Meeting minutes

Title: Insurance Fraud Taskforce – third meeting

Time: 2.00pm-3.30pm, Tuesday 24th February 2015

Attendees: David Hertzell (Chair), Mark Allen (ABI), Liz Barclay (FSCP), Adam Scorer (Citizens Advice), Ben Fletcher (IFB), Graeme Trudgill (BIBA) [dialling in], Sean Hamilton (FOS), MoJ, HMT

1. Actions from the previous meeting
   • Agreement was reached on the minutes for the second Taskforce meeting.
   • It was noted that some Taskforce members were currently undertaking small pieces of research which would be shared with members in the coming months.
   • Agreement was reached on the agenda for the following Taskforce meeting 3rd March, to include discussion of the draft interim report and also discussion of Professor Gill’s research into fraud.

2. Stakeholder views
   • It was noted that there had been a roundtable event for Taskforce stakeholders on 24th February which had been well-attended, and that stakeholders were very engaged with the work of the Taskforce.
   • There was a readout from the stakeholder roundtable where topics raised included selling of consumer data, nuisance calls, regulation of lawyers, and consumer behaviour.
   • Members discussed the challenges regulators faced in dealing with nuisance calls from overseas. There were suggestions of organisations who would have relevant expertise which the Taskforce could engage with.
   • It was noted that stakeholders considered changing fundamental attitudes of consumers towards fraud to be a challenge.
   • It was noted that stakeholders had some useful suggestions on how to tackle fraud.

3. Role of insurers in fighting fraud
   • Members discussed the role of insurers in tackling fraud. There was discussion around whether insurers were effectively deterring fraud, and whether practices could be changed to better prevent fraud.
• It was noted that application fraud was viewed as an increasingly significant problem by some in the insurance industry. Members discussed controls in place to prevent consumers from falsifying their disclosures online in order to reduce premiums.
• There was discussion around the role of technology in preventing application fraud and a recognition that progress had been made to date.
• Members discussed the evidence level insurers required for insurance claims and the level of investigation that was taken into potentially fraudulent claims.
• There was discussion around communications between industry and customers about insurance fraud and a recognition of the risk of information overload.
• Members discussed precedents for campaigns which had changed consumer attitudes and the challenges involved in delivering messages about insurance fraud.

4. **Interim report structure**
   • Members discussed the level of detail that the interim report would include and the timeframes for producing the report.
   • Agreement was reached on the timeframes for the production of the interim report.

5. **Quick wins**
   • Members discussed whether the Taskforce interim report could include any early recommendations, and looked at options for ‘quick wins’.

6. **AOB**
   • Members discussed a survey which aimed to collect evidence about the conduct of intermediaries involved in the claims process. It was noted that survey respondents made comments about the regulation of claims management companies.
   • There was discussion about the role of police forces in tackling insurance fraud.