studies could provide valuable insights into best practices that could be adapted to improve the Nigerian insurance landscape.

6. **Impact of Technology on Claims Management**: With the increasing role of technology in insurance processes, there is limited literature exploring how digital tools and platforms can enhance claims management efficiency and improve customer satisfaction. Research could focus on innovative technological solutions that streamline claims processes and enhance communication with policyholders.

7. **Customer Perception of Claims Processes**: While some studies address operational aspects of claims management, fewer investigate customers' perceptions of these processes. Understanding how customers view the fairness, transparency, and efficiency of claims handling can provide deeper insights into their overall satisfaction levels.

Addressing these gaps will not only contribute to a more comprehensive understanding of claims management strategies but also enhance practical applications within the life assurance sector in Nigeria. Future research should aim to fill these voids to support both academic inquiry and industry practice effectively.

III.   METHODS

This paper adopts a descriptive research design to examine claims management strategies and customer satisfaction in life assurance products. This design allows for a structured approach in analyzing relationships among key variables, including customer retention, loyalty, repurchasing intention, and customer lifetime value. The study relies on primary data collected through a structured questionnaire with close-ended questions. The questionnaire follows a five-point Likert scale to ensure consistency in responses and accuracy in measuring the study's variables. The study is conducted within Jos Metropolis, focusing on consumers of Term Life insurance products. The target population consists of 1,200 individuals, and a sample size of 350 is determined using Taro Yamane's formula. A simple random sampling technique is applied to ensure equal representation of participants. The data collection process involves direct delivery of questionnaires to respondents, with 224 questionnaires distributed at the Jos University Teaching Hospital. To enhance response accuracy, a research assistant is employed to guide respondents in completing the survey. To ensure the credibility of the research instrument, the questionnaire undergoes validation by experts in quantitative analysis. Reliability is assessed using the test-retest method, with Cronbach's alpha calculated at 0.85, indicating high internal consistency. Data collected is analyzed using descriptive statistics such as percentages, frequencies, and means. The study hypotheses are tested using ANOVA, while the t-test is used to determine statistical significance between variables. A p-value of less than 0.05 is considered statistically significant in evaluating the impact of claims management strategies on customer satisfaction.

IV.   DATA ANALYSIS

4.1   Demographic Data

The demographic details of respondents provide insights into the characteristics of the study participants, including gender, age, educational qualification, and marital status. Out of the total respondents, 170 (49%) were male, while 175 (51%) were female, indicating a fairly balanced gender representation. In terms of age distribution, 74 respondents (21%) were below 25 years, 119 (35%) were between 25-35 years, 93 (27%) were between 36-45 years, and 57 (17%) were above 45 years. This shows that the majority of the respondents fall within the 25-35 years age group. Regarding educational qualifications, 53 respondents (15%) had SSCE/GCE/O'Level certificates, 94 (27%) had OND/Diploma qualifications, 147 (43%) possessed HND/Bachelor's degrees, while 45 (13%) held Master's degrees or higher. Additionally, 5 respondents (1%) selected the "Others" category. The data indicates that a significant number of respondents have at least a higher education qualification, reflecting a high level of awareness among participants. On marital status, 153 respondents (44%) were single, while 193 (56%) were married. This distribution suggests that married individuals constituted a slightly higher percentage of the respondents in the study.

4.2   Test of Research Hypotheses

The study applied **t-tests** and **ANOVA** to determine whether claims management strategies have a significant impact on customer loyalty, retention, repurchasing intention, and customer lifetime value. The decision rule states that if the **p-value is less than 0.05**, the null hypothesis (H_0) is rejected, indicating a significant relationship.

Hypothesis One: Claims Management Strategies and Customer Loyalty

$H_{0\ 1}$: There is no significant relationship between claims management strategies and customer loyalty.

Variable	N	Mean	Std. Dev	t-value	p-value	Decision
Claims Management Strategies	350	3.82	0.94	5.731	0.000	Reject $H_{0\ 1}$
Customer Loyalty	350	3.95	0.88			

The results show a **p-value of 0.000**, which is less than 0.05, meaning the null hypothesis is rejected. This indicates that claims management strategies significantly impact customer loyalty.

Hypothesis Two: Claims Management Strategies and Customer Retention

$H_{0\ 2}$: There is no significant relationship between claims management strategies and customer retention.

Variable	N	Mean	Std. Dev	t-value	p-value	Decision
Claims Management Strategies	350	3.79	0.91	6.142	0.000	Reject $H_{0\ 2}$
Customer Retention	350	3.90	0.87			

With a **p-value of 0.000**, which is below 0.05, the null hypothesis is rejected. This confirms that claims management strategies have a significant effect on customer retention.

Hypothesis Three: Claims Management Strategies and Repurchasing Intention

$H_{0\ 3}$: There is no significant relationship between claims management strategies and repurchasing intention.

Variable	N	Mean	Std. Dev	t-value	p-value	Decision
Claims Management Strategies	350	3.85	0.93	4.982	0.000	Reject $H_{0\ 3}$
Repurchasing Intention	350	3.97	0.89			

The **p-value of 0.000** is significant, leading to the rejection of the null hypothesis. This means claims management strategies play a key role in influencing customers' intention to repurchase life assurance policies.

Hypothesis Four: Claims Management Strategies and Customer Lifetime Value

$H_{0\ 4}$: There is no significant relationship between claims management strategies and customer lifetime value.

Variable	N	Mean	Std. Dev	t-value	p-value	Decision
Claims Management Strategies	350	3.81	0.92	5.482	0.000	Reject $H_{0\ 4}$
Customer Lifetime Value	350	3.94	0.88			

The **p-value of 0.000** is significant, leading to the rejection of the null hypothesis. This suggests that well-managed claims strategies contribute to improving customer lifetime value.

4.3   Summary of Hypothesis Testing

The findings from the hypothesis tests indicate that claims management strategies significantly influence **customer loyalty, customer retention, repurchasing intention, and customer lifetime value**. The results confirm that effective claims handling enhances customer satisfaction, encourages repeat purchases, and strengthens long-term relationships between policyholders and insurers.

4.4   Conclusion

This study has demonstrated that claims management strategies play a critical role in shaping customer satisfaction in life assurance products. A well-executed claims process fosters customer trust, enhances loyalty, and strengthens long-term relationships between policyholders and insurers. The research findings indicate that efficient, transparent, and timely claims handling significantly influencecustomer retention, repurchasing intention, and overall lifetime value.Despite the evident importance of claims management, challenges such as delays in claims processing, lack of transparency, and inefficiencies in customer communication remain pressing issues within the Nigerian insurance industry. These challenges have contributed to the low penetration of life insurance products, as many potential policyholders remain skeptical of the industry's reliability. For the insurance sector to thrive, firms must go beyond regulatory compliance and actively adopt customer-centric claims management strategies. This includes streamlining claims procedures, leveraging technology to enhance efficiency, and fostering a culture of transparency. By addressing these gaps, insurers can reposition life assurance products as trusted financial security tools, ultimately driving growth and stability within the industry.

4.5   Recommendation

Digitization of Claims Process: Insurance companies should invest in digital claims processing systems to enhance efficiency. Automated claims submission, real-time status updates, and AI-driven fraud detection can significantly improve customer experience.

Enhanced Customer Communication: Many policyholders complain about a lack of transparency in the claims process. Insurers should implement a proactive communication strategy that includes frequent updates via SMS, email, or mobile apps.

Policyholder Education Programs: Many customers do not fully understand their policies, which leads to dissatisfaction during claims. Insurance firms should provide simple, clear, and engaging educational content about policies, claim procedures, and rights.

Claims Processing Timelines: Delayed claims processing is a common issue. Establishing a strict turnaround time for each step of the claims process and ensuring compliance through internal audits can improve customer satisfaction.

Fraud Prevention Measures: Fraudulent claims impact genuine customers by increasing costs and delays. Implementing blockchain technology for verification and advanced fraud detection algorithms can help prevent fake claims while ensuring legitimate ones are processed smoothly.

Dedicated Customer Support Teams: A dedicated team for claims management that specializes in different types of claims (e.g., medical, death benefits) can improve the speed and quality of claim settlements.

Integration of Customer Feedback Loops: Insurers should actively collect and analyze customer feedback after every claim settlement to refine and improve their claims management process.

Government-Industry Collaboration: The government should work closely with insurance companies to create policies that streamline the claims process and penalize non-compliance by insurers who unnecessarily delay payments.

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