BLACKLINE CONSULTING

A HIGHER STANDARD

# CHIEF CLAIMS OFFICER

A market intelligence brief for insurance claims leaders

*June 2026*

# THE BLACKLINE RADAR SERIES

The Radar series is a set of role-based briefings for insurance executives, designed to be read in minutes and discussed for longer. Each Radar takes a single seat at the executive table and asks one question: *what should this leader have on their screen for the year ahead?*

Every Radar is structured around five lenses:

--> **THE BRIEF:** The mandate for the role this year, stated plainly. What the organisation is asking of this executive, and how that ask differs across General Insurance (UK retail and commercial) and the London Market and Specialty.

--> **HEADWINDS:** The forces working against the role. Market conditions, cost pressures, regulatory constraints and structural shifts that make the mandate harder to deliver.

--> **TAILWINDS:** The forces working in the role's favour. Capabilities, market dynamics and tools that, used well, give the executive room to move.

--> **BLIND SPOTS:** The areas where visibility of risk is limited. Not the known problems, but the places where the data, the reporting or the operating model may be quietly masking an issue.

--> **EXECUTIVE TENSIONS:** Where interests may align or diverge. The points of natural tension and natural partnership across the executive team, and where the CCO's agenda intersects with that of the CUO, COO and CFO. Knowing where interests align is often the difference between a mandate that gets delivered and one that stalls.

Throughout, we treat General Insurance and the London Market and Specialty as genuinely distinct markets. The pressures rhyme but they are not the same, and a Radar that blends them serves neither.

This edition focuses on the Chief Claims Officer: *Holding the line on indemnity cost and claims inflation as litigation funding and AI-enabled fraud test the book from multiple directions at once.*

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# CHIEF CLAIMS OFFICER

THE BRIEF:

Claims is where the underwriting cycle's pain lands and in 2026, it is landing from multiple directions at once.

**GENERAL INSURANCE:**

In General Insurance, the mandate is to manage a high-volume motor and home operation under sustained pressure from repair and rebuild inflation, vehicle technology costs, supply chain disruption and rising customer and conduct expectations, all while staying ahead of AI-enabled fraud and the operational surges that severe weather increasingly demands.

## HEADWINDS

### Repair & rebuild inflation

→ Vehicle technology, parts, supply chain and labour costs are pushing motor and home severity up, the core driver of the retail margin squeeze.

### Severe weather surges

→ More frequent weather events turn home claims response into a recurring operational and customer experience test.

### Subtle & AI-enabled fraud

→ Volume fraud increasingly sits just inside tolerance, with value shifting into the supply chain and emerging AI and deepfake enabled fraud.

## TAILWINDS

### Supplier & repair partnerships

→ Closer repairer and supplier relationships can control cost and improve customer experience.

### AI & straight through processing

→ AI is moving into production for routine motor and home claims, cutting cycle time and cost at volume.

### Networks analytics & links analysis

→ Supporting the identification of organised fraud rings that individual claim review would miss, reducing leakage across the book.

## BLIND SPOTS

### True volume leakage

→ Total leakage hides across many small decisions rather than a few visible ones and is routinely underestimated.

### AI decision quality & bias

→ As AI enters routine claims handling, whether its decisions are accurate, fair and free of bias is hard to assess and defend against.

### The customer experience reality

→ Dashboards show cycle times but miss how digital handling feels and where it quietly damages customer trust.

# CHIEF CLAIMS OFFICER

THE BRIEF:

Claims is where the underwriting cycle's pain lands and in 2026, it is landing from multiple directions at once.

**LONDON MARKET & SPECIALTY:**

In London Market and Specialty, the mandate is to maintain control of complex, large loss and long tail claims as social inflation spreads, third party litigation funding extends its reach into more classes, casualty reserve adequacy comes under scrutiny and delegated claims handling grows harder to oversee at scale.

## HEADWINDS

### Social inflation & litigation funding

→ Expanding liability, larger awards and the spread of litigation funding inflate casualty claims in ways that are hard to reserve for.

### Catastrophe & non-peak peril volatility

→ Large losses and rising nonpeak perils such as severe convective storms drive volatility in specialty and reinsurance books.

### Oversight of delegated claims

→ Where claims handling is delegated to coverholders and third-party administrators, real time control and consistency are hard to maintain.

## TAILWINDS

### Specialist claims as differentiation

→ Excellent complex and large loss handling is a genuine differentiator that supports the underwriting proposition.

### Data driven leakage & reserve insight

→ Analytics across complex books improve visibility of leakage, indemnity spend and reserve signals.

### Better delegated claims oversight

→ Data and audit tooling improve oversight of delegated and third-party administrator claims handling.

## BLIND SPOTS

### Long tail reserve adequacy

→ With social inflation building, the ultimate cost of open casualty claims may be drifting above what is currently held.

### Delegated & TPA claims quality

→ Whether delegated claims are handled to the carrier's standard is often clearer in report than reality.

### Correlated catastrophe accumulation

→ Accumulation across correlated catastrophe and specialty exposures is hard to see and may exceed appetite.

# CHIEF CLAIMS OFFICER

Claims is where the promise made at the point of sale meets the moment of truth, and where the cost of getting it wrong lands directly on the bottom line.

Six relationships will define how well you deliver in 2026: three where the CCO can build alignment and three where the pressure on indemnity cost and claims integrity will be constant.

## WHERE INTERESTS MAY ALIGN

The alignment here is natural - *invest, & build on it*

*On Being The Lighthouse*

### CHIEF UNDERWRITING OFFICER

--> Claims data is the most honest signal on where pricing and reserving assumptions are holding. Sharing it early makes the account better and the reserves more reliable.

*On Powering Transformation*

### CHIEF OPERATING OFFICER

--> Claims is where the operating model meets the customer. Transformation, automation and supplier strategy need to be designed with the CCO in the room, not handed down to it.

*On Reserves & Indemnity*

### CHIEF FINANCIAL OFFICER

--> Claims is the largest cost line in the business. The CFO and CCO share a direct interest in reserve adequacy, leakage control and the cost of indemnity.

## WHERE INTERESTS MAY DIVERGE

These tensions are structural – *navigate them openly*

*On Cost vs Outcomes*

### CHIEF FINANCIAL OFFICER

--> The CFO wants claims cost down. The CCO must manage what that means for customer outcomes and brand, a tension that is sharpest in high-volume GI claims.

*On Reserve & Pricing Signals*

### CHIEF UNDERWRITING OFFICER

--> The CCO must report the truth on claims even when it is unwelcome. That friction is most acute on long tail specialty reserves where the numbers take time to emerge.

*On Shared Economics*

### COVERHOLDERS, TPAs, & SUPPLIERS

--> Aligned on serving the customer but operating with their own commercial interests. The CCO is responsible for outcomes they do not directly control.

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Founded in 2013, Blackline Consulting is a multidisciplinary boutique advisory and execution firm operating across the UK and North America. We help organisations define strategy, enhance operations, drive transformation, and manage change

*A higher standard, delivered quietly by people who care*



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