UK Insurance Index

General insurers vs. Life & pension

Claims Edition:

1 February 2023 – 31 January 2025







Communication

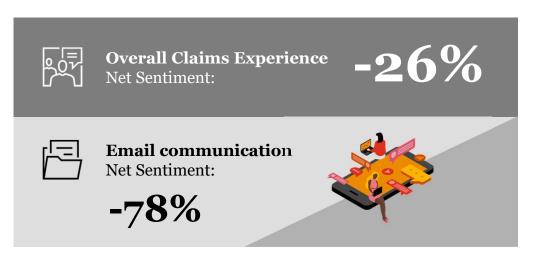
Overall, the insurance industry's claims experiences saw a year-on-year improvement of

24 pp (percentage points)





General insurers



Email communication receives a net sentiment score of -78%, with **customers frequently citing slow or absent responses**, repetitive or automated replies that fail to resolve their issues, and a lack of follow-up after initial contact. Clear and timely communication plays a crucial role in building trust, whereas poor updates and inaccessible support channels often lead to heightened customer frustration.



Life & pension



Email communication holds a net sentiment score of -80.3%, with **key concerns including unanswered emails**, significant delays in response times, and the need for customers to send multiple follow-ups to receive an update. Additionally, automated or vague replies that fail to address specific concerns further contribute to customer dissatisfaction.

Claims processing



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General insurers

General insurers face ongoing concerns from customers around **delayed communication and the denial of claims**. In contrast, best practices that drive positive experiences include prompt approvals, clear and transparent updates throughout the claims process, and efficient, well-structured digital systems.



Life & pension

Delays in processing often stem from issues related to death certificates and medical records, leading to prolonged timelines and considerable emotional distress for customers. Complex documentation requirements—particularly repeated requests for documents that have already been submitted—further compound frustration and intensify the burden on grieving individuals.



Overall Claims ProcessingNet Sentiment:

-24%

45%

of turnaround time complaints were related to the **status of claims**



Overall Claims ProcessingNet Sentiment:

-10%

Turnaround time was a major pain-point in claims experiences

-54%
Net Sentiment

Digital channels





General insurers



Life & pension

Digital claims processes are becoming increasingly popular due to their generally user-friendly design, but several challenges remain. While many insurers offer streamlined digital journeys, issues such as slow response times and a lack of real-time updates continue to affect customer satisfaction. Common complaints include technical problems like login failures, unresponsive or slow websites, confusing navigation, difficulty locating important documents, and occasional errors in processing claims or payments.



Website Net Sentiment:

-57%

Customers appreciated easy-to-use interfaces with clear instructions, quick access to policy details and claims tracking, and smooth online transactions for renewals or payments.





Website Net Sentiment:

-44%

Customers were also appreciative of user-friendly website design, efficient ways of making claims, checking policy details and managing online accounts. Customers also praised good web chat support. They felt this was a convenient alternative to phone support.



Staff



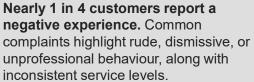
General insurers



This shows insurers with helpful, professional and responsive staff received praise.



negative experience. Common unprofessional behaviour, along with inconsistent service levels.





Life & pension



60%

This is an increase of 51 percentage points from the previous yearhighlighting the value of helpful, professional and responsive staff.



6%

Notably, life insurers are generally meeting customer expectations in this area. Customers frequently praise the compassionate approach of staff and the proactive communication provided.

^{*} This figure represents the general customer perception of staff and is not limited to the claims experience.

Drivers of staff positivity in the claims experience



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General insurers

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Life & pension

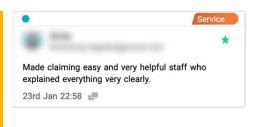
Staff Competency

Customers respond well to knowledgeable and responsive support. Many made specific reference to representatives who help them navigate complex claims more confidently and reduce the stress of the process.



Staff Competency

Staff who demonstrate a good understanding of the product, communicate clearly when explaining complex processes, and provide timely updates receive the most positive feedback.



Staff Conduct

Customers often compliment friendly, polite and professional staff. Even in some cases when outcomes fall short, positive sentiment is driven by clear communication, respectful interactions, and a willingness to assist.



Staff Conduct

Key attributes of well-perceived staff conduct include compassion, patience, and respect. Positive feedback often reflects a strong appreciation for representatives who remain calm and considerate, particularly during emotionally sensitive moments.



Customer service



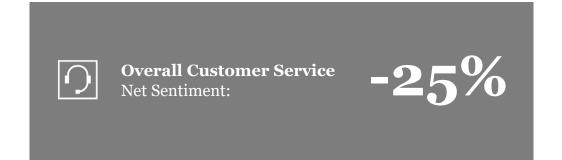


General insurers



Life & pension

Customer service plays a crucial role in shaping consumer perceptions, with long wait times, difficulty reaching agents, experiences of unhelpful or rude staff, and repeated transfers without resolution causing significant frustration. These service shortcomings are particularly impactful during sensitive times such as bereavement, where poor customer support exacerbates customers' distress.



The call centre was a major painpoint for consumers, accounting for 35% of conversation volume. -63%
Net Sentiment



Overall Customer Service
Net Sentiment:

-25%

This accounted for $\mathbf{81\%}$ of the volume around the claims experience

Call centre Net Sentiment was higher than general insurance, accounting for the largest volume of conversation at **35**% — making it the preferred method of contact.

-45%
Net Sentiment

Claims outcomes



General insurers



The status of claims

is the most significant issue, with a net sentiment of:

Customers frequently raise concerns about delays in repair timelines and the quality of the repairs themselves. These issues contribute to frustration and negatively impact overall satisfaction.











Life & pension



The status of claims

is the most significant issue, with a net sentiment of:

-73%

This accounted for **41%** of the volume around claims processing

Approved or rejected claims Net Sentiment:

-43%









Products





General insurers



Overall Products Net Sentiment:



Travel insurance Net Sentiment:

-87%



Home insurance Net Sentiment:

-60%



Motor insurance Net Sentiment:

-46%

The primary sources of customer complaints include **slow turnaround times**, being transferred between multiple agents without receiving meaningful updates, and a sense of betrayal when final payouts are perceived to be below market value. These issues significantly undermine trust and customer confidence in the claims process.



Life & pension



Overall Products Net Sentiment: -59%

Products accounted for **40%** of conversation volume



Life insurance

Volume:

Net Sentiment:

-63%



Funeral cover

Net Sentiment:

Volume:

-38%

Policy wording



General insurers



Policy terms & conditions *
Net Sentiment:

-47%



Common complaints included **claims rejected due to policy fine print** which customers felt were unfair exclusions or technicalities, and customers feeling misled by policy terms.



Life & pension



Policy terms & conditions *
Net Sentiment:

-62%

This was significantly lower than for General Insurance

There are allegations that insurers strategically use fine print, hidden clauses, or vague wording in policy documents to justify claim denials. Some customers report that these exclusions were not clearly communicated at the time of signing up, which leads to feelings of deception and mistrust.

^{*} This figure represents the general customer perception of policy terms & conditions and is not limited to the claims experience.

Vulnerable customers

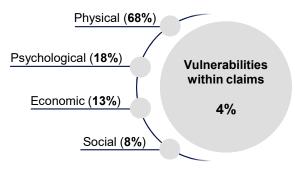




General insurers



Customers frequently perceive extensive delays and repeated requests for information as deliberate 'delay tactics,' which significantly damages their trust in the insurer.



In some cases, these delays leave vulnerable individuals in unsafe living conditions, facing financial hardship, or enduring prolonged emotional distress.



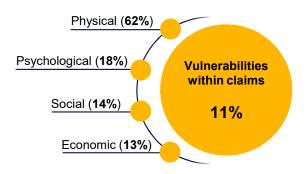
Life & pension



Vulnerability factorsNet Sentiment:

-78%

Physical vulnerabilities had the highest volume of vulnerability conversation



Customers consistently report delays in claims processing, excessive bureaucracy, and financial hardship, often during moments of heightened medical or emotional vulnerability. These issues are compounded by poor customer service and lack of clear communication, leaving policyholders—particularly the elderly, bereaved, or seriously ill—without timely access to critical funds or care when they need it most.

Claims risk factors



Accusations against both general and life & pension insurers tend to focus around perceptions of:

- **Fraud or scams**, driven by feelings of deception related to policy terms or unexpected claim outcomes.
- Unreasonable claim rejections, often due to excessive scrutiny or denial despite customers believing they met all requirements and submitted adequate evidence.
- Prolonged delays—sometimes lasting weeks—paired with a lack of communication, leading to perceptions that insurers are hoping customers abandon their claims.
- Policy disputes and loopholes, with frustration over the use of fine print, ambiguous wording, hidden clauses, or changing conditions used to justify claim denials.



General insurers



Life & pension



Overall Claims Risk Net Sentiment:

-100%

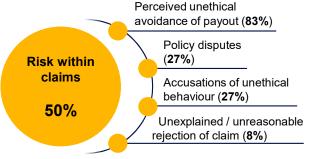
Overall Claims Risk Net Sentiment:

-100%

Customers accused insurers of fraud & **scams** due to feeling deceived by policy terms or claims outcomes.

Perceived unethical avoidance of payout (69%) Policy disputes (41%) Risk within claims Accusations of unethical behaviour (32%) 55% Unexplained / unreasonable rejection of claim (8%)

Perceived unethical avoidance of payout had the highest volume of conversation



Contacts



Alex BertolottiPartner, UK Insurance Leader
PwC UK

alex.bertolotti@pwc.com



Mohammed Khan

Partner, Global and UK Risk
Managed Services Leader &
General Insurance Leader
PwC UK

mohammed.s.khan@pwc.com



Melanie Malherbe

Managing Director

DataEQ

melanie.malherbe@dataeq.com



Jamie Botha

Head of Partnerships
Middle East & UK
jamie.botha@dataeq.com

www.pwc.com/za www.dataeq.com

Thank you



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