<u>Insurance Fraud Taskforce – stakeholder roundtable 24th February</u>

The event was attended by 23 Taskforce stakeholders including representatives of lawyers, the insurance industry, police, self-insured private companies, regulators and government. The purpose of the event was to seek early views from stakeholders on the work of the Taskforce and to explain the areas that the Taskforce was exploring.

Introduction from Taskforce chair David Hertzell

- David explained that the Taskforce was formed of a core group for logistical purposes but that it would engage more widely with interested stakeholders.
- David noted that an interim report would be produced with a call for evidence and stated that
 this report would largely be exploratory as the problem of insurance fraud was deep-rooted
 and required further consideration. David said that this report could however include an early
 recommendation.
- David set out the key areas of focus for the Taskforce.

Stakeholder views

- There was discussion around the level of evidence that defendants require of claimants and whether insurance claims are being sufficiently scrutinised. Some attendees suggested that fraudsters are encouraged by the view that their claim will not be fully investigated.
- Attendees discussed the significance of bodily injury fraud and there was debate around whether the level of this fraud is increasing.
- Attendees discussed the availability of fraud data and there was debate around whether the
 insurance industry should share data more freely with other parties and over how this should
 be funded.
- Attendees discussed the role of lawyers in preventing insurance fraud and discussed the regulatory framework for lawyers.
- There was discussion around nuisance calls and the role of these calls in encouraging fraud.

 Attendees raised concerns about how data is sourced for nuisance calls.
- Attendees discussed attitudes of the public towards insurance fraud. There was discussion
 around the difficulty of changing perceptions among some consumers that insurance is fair
 game for fraud.

Attendees discussed ways of tackling fraud, including: improving regulation of the claims
process, reforms to civil litigation, changing insurers' communications, educating consumers
better, more effectively challenging potentially fraudulent claims, and conducting academic
research into the topic.