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Quarterly

Insurance Journal

January, February, March 2017

Pakistan to Chair MEFIN



EFU Life becomes member of MEFIN

Insurance and Takaful Companies of Pakistan EXCEEDING Over Rs. 1,000,000,000 Gross Premium Written in 2016

Gross Premium (Rupees in Billion) for 2016

General Insurance



17.19



16.27



8.25



4.31



2.78



2.42



2.35



2.33



2.09



2.07



2.05



2.02



1.40



1.35



1.20



1.01



1.00

Life Insurance



38.00



24.68



11.30



7.45

Takaful (Family)



7.49

Health Insurance



2.00

Inside:

- ▶ Fire Insurance Policy Clauses
- ▶ Ethical Values
- ▶ Construction of Survey Report
- ▶ Scope of Agriculture Insurance in Pakistan
- ▶ Health Corner - Medical Service Providers
- ▶ Managerial Role in Employee Motivation
- ▶ International & National News
- ▶ Legal Section
- ▶ Press Release



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Over Rs. 1,000,000,000 Premium

Insurance and Takaful Companies of Pakistan EXCEEDING Over Rs. 1,000,000,000 Gross Premium Written in 2016

GENERAL INSURANCE		Gross Premium* (Amount in Billion)
1	EFU General Insurance Co. Ltd.	 17.19
2	Adamjee Insurance Co. Ltd.	 16.27
3	Jubilee General Insurance Co. Ltd.	 8.25
4	United Insurance Co. Ltd.	 4.31
5	IGI Insurance Co. Ltd.	 2.78
6	UBL Insurers Limited	 2.42
7	Askari General Insurance Co. Ltd.	 2.35
8	Atlas Insurance Co. Ltd.	 2.33
9	Security General Insurance Co. Ltd.	 2.09
10	East West Insurance Co. Ltd.	 2.07
11	TPL Direct Insurance Co. Ltd.	 2.05
12	Alfalah Insurance Co. Ltd.	 2.02
13	Habib Insurance Co. Ltd.	 1.40
14	Premier Insurance Co. Ltd.	 1.35
15	Reliance Insurance Co. Ltd.	 1.20
16	SPI Insurance Co. Ltd.	 1.01
17	Century Insurance Co. Ltd.	 1.00
LIFE INSURANCE		
1	Jubilee Life Insurance Company Limited	 38.00
2	EFU Life Assurance Company Limited	 24.68
3	Adamjee Life Assurance Company Limited	 11.30
4	IGI Life Insurance Limited	 7.45
TAKAFUL (FAMILY)		
1	Pak Qatar Family Takaful Limited	 7.49
HEALTH INSURANCE		
1	Allianz EFU Health Insurance Ltd	 2.00

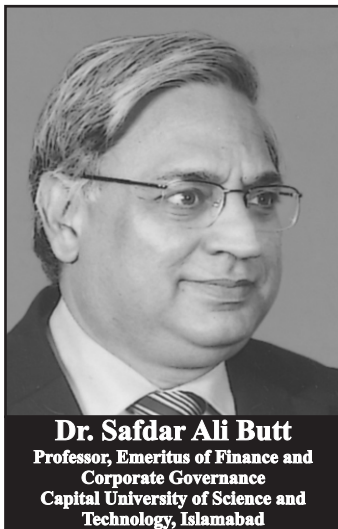
* Figures as available now, before finalization of exact figures for balance sheet.

INSURANCE SECTOR ON PAKISTAN STOCK EXCHANGE

(Quarter: October, November, December 2016)

Compiled By: Khurram Shahzad

Company	Paid up Capital (Rs. in Million)	Face Value Rs.	Higest Rate Rs.	Lowest Rate Rs.	Turnover of Shares	Announcement During the Quarter
Adamjee Insurance Company Limited	3,500	10.00	79.79	51.60	66,415,000	
Asia Insurance Company Limited	450	10.00	23.25	18.92	1,500	Bonus Issue = 25%
Askari General Insurance Company Limited	544	10.00	31.38	23.75	2,461,500	
Atlas Insurance Limited	702	10.00	88.69	65.00	1,791,500	
Beema-Pakistan Company Limited	417	10.00	-	-	-	
Business & Industrial Insurance Company Ltd.	86	10.00	-	-	-	
Century Insurance Company Limited	457	10.00	30.29	26.51	630,000	
Crescent Star Insurance Limited	827	10.00	12.22	8.50	41,353,500	
Cyan Limited	586	10.00	82.25	65.55	3,750,000	Dividend = 25%
East West Insurance Company Limited	508	10.00	153.56	133.21	-	Bonus Issue = 12.5%, Dividend = 12.5%
East West Life Assurance Company Limited	602	10.00	23.99	17.00	169,500	Right Issue = 1.25% at Rs. 10 per share
EFU General Insurance Limited	2,000	10.00	167.65	122.50	1,640,000	Dividend = 10%
EFU Life Assurance Limited	1,000	10.00	219.99	160.00	986,700	Dividend = 10%
Habib Insurance Company Limited	619	5.00	21.58	16.35	2,672,000	
Hallmark Insurance Company Limited	5	10.00	-	-	-	
IGI Insurance Limited	1,227	10.00	307.89	193.54	6,660,600	
IGI Life Insurance Limited	605	10.00	96.18	67.90	1,079,500	Dividend = 10%
Jubilee General Insurance Company Limited	1,569	10.00	108.50	99.00	311,600	
Jubilee Life Insurance Company Limited	793	10.00	578.00	500.70	209,050	Dividend = 30%
Pakistan Guarantee Insurance Company Ltd.	25	10.00	-	-	-	
Pakistan Reinsurance Company Limited	3,000	10.00	42.98	33.50	11,174,500	
PICIC Insurance Limited	350	10.00	7.35	4.80	32,697,000	
Premier Insurance Limited	418	10.00	24.45	19.00	520,000	
Progressive Insurance Company Limited	85	10.00	-	-	-	
Reliance Insurance Company Limited	510	10.00	12.90	9.56	8,967,000	
Shaheen Insurance Company Limited	600	10.00	9.50	5.50	5,490,500	
Silver Star Insurance Company Limited	306	10.00	-	-	-	
Standard Insurance Company Limited	8	10.00	-	-	-	
The Pakistan General Insurance Company Limited	400	10.00	12.79	7.90	3,521,500	
The United Insurance Company of Pakistan Limited	1,803	10.00	23.00	17.00	3,336,500	
The Universal Insurance Company Limited	416	10.00	20.57	11.99	1,093,000	
TPL Direct Insurance Limited	755	10.00	21.52	17.25	203,500	



Ethical Values

What is meant by Values?

Edward Spranger defines the term values as “the constellation of likes, dislikes, viewpoints, inner inclinations, rational and irrational judgments, prejudices, and association patterns that determine a person's view of the world”.

If we talk of Ethical Values, the phrase denotes the degree of importance attached to an action or a decision, with the aim of determining what is best to do from a person's perspective. It can be said that actions or decisions are abstract objects; each person goes through a mental process of putting a value to each of them on the basis of what he considers the right conduct, or good life. Thus values represent the basic convictions or enduring beliefs that a person houses in his or her mind – these then influence each person's preferences regarding conduct with the rest of the world.

Features of Values

- Values are at the core of personality and a powerful force affecting a person's behavior.

- Values have a judgment element – they help a person determine what is good or bad; or right or wrong.
- Values have two important attributes: content and intensity. The content attribute helps a person decide what mode of conduct or end-state of existence is important. The intensity attributes helps determine how important is it. Thus a person may opt for a comfortable life. This is the content aspect. Now how deeply he



wants this quality of life and to what extent can he go to get it is determined by the intensity attribute.

- Values may be stable, enduring and durable; but they are not fixed. They change over time as a person matures.
- Everyone does not hold the same values, or the same set of values. Each of us has a different hierarchy of values that forms our value system.

Types of Values

M Rokeach in his work, *The Nature of Human Values* (1973), classifies values into two broad classes: terminal values and instrumental values.

- **Terminal Values** are the end-state goals that we admire and aspire to reach. These include a comfortable life, a sense of accomplishment, happiness or satisfaction in life, prosperity, recognition among peers, equality among all people, self-respect, family security, etc.

- **Instrumental Values** are concerned with the way we approach the attainment of terminal values. They relate to the means we should use to achieve our desired results. For example, people find that ambition, hard work, cleanliness, integrity, obedience, courage are instrumental in reaching their respective life objectives or goals. Examples of other instrumental values are assertiveness, being helpful, dependability, intellectual pursuits, open-mindedness, receptivity to new ideas, honesty, politeness in manners, etc.

Another way of classifying values could in terms of nature, viz negative and positive values.

- **Negative Values** represent what is deemed to be wrong or bad by the society. Examples include anger, meanness, arrogance, crookedness, greed, lust, etc. Negative values generate negative thoughts which lead to negative actions – and resultant harm to the person and the society.

- **Positive Values** denote a sense of rightfulness and goodness in our judgmental criteria based on our strong sense of what should be the ideal life. Examples include integrity, truthfulness, kind heartedness, humility, friendliness, self-respect, creativity, civil sense, politeness, forgiveness, open mindedness, etc.

There is also another classification of values that is available from literature: inherent values and acquired values.

- **Inherent Values** are those that a person is born with. These are hard-wired in his system and generally do not change throughout a person's life. Examples include frugality, generosity, romanticism, etc.

- **Acquired Values** are those a person learns or get from external influences like family, colleagues, life experiences, etc. Examples include manners, civil sense, etc. which a person learns from others.

There is no dearth of scientists who feel that ethical values are either there in a person, or they are not there. This generalization has two implications. First that all values are inherent values; and the second implication is that a person is either ethical or unethical, or in other words an unethical person cannot be converted into an ethical being. This is not entirely true. There are certain values that are inherent in a person – and there are others that can and should be taught to a person. This is where a good understanding of human value

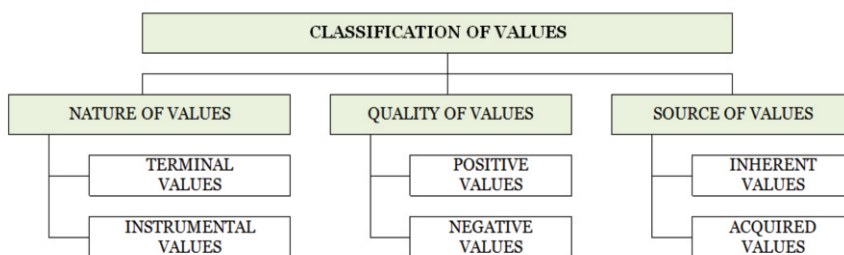


Fig 2.1: Classification of Human Values

systems is important for managers.

Values in a Corporate Body

This essentially refers to the ethical values on which a company bases its decisions and actions. Every company must have a preferred set of values (See an article on Three Critical Statements published in an earlier issue of this journal for more details on this point) and it should ensure that all those people who are under the influence of the company follow these ethical values.

Examples of fundamental corporate ethical values are truth, trust, mentoring, openness, integrity, fairness, etc.

Corporate Values can be considered in two broad perspectives: Managerial Leadership Values and Operational or Business Values.

Managerial Leadership Values

These refer to the beliefs regarding how persons associated with a company wish their leaders (or managers) to conduct themselves ideally. A core component of a managerial leadership philosophy comprises of the values the company wishes its leaders at all levels to live out, or act out. Every company draws a formal statement of values and a code of conduct for all its employees. A later chapter provides details on this point. Seven most admired and sought values in corporate managers (or leaders) are:

- **Honesty** (truthfulness, trustworthiness, integrity)

- **Competency** (ability to manage, maturity, skillfulness, effectiveness)
- **Fair-mindedness** (justice, objectivity, absence of bias)
- **Broad mindedness** (tolerance, flexibility, receptivity to ideas)
- **Dependability** (reliability, conscience, loyalty)
- **Supportiveness** (helpfulness, championing, comforting, self-control)
- **Forward Looking** (visionary, future oriented, ambitious)

All the above qualities may not exist in every manager. Some qualities may be totally absent, others may be in greater or lower quantity, but a good balance between these values is essential for a manager to be accepted as and succeed as a leader.

Operational or Business Values

This refers to the set of values that a company should follow while carrying out its business operations. While the Managerial Leadership Values govern the relationship between the managers and employees of a company, business values reflect on the relationship between the company as an entity and all its business associates like suppliers and customers. Dr M B Athreya, Advisor to Indian industry and former professor at the London Scottish Business School and IMM Calcutta) in his article "Business values for the 21st Century" has prescribed the following set of business values:

- **Righteousness** – creating and sharing wealth, maintaining the highest standards of ethics, and integrity in every business decision.

- *Concern for Public Good* – a company should not work only for its owners; it must do good to the society which provides the company with its revenue and resources.
- *Efficacy* – efficiency in use of resources, care for the environment, no wastage.
- *Innovation* – imagination, continuously strive for improvement and new ideas, products and processes.
- *Learning* – continue to learn throughout the life.
- *Respect for individuals and human dignity* – fair and just treatment for all those people who come in contact with the company.
- *Competitiveness* – it is important for a company never to knowingly give up competition.

Factors that influence formation of Ethical Values

Researchers have come up with four main factors (and two sub-factors) that help shape the ethical values of individuals. The four main factors are family influences, peer influences, life experiences and situational factors. The two sub-factors relate to family factor: these are genetic factors and inherent personal morals. Fig 2.1 lists these factors that influence the formation of ethical values in a person:

Family Influence

Undoubtedly, the greatest influence on the formation process of ethical values of an individual comes from his or her family. However this influence can be considered in three stages: Genetic Influence, Family Grooming and Inherent personality traits.

Genetic Influences

While many researchers deny this, a good percentage of them feel that about 40% of the personal ethical values of an individual come to him or her genetically, i.e. from parents and grand-parents. Now this may not be true in all the cases, it is indeed quite common to notice that employees coming from good families have better ethical and moral standards. This may be considered as an extension of family influences but some researchers (particularly in our part of the world) insist that there is something called good blood. Perhaps this inference comes from the Hindu Caste System where people are divided into classes by birth. And under that system it is automatically assumed that children from noble families have higher personal values and people from lower castes have poor morals. Regardless of the practical validity of this theory, it is not uncommon for managers in Pakistan to inquire about the family background of applicants before offering them any position in the company – a clear indication of how importance is attached by such managers to the genetic factor.

Family Grooming or Atmosphere

Formation of ethics begins as soon as a child starts feeling things around him/her. Family environment has therefore a great influence in determining what the child learns about good, bad, right and wrong. Typically, when parents demonstrate high ethical standards, rewarding good behavior and punishing bad behavior, the child picks up similar ethical standards.

Inherent Personal Preferences or Morals

While all the above factors are relatively external to a person, there is undeniably an internal factor. People do have certain inbuilt traits or preferences. This explains why

children of the same family may exhibit different ethical behaviors. Similarly, students of the same class are seldom similar in habits. Neither are all employees of a company (however well managed it may be) equally ethical. There is undeniably an inherent element. Some people just prefer personal comfort over concern for others. Those who have a love of an easy or luxurious life and material possessions may not have strong ethical standards. However, it can be said that it is wrong to assume that wealth can only be earned using unethical means. Managers need to be vigilant when hiring personnel to gauge the extent to which a person's inherent personality has been formed. In today's modern world, psychological tests are available to evaluate the personality "bents". Companies need to ensure that ethical values of a potential employee are more important than his technical skills. Technical skills can be taught much more easily than infusing a whole new ethical value system in a person that does not have a very receptive heart.

Peer Influence

After the family, comes the group of associations that a person forms outside the house like school friends, play mates, neighbors, etc. If this circle comprises of persons who have good ethical values and who conduct themselves in ethical ways when dealing with mutual disputes and interactions, the child also develops similar ethical values. If the company happens to be bad, the child starts attaching greater value to improper traits.

Life Experiences

As a person matures, he is exposed to many experiences that have a profound impact on his way of thinking and his attitude towards ethical practices. If he sees people being rewarded for dishonesty, or if he gets away with a bad conduct by using

unethical tactics (deceit, dishonesty, lying, etc.), he starts placing greater value on poor traits. But if he experiences or notices that people who conduct themselves ethically are generally happier and more content, and are also more respected by the society, he starts placing greater value on ethical traits. Similarly, if he finds that dishonest people are soon caught and suitably punished, he refrains from repeating the mistakes of such dishonest people. This is one area which is important for managers. They can shape their ethical values of their employees by exposing them to good experiences. If the company as a whole rewards good ethical values and punishes poor ethical conduct, individual employees absorb the influence readily.

Situational Factors

There are times when the conduct of a person may take influence from a particular situation to which he or she is exposed. A hungry person may end up stealing a loaf of bread despite his personal belief that theft is not a right thing to do. Sometimes an experience can change the thinking of a person for ever. For example, if a person who is driving rashly (knowing full well that rash driving is both illegal and improper) meets with an accident and while he survives, he loses a loved one

in the accident. This experience may turn him into a safe or nervous driver forever. Now situational factors can be simulated for imparting ethical training to employees to promote their personal values.

Importance of Values to Insurance Companies

No company desires to hire dishonest workers. Even dishonest entrepreneurs want their employees to be honest and loyal to them. It is therefore important for managers in insurance companies to:

- a. hire persons with well grounded ethical values and
- b. ensure that employees are exposed to experiences and situations that will help them enhance their positive ethical values and curb negative ethical tendencies.

The net result of these two efforts will be an overall improvement in ethics in the work place with attendant positive impacts on productivity and reputational aspects. If we take a look at classification of values, we will notice that positive terminal values provide a motivation to employees to reach a socially acceptable high status while positive instrumental values will equip him or her with tools to

reach that status. In turn, this benefits the company by way of improved work efficiency, productivity and image.

We all know that Ethics is good business. Ethical conduct of a company is dependent upon presence of positive ethical values in its employees at all levels. Insurance is a business of trust – based entirely on the faith that the parties involved place in each other. Ethical values have a direct influence on the level of this trust. If an insurance company's employee is seen as an unethical person, the trust and faith enjoyed by his employer suffers. Managers in insurance companies cannot justify unethical practices adopted by their employees on the grounds of profitability. For example, a claim should not be rejected using frivolous excuses in order to prevent booking a loss. Such tactics result in only a small gain of a purely temporary nature – but has a lasting negative impact on the image of the company.

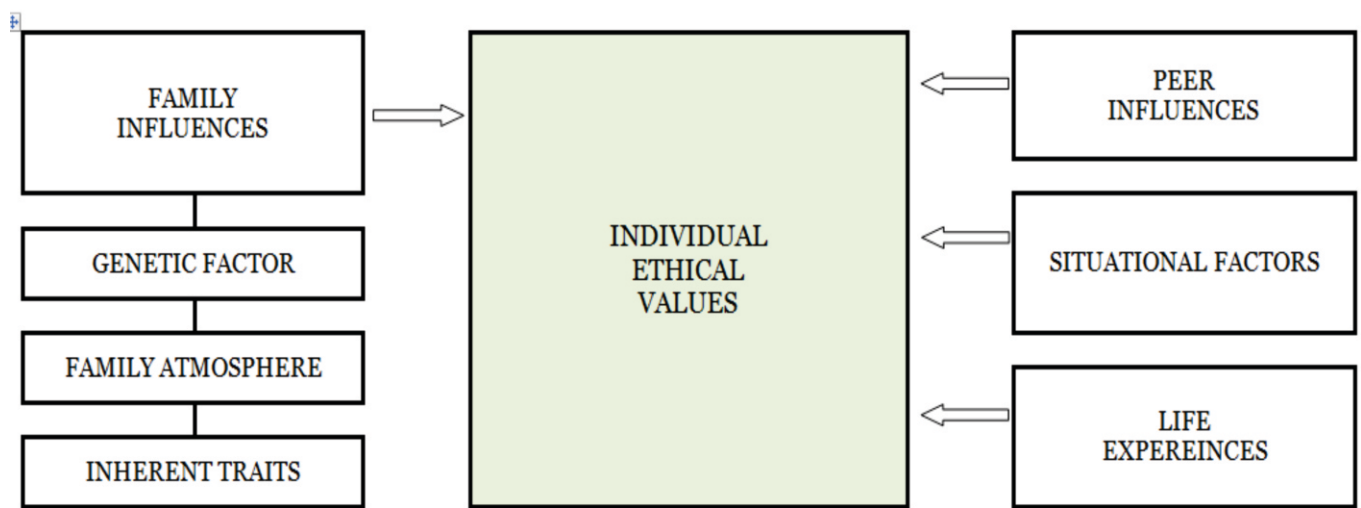
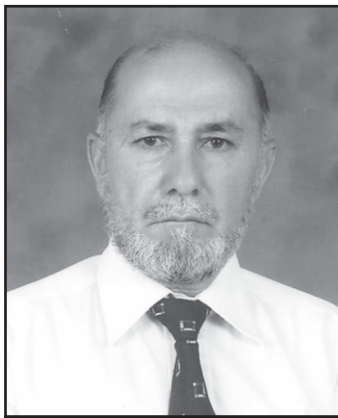


Fig 2.2: Influences on Formation of Individual Ethical Values



Majid Khan Jadoon
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M/s. Pakistan Inspection Co. (Pvt.) Ltd.

Fire Insurance Policy Clauses (Part-7)

Impact Damage Endorsement

When this Endorsement is attached to a Fire Insurance Policy, it will be deemed to form part of the same Policy as if it had been written or printed thereon, ever since the date of the inception of the Policy.

Thereby, in consideration of the payment of additional Premium by the Insureds to the Company, it is declared that, by virtue of the attachment of the Impact Damage Endorsement to the Fire Insurance Policy, but subject, however, to the Special Conditions contained thereafter (within the same Impact Damage Endorsement), the Coverage of the Policy would have been extended to include any Loss or Damage to the Insured-property, either (by Fire or otherwise), which would have been “directly caused” due to impact with Road Vehicles or Horses or Cattles.

Here, I am of the opinion that the bracketed words, within the subject Endorsement, i.e. “by Fire or otherwise”, would imply that, after the Road Vehicles or Horses or Cattles Impact, even if the subject-matter of Insurance would have been damaged by a Physical Fire consequently set thereon or any other nature of

Damage, Proximately Caused by the same Impact, the resultant Loss or Damage would be deemed to have been Indemnifiable within the ambit of the Insurers' relative Fire Insurance Policy by virtue of the attachment thereto of the Impact Damage Endorsement.

And subject to all other Terms and Conditions of the relevant Fire Insurance Policy, alike Loss or Damage caused by the Impact of Road



Vehicles or Horses or Cattles, would be considered as if the same had been caused by a Physical Fire, as per the definition of Fire.

The afore-mentioned **Special Conditions**, contained within the Impact Damage Endorsement, are hereby specifically clarified as follows:-

1) In No case, the Ceiling of Liability

of the Company shall exceed the Sum Insured of each Item of the Policy.

2) More-over, if ownership of Impacting Road Vehicles or Horses or Cattles would belong to the Insureds or the same would have been under the control of the Insureds or their employees, then any Loss or Damage caused by the Impact of alike Insureds' Owned/Controlled Road Vehicles or Horses or Cattles with the Subject-matter of **Insurance would fall out of the Coverage of the Underwriters' relative Fire Insurance Policy**, despite the attachment of the Impact Damage Endorsement therewith.

As far as the words, i.e. “**directly caused**”, as expressed within the Impact Damage Endorsement are concerned, let me quote a discussion, in this context, with the Executives of an Insurance Company which, I trust, would elaborately distinguish the difference between: a) “**Consequential Loss**”, b) Loss or Damage, “**directly caused**” by Impact with Road Vehicles or Horses or Cattles, and c) Loss or Damage caused by Impact with the Insureds' Owned/Controlled Vehicles or Horses or Cattles. While on a visit to the Office of an Insurer, their concerned Claims Manger asked me if he could pose a question to me and seek my opinion in respect of the same.

I instantly consented and the gentleman informed that a Major Claim had been preferred with them by their Insureds, wherein a Dumper-Truck, belonging to a 3rd Party Transporter, while carrying a Load into the Insureds' Factory, had very forcefully struck with the Pole of High Tension Electric-cables, installed within their premises, supplying Power to the Insureds' running Machineries.

Consequently, extensive damages were caused to the Insureds' Machineries in operation, while damages had also been inflicted on the Dumper-Truck.

A Surveyor was stated to have been deputed to assess the status/nature and quantum of the Loss and to spell-out his opinion regarding the Proximate Cause of the Loss, besides the admissibility or otherwise thereof within the purview of the Interested Underwriters' relevant Fire Insurance Policy, with the Impact Damage Endorsement attached therewith. The Surveyor was said to have opined that the Insureds' Claim under reference would fall out of the ambit of the Underwriters' relevant Fire Insurance Policy, caused by the aforementioned Road Vehicle Impact, due to the Dumper-Truck's collision with the Pole of High-Tension Electric-cables, because:-

1) The Loss being due to an Indirect consequence of the Impact of hitting of the Pole of High Tension Electric-cables by a Dumper-Truck and not due to Direct Hit to the Insureds' Machineries by the same Vehicle.

2) Besides, also due to being a "Consequential Loss", because of the Loss being consequent upon the Indirect Hit of the Truck with the said Electric-pole, as against a Direct Hit with the Insureds' Machinery, which, in the opinion of the concerned Surveyor, would fall out of the purview of the Insurers' relative Fire Insurance Policy, despite the

attachment of Impact Damage Endorsement to the same Fire Insurance Policy.

3) And because the Road Vehicle under reference (Dumper Truck in this case) did not belong to the Insureds, the Loss would fall out of the purview of the Underwriters' relative Fire Insurance Policy.

Instantly, I differed with the aforementioned opinion of the Interested Underwriters' deputed Surveyors' reasoning and requested for a Copy of the relative Impact Damage Endorsement which was provided.

After going through the contents of the relative Impact Damage Endorsement of the Interested Insurers' relative Fire Insurance Policy, the same was found to expressly mention and I quote:-

"It is hereby agreed and declared that the insurance under the Policy shall, subject to special conditions hereinafter contained, extend to include loss or damage to property insured (by fire or otherwise) directly caused by impact with road vehicles or horses or cattles"

Herein, in my opinion, two phrases, that is, No.1: "by Fire or otherwise" and No.2: "directly caused", are of utmost significance and, therefore, I would like to express myself, vis-à-vis these phrases.

I am of the opinion that the words "Fire or Otherwise" would mean any nature of Loss or Damage either by a Physical Fire so set-up or of any other description of Loss or Damage, caused to the Subject-matter of Insurance, as a consequence of the "Impact" with "Road Vehicles or Horses or Cattles", would be indemnifiable within the purview of the relative Fire Insurance Policy by virtue of the Impact Damage Endorsement under reference.

The phrase, "Directly Caused", in my

opinion, does not necessarily mean that the Subject-matter of Insurance ought to have sustained Loss or Damage by a **Direct Physical Hit with Road Vehicles or Horses or Cattles**. But it implies that the Chain of the Events of alike Hit must be instantly continuous in sequence, and simultaneous in nature and there must not be any break in the sequence of the Chain of the Occurrences.

Within the afore-mentioned situation of the Loss, the Dumper-Truck was stated to have hit the Pole of the High-Tension Electric-cables which were in the course of supply of power to the Insureds' Machineries being in operation at the very time.

Thus, the extensive Impact of the said Vehicle's Hit with the Pole of the High-Tension Electric-cables had, in my opinion, instantly created huge interruption in the flow of Electric-currents to the Machineries which were running in full capacity. As such, the sudden and most abnormal concussion created by the forceful Hit of the Vehicle's impact with the Pole of High Tension Electric-cables had simultaneously caused serious disturbances in the mechanism of the Insureds' Running Machineries which had caused an intensive Fire therein and the consequent Loss.

In these circumstances, the chain of events, in my opinion, had been simultaneously instantaneous and continuously un-interrupted & un-broken which had proximately caused the Loss and, therefore, indemnifiable within the ambit of the Underwriters' relative Fire Insurance Policy by virtue of the Impact Damage Endorsement thereof.

The afore-mentioned example, whereby the forceful Hit by the Dumper-Truck and the consequent instant/continuous/un-interrupted chain of events, leading to the Loss, as elaborated afore, in my opinion, may be construed as a perfect definition of the Concept of Proximate Cause of

Loss or Damage in the Insurance Parlance.

More-over, under Special Condition No.2 of the Impact Damage Endorsement, if the afore-mentioned Dumper-Truck had been owned by the Insureds themselves or under their control and/or under the control of their employees, the Loss or Damage would have fallen out of the purview of the Underwriters' relative Fire Insurance Policy by virtue of the operation of the Provisions of the Special Condition No.2 of the same Endorsement. In my opinion, the concerned Underwriters' deputed Surveyor, in the afore-mentioned occurrence, appears to have conversely interpreted the wording of Special Condition No.2 of the Impact Damage Endorsement in the afore-mentioned Scenario of the Occurrence of the Loss.

Thus, the said Surveyor's contention of the afore-mentioned Loss/Damage being Consequential in nature, in my opinion, is not tenable because the sequence of the Occurrence had been continuous in effect and there had not

been any break in the Chain of the Events and the Occurrence had been instantaneous as well as simultaneous and without any break in sequence of the Chain of the Occurrences.

On the other hand, The substance of the Consequential Loss or Business Interruption Insurance Policy is entirely different in definition and nature, as well as application from the afore-mentioned Occurrence, as has been attributed to the Loss. This Policy would only Cover the Insureds' Loss of Profit and Increased Cost of Working, consequent upon an Insured-peril. Consequential Loss Insurance Policy, if obtained by Insureds, stipulates that, after a Physical Loss, which any Insureds would have suffered after a Physical Fire, due to an Insured-peril, within the Subject-matter of Insurance, within their Insured-premises, and Production would have been stopped for a Specified Period of Time, which would have caused Loss of Profit to the Insureds and would have also increased their Costs of Working, then alike Loss of Profit plus Insureds' Increased Cost of Working would

have been indemnifiable under the Provisions of the Loss of Profit Insurance Policy or Consequential Loss Insurance Policy.

Thus, under the Provisions of a Consequential Loss or Loss of Profit Insurance Policy, if any, in the afore-mentioned case, the Insureds would have also been entitled to lodge their Claim on their concerned Insurers, in respect of the Loss of Profit/Increased Costs of Working et al, which they would have genuinely suffered, due to the Occurrence of the Loss, Proximally Caused in the said scenario.

I am, therefore, of the opinion that the concerned Surveyor's contention of attribution of the above-narrated Loss to being "Consequential Loss" in the afore-mentioned Scenario of the Occurrence has been incorrect.

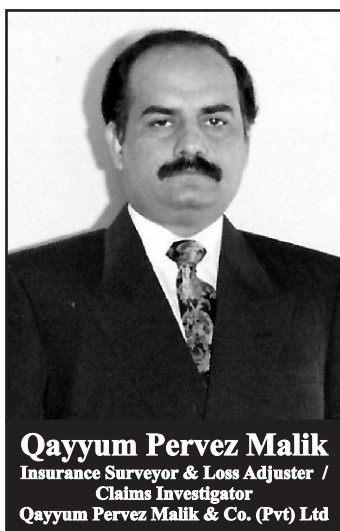
In this context, Comments and Opinions from my learned colleagues are most welcome for the improvement of my knowledge.

To be continued.....



“According to a recent studies one department in which women dominate is HR where they make up 71% of HR executives, which as corporate executives they have a share of around 15%”

“Up to ONE Third of the world's food is wasted before it can be eaten. That is 1.36 tons according to the food and agriculture organization of the United Nation”



Construction of Survey Report

Insurance Ordinance 2000, Insurance rules, require the Insurers carrying out general insurance business in Pakistan to get the claims lodged under general insurance policy surveyed by the Surveyor/loss adjusters authorized by the authorities, the SECP, and obtain survey report prior to settlement of claims.

It is therefore mandatory for Insurers to follow the procedure of claims settlement and also for the person conducting survey of claims to get registered under Insurance ordinance 2000 first to be authorized to conduct a survey and issue survey report.

Through the relevant insurance laws a general guideline is provided to the surveyors to work within these parameters. The relevant section of Insurance rules 2017 promulgated recently, is being produced below for guideline.

Quote

47. Surveys and reports of insurance surveyors: (1) Pursuant to clause (d) of subsection (3) of section 112 the

report of an insurance surveyor shall be subject to the conditions as laid down in sub rule (2).

(2) Every report given by an insurance surveyor shall be signed by a natural person who is, at the date of the report, registered as an authorised surveying officer for the class of insurance surveyors to which the loss being surveyed relates and authorized surveying officer and the insurance

survey report as natural person. Initially the Insurance Surveyors licensed under Insurance Act 1938 were not being allowed to get registered as authorized surveying officers but at later stage they were given licenses as A.S.Os.

(a) a description of the property or interest which constitutes the subject matter of the survey report, sufficient to identify the property or interest;



Explanation

Surveyors are to check the property insured after proper identification with the property insured under relevant policy of insurance. The damaged property presented before the surveyor for survey must be examined whether the same is held covered under

surveyor be jointly and severally responsible for the report, and shall include the following, namely:-

Explanation

After promulgation of Insurance ordinance 2000 and subsequent rules the authorized surveying officer is registered under section 113 of the Ordinance who is authorized to sign a

policy being presented before the surveyor and that the insured maintains insurable interest with the damaged property. So the relevance and identification of the damaged property with the terms of policy is necessary to establish the admittance of liability by the insurers. Subject matter means the property claimed to be damaged and insured under the relevant policy of insurance.

(b) the terms of reference given to the insurance surveyor by the person engaging him;

Explanation

Terms of reference means the nature of assignment given to the concerned surveyors which usually includes determining the circumstances, extent, cause of loss to the subject matter insured. The assessment and adjustment of loss are the essential terms to be followed by the surveyors.

(c) any instructions given to the insurance surveyor by the person engaging him, as to the facts to be assumed or other assumptions to be made by the insurance surveyor;

Explanation

This aspect relates to any special or additional work to be done by the surveyors. It may include determining the moral hazards, claims history, recommendations to minimize the future risk of loss, identification of exposure or other physical hazards, observation of insurance policy warranties/conditions etc. Some other tasks also may be assigned to the surveyors which are required to provide necessary input for improving the underwriting etc.

(d) a description of the procedures carried out by the insurance surveyor in the conduct of the survey;

Explanation

It relates to the procedure adopted by the surveyor to determine cause, extent and circumstances of loss. Also to determine the value at risk etc.

(e) the opinion of the insurance surveyor on the matters contained in the term of reference; and

Explanation

It relates to the independent opinion



of the surveyor as expert on cause, extent, circumstances, value at risk, moral/physical hazards, property insured/subject matter, improvement of risk etc.

(f) a declaration that neither the insurance surveyor, nor any director, employee, associate or partner of the insurance surveyor, nor any related party of any of those persons, has any interest directly or indirectly by way of insurance, ownership, agency commission, repairs, disposal of salvage, or in any other way whatsoever, other than as an insurance surveyor in the property or interest which constitutes the subject matter of the survey report.

Explanation

This declaration bind a surveyor to remain focused on his mandatory function and ambit as independent professional without maintaining any monetary interest or influence with the property insured, its salvage etc which may influence him to make compromise on his independence.

(3) Every survey conducted by, and report given by, an insurance surveyor shall comply with the relevant professional standards of any professional body of which the insurance surveyor is a member.

Explanation

So far the guidelines of SECP and a code of conduct are available to follow for the surveyors. There is no code of professional standards for insurance surveyors are in operation currently. So the prevailing market practices of already established senior survey companies may be taken as guideline.

(4) Every survey conducted by, and report given by, an insurance surveyor shall be conducted and given with due diligence and skill, and in good faith and the report shall be finalized as early as possible but within the period of ninety days:

Provided that where claim, in motor (to include own damage and third party liability) and marine cargo, hull and aviation and miscellaneous business, amount exceeds rupees one million, and in fire and allied perils and engineering classes amount exceeds rupees ten million, and final report has not been submitted within the 90 days of his appointment, the insurance surveyor shall submit preliminary report to the Commission before expiry of the 90 days, mentioning therein the reasons for delay, if any. In case no preliminary report is submitted within the 90 days in the first instance, he will be

required to submit status report thereafter every 90 days.

Explanation

In every professional standard such code is available as to perform the professional and mandatory duties one should act professionally, diligently, promptly, fairly following the prevailing professional standards and law of the land in all respect.

Time limit has been notified for issuance of survey report as 90 days from the date of appointment. In case of inability to do so a procedure has been laid down in shape of issuance of interim or preliminary report to SECP and concerned quarters explaining the reason for non-issuance of survey report within the stipulated time period.

(5) If the Commission has reason to believe that a survey performed has not been performed with due diligence or skill, or in good faith, or that it otherwise does not comply with the conditions of this rule, such that

the report does not present a fair opinion on the matters contained in the terms of reference, the Commission may direct the insurer to arrange an additional survey of the subject matter of the survey report to be performed by one or more licensed insurance surveyors who shall be approved by the Commission.

(6) An additional survey under sub-rule (5) shall be performed at the expense of the insurer and a copy of the report on the additional survey shall be provided to the Commission.

Explanation

In case of any complaint by the injured party which may be insured or any other interest party or even an Insurer the SECP may direct to get the claim surveyed by another surveyor with their approval on the expenses of Insurers to decide the issue of claim provided that the complaining party would prove that the primary surveyor has not acted with due diligence and the survey report is not

based on fair and independent opinion rather unjust.

Unquote

All the surveyors are required to follow above guidelines which are mandatory to function of an insurance surveyor under law of land.

It is quite important to have clear understanding of these requirements for the surveyors so these requirements have been interpreted/explained above along with the relevant rules/sub-rules for the guidance of insurance surveyors.

Note

The essential information, the layout, the format, the description, necessary to incorporate in a comprehensive survey report fulfilling the legal, mandatory requirements and as required under terms of reference by the appointing office and as required by the insurers to decide the fate of claim shall be discussed in next article.



“The two most important days in your life are the day you are born and the day you find out why”

(Mark Twain)

“The only person you are destined to become is the person you decide to be”

(Ralph W. Emerson)



Beeta

Romance with the Air

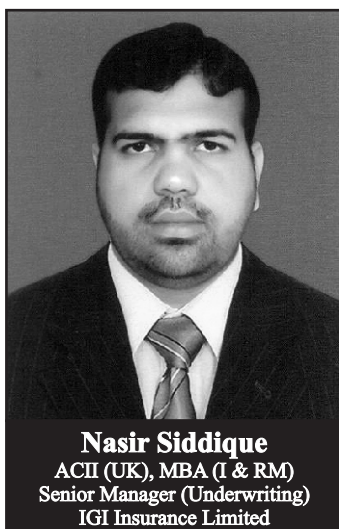
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Scope of Agriculture Insurance in Pakistan

Importance of Agriculture

- Pakistan is a developing country and has the best irrigation system of the world
- About 43% peoples of the country are directly engaged with this sector
- Agriculture is considered back bone of the economy and contributes about 21.5% in the national GDP
- Agriculture is not only a major part of exports but also brings about to enhance the living standard of rural areas
- Agri contribution can be increased by introducing new technology in this sector as well as protecting crops from the risks of natural disasters.

Agriculture is very much vulnerable to the unpredictability of nature. With agriculture production representing the only livelihood for many resource constrained Pakistani farmers, the impact of natural disasters and other agriculture risks cannot be taken lightly. In case of natural calamities, the farmers not only have to bear the loss of their produce/crop but also have to face defaults for the bank credit. The need to safeguard the interests and investments of farmers is, therefore, of paramount importance. Crop insurance is a risk management mechanism designed to even out agriculture risk and blunt the

consequences of natural disasters to make losses.

Types of Agri Insurance

Insurance is never a complete solution to agriculture risk but it can be a part of solution. Following type of insurance products are being used to protect farmers:

1- Damage based insurance

- Damage of the crop is cover due to



specified peril as agreed at the time of inception

- Sum-insured is agreed at the start of policy
- Indemnity is based on shortfall of percentage due to occurrence of the loss event

2- Yield based insurance

- Coverage is provided to the crop against multi perils risks up to expected level of yield
- Sum-insured is based on farmer's

yield history.

- Indemnity is payable if the percentage of the yield is less than the agreed yield

3- Index-based insurance

i) Area yield index insurance

- Coverage is provided on the average area yield (say 80% of the expected area yield).
- Indemnity is paid whenever realized that area average yield is less than the average agreed threshold

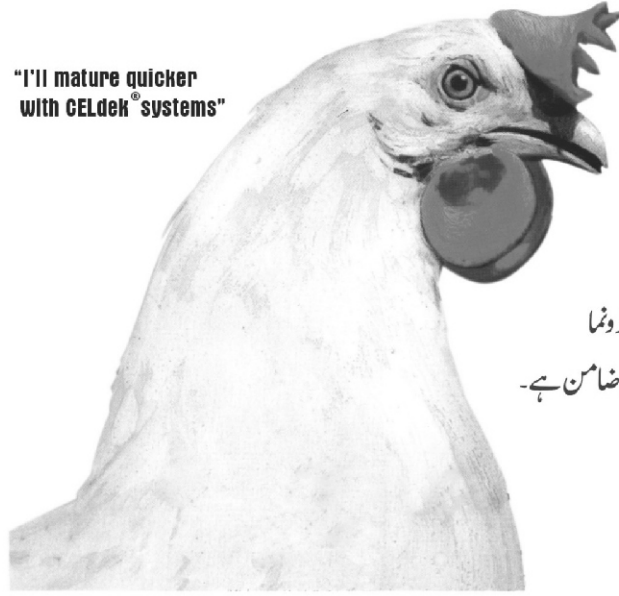
ii) Index-based weather insurance

- Coverage is provided on a specific weather parameter (i.e. rainfall) that is closely correlated with yield.
- Indemnity is payable whenever rainfall or temperature exceed or fall short of certain levels, which are likely to cause crop yield losses.
- Index-based weather insurance is most appropriate for crops whose yield is highly correlated with weather risks.

4- Crop Loan Insurance

- Coverage is provided up to the loan amount of borrowers against natural disasters
- Indemnity is payable to the bank up to outstanding principal amount of the borrowers if insured event happen.

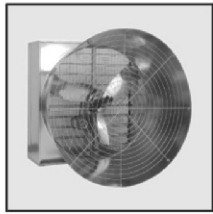
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with CELdek® systems"



میری بہتر نشوونما
آپ کے زیادہ منافع کی ضامن ہے۔

When rearing poultry, maintaining a controlled climate is more important to optimal growth than even feed or stocking density. Conventional ventilation systems in poultry houses simply do not compensate adequately for temperature and humidity fluctuations caused by body heat and the sun's radiation. CELdek® system, on the other hand, maintain an optimal temperature and humidity, safely, efficiently throughout the production cycle.

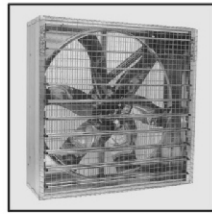
A healthy, unstressed bird is a productive bird. CELdek® systems address the bird's total rearing environment to help eliminate stress and improve weight gain and feed conversion. And the more you do for the well-being of your poultry, the more they'll do for you.



Cone fan



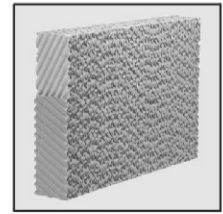
Euroemme fans (EM 36)



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Regional Experience

India

Crop insurance scheme is started in 1980s

29.4 millions farmers were insured in 2011-12

Premium subsidies is reason for success of crop insurance

Argentina

- Agri loan insurance scheme started in 1980s with support of Govt.

- Multi peril risk coverage was introduced in the beginning

Brazil

- Subsidized crop insurance program was started by the government in 1954.

- In the start, the loss ratio was high because of underwritten of bigger risks quickly.

- Some actions were taken to stabilize the crop insurance i.e. compulsory participation by farmer, increase in rates etc.

Malaysia

- Crop insurance scheme start in Malaysia in 1985

- Target both farmers i.e. small-scale and large-scale producers

- Large-scale producers were encouraged in the scheme.

Crop Insurance Development Program

- Farmer's crops are always exposed to different types of natural risks, in case of natural calamities; the farmers not only have to bear the loss of their produce/crop but also have to face defaults for the bank credit.

- Earlier some financial institutions were reluctant to increase their Agri credit portfolio because of natural disaster i.e. flood, drought, diseases etc.

- Crop Loan Insurance is arranged in order to reduce the risk of losses happened to agricultural borrowers due to natural disasters and risks of defaults to banks.

- Crop loan Insurance Scheme (CLIS) is designed to support the Govt. to meet the policy objectives.

Objective of CLIS:

The Govt. of Pakistan has taken initiative steps to protect the Agri financier as well as borrowers against the

risk of catastrophe events and introduced Crop Loan Insurance in 2008. The objectives of Crop Loan Insurance Scheme (CLIS) are:-

- To provide insurance coverage and financial support to the farmers in the event of natural calamities, i.e. flood, pests attack, diseases etc.

- To encourage the farmers to adopt progressive farming practices high value in-puts and higher technology in Agriculture.

- To help stabilize farm incomes, particularly in disaster years.

- To help the financial institution in maintaining flow of agricultural credit

Types of Agri Insurance

Crop Insurance

Livestock Insurance

Agri Assets Insurance

Insured Risks: Excessive Rain, Hail, Frost, Flood, Drought and crop related diseases like viral and bacterial attacks or damage by locusts.

Crops Covered: All crops shall be included for the purpose of coverage including, Wheat, Rice, Sugarcane, Maize, Cotton, Sun Flower

Period of Insurance: From Time of sowing or transplanting till harvesting

Sum Insured: Sum insured will be based on the per acre borrowing limits prescribed by state bank subject to a maximum of Rs. 2,000,000/- per former per season.

Tentative Premium:

- 2% per crop per season plus standard levies.

- Agri Assets 1% of Tractor and 1.5% for tube wells, Threshers and trolleys value for one year

- LiveStock : 3% of animals value for one year

Payment of Claims: Claims shall be payable to the banks to the banks by the insurer for the credit to the insured borrower loan account. In any case the maximum amount payable would be the outstanding loan amount or the assessed amount whichever is the lesser.

Exclusion:

- Any act of Terrorism.

- Losses directly or indirectly caused by or arising from or in consequence of

or contributed to by war, invasion, act of foreign enemy, hostilities or warlike operation (whether war be declared or not), civil war, revolution, riot strikes or labour disputes civil commotion, usurped power, martial law or state of siege or any events, or causes which determine the proclamation or maintenance of martial law or stage of law.

- Loss due to avoidable causes such as neglect and/or malfeasance of the insured/members of his family his employees, poor farming or failure to reseed or replant if it is possible to do so under the circumstances.

- Loss due to mis-utilisation/non-utilisation of insured loan for the purpose it was given.

- Earthquake, volcanic eruption or other convulsion of nature, subsidence, landslide or erosion.

- Loss due to theft, malicious act or due to reasons and risks not specifically covered by the policy

- Any loss or damage arising out of measure taken by the government for public interest.

- Loss before risk declaration or after harvesting

Special Conditions:

- Declaration of Calamity

- Insurers reserve rights for review of terms annually

- The Maximum limit of liability of the scheme in any one year to be 300% of the premiums for that year

Calamities

Punjab: Between 2002 and 2006 there have been 70 calamity declarations

Sindh: Between 2002 and 2006 there have been 10 calamity declarations

KPK: Between 2002 and 2006 there have been 22calamity declarations

Borrower Life Insurance

Need to arrange life insurance for the borrower in crop insurance premium during policy period.

Reinsurance Arrangement

- Need to arrange proper reinsurance arrangement.

- Currently East west insurance have crop reinsurance arrangement with Hannover Re and NICL with Swiss re



Rana Naveed ur Rehman
MBA (HRM), Cert CII (UK)
Chief Manager (Health)
East West Insurance Co. Ltd

Medical Service Providers

(A Big Challenge for Health Insurance Industry in Pakistan)

I have attended a Seminar on Health Insurance in Pakistan – Opportunities & Challenges organized by Lahore Insurance Institute a couple of months ago. That was good effort to address the issues faced by insurance companies, but in my opinion, the actual purpose of this seminar is just the introduction and publicity of various insurance companies and their premium contribution to the health insurance industry. Some of the petty issues were discussed in the session and skipped the main issues which are highly damaging for the profitability of health insurance industry. This could have been fruitful if the solution of some major challenges was found and implemented by mutual consensus. The people from senior management of some major insurance companies were also present in the seminar but the lack of unity on policy making was seen amongst them which are also negative for the growth of health insurance sector.

In Pakistan, a lot of insurance companies are providing health insurance coverage to the corporate

sector through various hospitals and other medical service providers like clinics, dentists, laboratories and pharmacies etc. I felt that there is a need to highlight some serious issues which the health insurance industry has been facing from a long time from medical service providers. Now, these issues become a big challenge for the profitability of our health insurance sector. Some of them are elaborated



below:

Increase in Medical Services Rates:

A number of big as well as small hospitals are continuously increasing their medical services rates which include room charges, consultant fee, surgeon fee and other charges etc. They are increasing the rates without taking into account the rate of

inflation. Although, the rate of inflation is around 7.74% but the increase in overall rates of medical services is more than 30% on an average which is damaging for the health insurance industry in Pakistan. On the other hand, hospitals are making the maximum profits.

Increase in Medicines Rates:

Another factor is the prices of medicines which are increasing rapidly. Due to this increase, the cost of medical treatment is rising which is a serious concern for the insured patients as well as the insurance companies. Some medicines which are not manufactured in Pakistan are very costly due to duties and taxes imposed by the government on

their import.

Insufficient Medical Facilities:

In rural areas, across Pakistan, there are a number of small clinics and medical stores which are unlicensed and operated by unqualified persons. They are actually called as “Quaks” which are practicing just on the basis of their years of experience. They are

treating the patients and prescribing the medicines. Although, they are not authorized to do so, but they are mistreating the patients and making bills which is a loss factor for the health insurance companies.

Improper Billing:

In rural as well as some urban areas, some doctors do not issue a receipt of consultation charges. The patients have to write the doctor's fee their self on the prescription which is not a fair deal. In this scenario, the patients write the amount as per their own will and submit the same for reimbursement from the insurance company. Same is the case with medical stores in which most of them do not provide the proper medicines bills.

Over Billing:

One of the major factor which is damaging the health insurance industry is the over billing by the medical service providers i.e. hospitals, clinics, dentists, laboratories and medical stores. They are in practice of making bills more than the actual costs on the request of insured patients. If these types of bills are overlooked by the claims department of the insurance company, then this may be the potential loss / claim leakage which will ultimately disturb the profitability of the health insurer.

hospitals, clinics, dentists, laboratories and medical stores to make fake bills on patient's request. This means if a patient is insured, his temptation to avail medical benefit triggers which ultimately leads him to make fake bills. Some of the medical service providers frequently helping these insured patients in making fake bills also verify the same when a person comes from insurance company for authentication. This type of verification and authentication is very difficult and hectic task for the health insurance company and if this is not done properly, it will ultimately be the potential loss factor for the insurance company as well as the health insurance industry.

Undue Hospital Admissions:

We all know the hospital industry is becoming the fastest profit earning industry in Pakistan and a lot of hospitals are in practice of making undue hospital admissions and convert OPD treatments into IPD cases, only due to this the patient is insured and the insurance company is bearing the cost of the admission. In this scenario, the patient doesn't bother whether admission is necessary or not because the patient does not have to pay anything from his pocket. Thus, insurance company has to bear the cost of undue and unjustified hospital admissions which is also a serious loss factor for the health insurance sector.

Cesarean Section just for the sake of their ease and making more money. This malpractice is the most damaging for patients in terms of their health as well as for the health insurance companies in terms of cost.

As per my recommendations, the health insurance companies should take strong measures to identify the above issues and deal with strict compliance. Also, all health insurance companies in Pakistan should form a combined database in which the detailed information should be given of any of the above activity by any medical service provider so that all the insurance companies must be aware of any future activity of that provider and also blacklisted. They should also form a committee of key personnel of health insurance companies whose work is to schedule meetings on monthly basis to cater these issues and make policy decisions on the basis of the same. Secondly, Ministry of Health should play their active role in identifying the malpractice and misuse of bills, documents of medical service providers and take strict action against them according to the Law of Pakistan. Pakistan Medical and Dental Council (PMDC) have to monitor closely the activities of doctors, gynecologists and dentists etc. and take strict action against them timely. Lastly, being an insured and insurer we must obey the Principle of Insurance; Utmost Good Faith so that these types of issues can be mitigated.

Fake Billing:

Now a days, this is the normal practice of the medical service providers i.e.

Malpractice:

Now a days, some Gynecologists are converting a Normal Delivery into





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Assistant Manager (Health Insurance)
Alfalalah Insurance Company Limited

Managerial Role in Employee Motivation

Employee motivation is an intricate and sophisticated subject; however, contemporary managers must face and deal with this topic to obtain organizational success. Employee's motivation and performance are two imperative factors concluding the success of any organization.

Employee motivation is the level of energy, commitment, and creativity that a company's workers bring to their jobs. Whether the economy is growing or shrinking, finding ways to motivate employees is always a management concern.

The literature review shows that factors such as empowerment and recognition increase employee motivation. If the empowerment and recognition of employees is increased, their motivation to work will also improve, as well as their accomplishments and the organizational performance. Nevertheless, employee dissatisfactions caused by monotonous jobs and pressure from clients, might weaken the organizational performance.

Bartol and Martin (1998) suggested motivation as internal drive to achieve certain goals and to satisfy the needs.

Employers, in order to enhance the productivity, must understand what motivates their employees. There is no set pattern to enhance the motivation of employees in one organization due to individual needs and differences. Employees are motivated by different reasons and their value change over time. For example, what is of interest to one employee might not attract much to

3. The need for power

Not everyone has the same level of need for each particular area.

Numerous researches have also pointed out that rewards lead to job satisfaction, which in turn influence directive and positively the performance of the employees.

Moreover, rewards are one of the most efficient tools of management when trying to influence individual or group behavior, as to improve organization's effectiveness. The vast majority of companies use pay, promotion, bonuses and other types of rewards to motivate employees and to increase their performance.

Your role as a leader:

Employees can also be motivated through proper leadership, as leadership is all about getting thing done

the right way. In order to achieve these goals, the leader should gain the employees' trust and make them follow him. Nevertheless, in order to make them trust him and complete their tasks properly for the organization, the employees should be motivated (Baldoni, 2005). The leaders and the employees help one another to attain high levels of morality and motivation.



the other employee: one employee might value good wage while other may prefer interesting work.

A model developed by David McClelland considers just those needs that are met by the workplace. These include:

1. The need for affiliation
2. The need for achievement

Where money truly rates as a support for employee motivation varies with who's telling the story. A 1993 study conducted by Industry Week magazine found that it fell in the second slot. This survey of approximately 2,500 workers asked for the primary long-term motivator. The answers:

Having a leader with vision and values	32.6%
Getting pay raises and bonuses	27.5%
Gaining greater responsibility	20.7%
Gaining respect of peers and subordinates	16.6%
Achieving recognition from supervisor(s)	12.5%
Other	8.7%

The number one support for employee motivation seems to be the influence of the leader. Clearly, workers respect a leader with vision; as a manager, your leadership plays a vital role in encouraging your employees.

Base Leadership in Values

As quoted earlier **Industry Week** survey highlighted that the employees were inspired by leaders with vision and values. To fully inspire, your vision for your team—and your treatment of your team members—need to be grounded in a set of values that your employees respect.

The term values means different things to different people. You and your employees probably do not share all the same values, nor should you expect to. However, there are some basic values shared by many people that can be particularly inspiring in the workplace. These include:

- **Respect for others**—All of your efforts to inspire motivation will be useless if you don't treat your employees with respect and set an example by treating those outside your team with consideration as well.
- **Honesty and integrity**—As our society becomes more and more disillusioned, honesty and integrity in leadership are increasingly valued. Your employees want to know that

they can trust you and that you do what you say you are going to do whether you're dealing with employees or customers.

- **Fairness**—We've all heard horror stories of the slacker who's promoted over the hardworking employee because he's the boss's friend. Though the example is exaggerated, nothing

can kill motivation faster than the perception of unfairness.

- **Avoid favoritism** when dealing with

employees, and be sure that your employees understand the basis for your decisions.

These are just a few of the values that can inspire motivation in your employees. Though they may seem basic, they can make the difference between employees who approach their jobs, coworkers, and customers with cynicism and those who are inspired to put forth their very best efforts. Employees who are treated with respect, honesty, and fairness will return that loyalty to their organization and reflect it when dealing with others.

How to deal with an unmotivated employee:

Higher the motivation better would be the results of the employee. Similarly, if an employee couldn't give the better results in work, the contemporary supervisor must look where he lacks motivation.

Poor job performance may be caused by a number of factors:

- The employee don't understand the expectations for performance.
- The employee doesn't have the skills to meet the expectations.
- The employee doesn't have the time or resources to do the job properly
- The employee is capable of

meeting expectations but isn't motivated to do so.

- The expectations for performance are so high that nobody could meet them.

The best way to learn the exact cause of demotivation in an employee is to have one-on-one talk with the employee. Often employees realize that a problem exists but don't know what to do about it and they are relieved to have a chance to explain their side of things. The opportunity to work with you to solve the problem will in itself help strengthen the employee's motivation.

As you speak with the employee, you may find that she or he might be motivated to achieve in other circumstances but is not currently in the right job. Perhaps the person is more comfortable working independently but must now work with a team, or perhaps you're asking team oriented person to work alone. Perhaps the employee is over qualified and is simply not challenged by the position, or perhaps the job is beyond the employee's skills and abilities.

The best way to determine the cause of poor performance is to discuss the problem with the employee. If you conclude that motivation really is a problem, ask yourself if you are doing everything you can as a manager to inspire and support motivation for this individual. You might try changing the rewards offered or providing more positive reinforcement. Employee motivation can also be affected by personal factors outside the workplace where managers have no control, including:

- Money Problem
- Illness or loss of a family member
- Family or marital conflict
- Drug, alcohol or gambling addiction(s)
- Physical illness
- Chronic depression

What a manager can do?

For above mentioned personal reasons of demotivation in employee's attitude, a manager don't have much of choices. However, if it is due to the factors in control of the manager (i.e. related to work), as a first step toward helping an employee with low motivation, manager must ask himself if he is doing everything he can do as a manager to inspire motivation.

In such situations, a manager must dig-out if he had conveyed his vision in a way that the employee understands, or he might not have offered a reward that the employee values.

Question yourself first:

Review the following checklist and find yourself if you are doing all you can to inspire motivation in your motivated employees?

Do I...

- Articulate a clear vision for my department or team?
- Help my employees determine strategic imperatives to meet our goals?
- Measure and evaluate my employees' work in a meaningful way?
- Recognize employee achievement through a fair reward system?
- Tell employees what they need to do in order to earn rewards?
- Offer rewards that my employees value?
- Use positive reinforcement instead of negative reinforcement or punishment?
- Do what I can to create an employee-friendly organizational culture?

More Ideas for Inspiring Motivation

Try these additional steps to enhance your workers' abilities to be productive staff members:

- If possible, eliminate some of the signs of status difference in the

office. Can you make door nameplates the same size? eliminate reserved parking spaces? do away with a separate executive break room? For some organizations, these and other steps would work and be of help to staff members.

- **Can you also eliminate the signs of distrust around your company, such as time cards, time clocks, sign-in sheets, etc.?**

- **Don't avoid employees' "tough" questions.** If you don't answer questions about possible downsizing, layoffs, and other controversial issues, the gossip mill will. Tough questions don't go away; they only get tougher and meatier until they're dealt with.

- **In establishing rapport with employees, don't get too close or be too distant.** It's not an easy place to get to, since it's a fine line. But going too far in either direction spells trouble.

- **Develop an attitude that you work as much for your employees as they work for you.** Ask your team members how you can help them do their jobs better. Let them know that you are there to help.

- **Celebrate important anniversaries with your employees.** Recognize a new employee's first day by introducing the new worker to the staff, having refreshments, taking the new person to lunch—whatever you can do to make the day special. Also recognize employees on their birthdays and on their work anniversary dates.

- **Make tasks less boring any time you can.** Split up the boring or grunt work. Don't give it all to the one department member who is fresh out of college. What a way to tell someone, "Here's the start of your career."

- **Encourage cross-training** whenever you can. In today's ever-

changing workplace, cross-training almost always comes in handy.

Take action now. Don't start practicing these ideas next week, "when there'll be less to do." You'll keep putting the whole thing, or at least part of it, off until there is a "better" time. Even if you're having difficulty right now with staff members who are gobbling up your time, begin taking measures to inspire motivation.

Concluding Remarks:

People seek security and the underlying needs are fundamental to people's existence. After these needs are satisfied, people will focus more on job performance.

People also see social systems, so the sociability aspect of effective organizations cannot be neglected.

Last but not least, personal growth is also important to people, as self-actualization and the need for achievement and growth are vet powerful needs that influence the development of effective organizations.

A motivated and qualified workforce is essential for any company that wants to increase productivity and customer satisfaction. In this context, motivation means the willingness of an individual to do efforts and take action towards organizational goals. The challenge for any manager is to find the means to create and sustain employee motivation. On one hand, managers should focus on reducing job dissatisfaction (working conditions, salary, supervision, relationship with colleagues), while on the other hand should use motivating factors such as achievement, recognition, responsibility and the work itself.

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2. Bartol, K.M., Martin, D.C. (1998) Management, McGraw-Hill
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Insurance Sector in Pakistan – Eliciting Public Comments on the Draft Insurance Bill, 2016

ISLAMABAD: The Securities and Exchange Commission of Pakistan (SECP) approved the draft of the proposed Insurance Bill, 2016 for eliciting public comments for the purpose of stakeholder consultation.

Earlier, the Finance Minister, Mr. Ishar Dar, was briefed by SECP about the changes required in the insurance regulatory framework. The Finance Minister had advised to start nation-wide consultation with stakeholders on the proposed insurance regulatory framework. Accordingly, in October 2016 the SECP held consultative roundtables in the cities of Karachi, Islamabad and Lahore with the insurance sector stakeholders. The proposed reforms were shared with the stakeholders in the form of a comprehensive concept paper. The roundtables were attended by insurance companies, insurance brokers, associations of insurance surveyors, Pakistan Societies of Actuaries and the institute of Chartered Accountants of Pakistan. The roundtables were very well received as almost 80 officials of the aforementioned companies/institutions were present and shared their views in respect of the proposed framework both during the roundtables and subsequently in the form of written comments.

The draft Bill aims to provide the conducive regulatory environment to encourage market development, strengthen the regulatory framework to ensure alignment with the Insurance Core Principles (ICP) of the International Association of Insurance Supervisors (IAIS), address entity specific and systemic risks by phased shift towards Risk Based Supervision (RBS) and Risk Based Capital (RBC) Regime and to address the regulatory gaps in existing law.

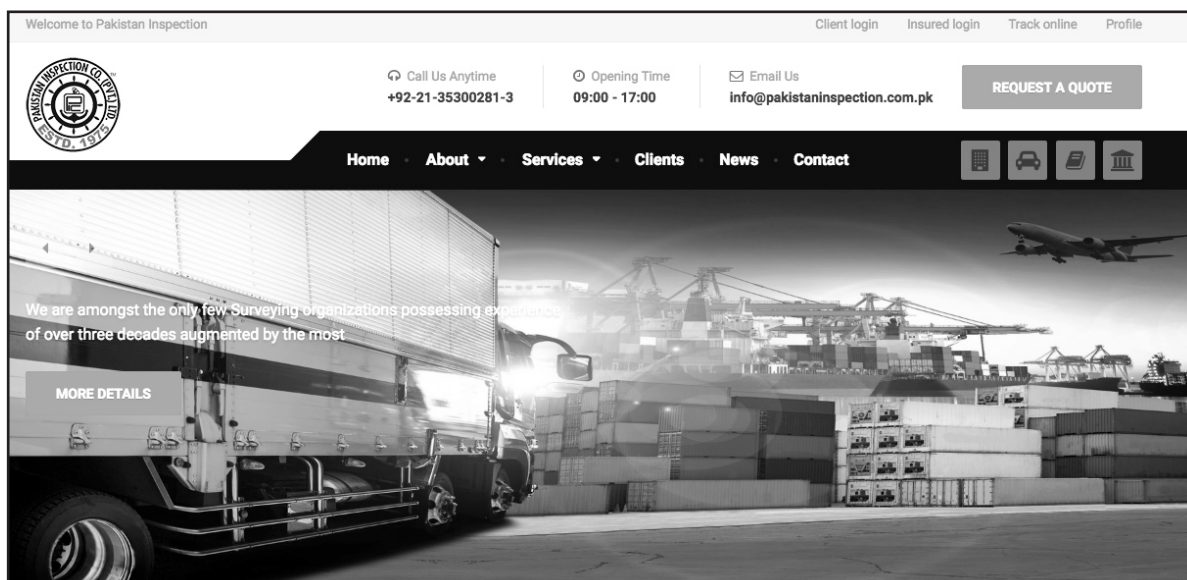
The significant reforms suggested include the introduction of dedicated microinsurers, provisions for regulation of takaful and retakaful, regulation of local and foreign reinsurance business for enhancement of local capacity, regulation of reinsurance brokers, flexibility for introduction of new intermediaries, introduction of concept of web aggregators, insurance repository, require insurers to develop and offer certain insurance products, provision for introduction of industry wide guarantee fund to address systemic risk, requirement of “appointed actuary” and product filling for non-life insurance. This shift to the risk based supervision (RBS) and risk based capital (RBC) will improve image of the insurance industry of Pakistan internationally.

Zarai Taraqati Bank Limited

ADFIMI-WB-ZTBL arranged a two days Regional Seminar on “Financial Inclusion Strategies in South Asia: Methodology & Perspectives”. The seminar was opened on 28th March 2017 at Marriott Hotel Islamabad. First day of event was attended by dignitaries, participants from South Asia and guests from Institutions. The forum was addressed by ADFIMI Secretary General Mr. Nuri Birtek, President ZTBL, Syed Talat Mahmood, Head World Bank Global Islamic Finance Development Centre-Prof. Dr. Zamir Iqbal and Former ADFIMI Secretary General-Mr. Rashid. The event was also attended by honorable Board Members of ZTBL, Mr. Mazhar Hussain, Senior Researcher SESRIC and Prof. Dr. Zamir Iqbal gave overview on “Sustainable Development Goals and Financial Inclusion”. Mr Sarmad Shaikh from World Bank elaborated significance of Financial Inclusion. Mementoes were presented to speakers and guests of the seminar by Mr. Nuri Birtek & Syed Talat Mahmood.

Launch of Online Claims Portal for Insurance and Takaful Companies, in the year 2017

One of the reasons frequently cited by Officials from Insurance / Takaful Industry in improving the overall Claim Experience has been the inability of Surveying / Loss Adjusting Organisations to keep pace with modern times. As such, the processing of an Insurance/Takaful Claims often become a nightmare, due to the Insurers reliance on Surveying / Loss Adjusting Firms that are an integral part of the process but beyond their control.



Keeping in view the difficulties Faced by the concerned Executives of the Underwriters, **Pakistan Inspection Company** is pleased to announce the introduction of the first of its kind Online Claims Portal that has never been experienced in the Surveying and Loss Adjusting Industry of Pakistan, till date

PIC's Claims Portal "C-NAV (Claims Navigator)" is the most powerful Online-tool ever built in the Industry with services and resources unmatched in functionality. Each User is provided with a Unique ID and Password to avail the following benefits:

- Convenient 24/7 access anytime anywhere from your phone, tablet and laptop
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- Reviewing your Claim details resulting in quick feedback to your Clients
- Visual representation of damages through Photographs
- Paperless environment resulting in reduction in printing costs (Go Green)

- Safe keeping of Case Files in our system, powered and protected by Google
- QR Codes on Reports to access Photographs and Documents in Printed form
- Login access to Corporate Clients to self manage multiple Claims (Ideal for Banks, Leasing Firms, Multinationals etc.)

QR/048/01/06.13 NTN No. 1228507-2 CNIC No. 42301-9438529-3, 42301-7575520-5 Invoice / Bill #: A-111586/2016 Survey Report #: PICL/A-10044/2016 Client: Adamjee Insurance Company Limited (2009-08888) Description: Honda Civic (2007) AMY-216 Insured / Participant: DENTIS Policy #: 538111 Motor Claim / Loss #: 67474 Description <table border="1"> <tr> <th></th> <th>Rs.</th> </tr> <tr> <td>Professional Fee :</td> <td>1,250.00</td> </tr> <tr> <td>SST on Professional Fee: 13%</td> <td>162.50</td> </tr> <tr> <td>Re-inspection:</td> <td>0.00</td> </tr> <tr> <td>Photographs:</td> <td>270.00</td> </tr> <tr> <td>Extra Visit:</td> <td>0.00</td> </tr> </table>		Rs.	Professional Fee :	1,250.00	SST on Professional Fee: 13%	162.50	Re-inspection:	0.00	Photographs:	270.00	Extra Visit:	0.00	LICENCE #: 124.S.MOTOR.F (Motor: Third Party Compulsory Business) VALID UNTIL 14th MAY 2017 Date: Saturday, December 31, 2016 <table border="1"> <thead> <tr> <th colspan="4">STATUS</th> </tr> </thead> <tbody> <tr> <td>Un-Attended</td> <td>0</td> <td>Cancel Reports</td> <td>12</td> </tr> <tr> <td>PLR Pending</td> <td>7</td> <td>Paid Reports</td> <td>0</td> </tr> <tr> <td>FSR Pending</td> <td>8</td> <td>Assignments</td> <td>202</td> </tr> <tr> <td>Unpaid Reports</td> <td>38</td> <td>Completed Documents Uploaded</td> <td>0</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th>INSURED</th> <th>DESCRIPTION</th> <th>PTC BRANCH</th> <th>Stage</th> <th>Int.Date</th> <th>View Detail</th> </tr> </thead> <tbody> <tr> <td>AT ALI KHAN F MEDICINE &</td> <td>AMY-216</td> <td>Karachi</td> <td>Unpaid Reports</td> <td>1/9/2016</td> <td>Page 1 Page 2 View P.L.R View Bill</td> </tr> <tr> <td>e Palmolive Ltd., Lakson ding No. 2, Sarwar ad, Karachi.</td> <td></td> <td>Karachi</td> <td>Unpaid Reports</td> <td>1/30/2016</td> <td>View P.L.R View Report View Document View Bill</td> </tr> <tr> <td>nk Pakistan Ltd.,</td> <td>BF-0917</td> <td>Karachi</td> <td>Unpaid Reports</td> <td>2/8/2016</td> <td>Page 1 Page 2 View P.L.R View Bill</td> </tr> </tbody> </table>	STATUS				Un-Attended	0	Cancel Reports	12	PLR Pending	7	Paid Reports	0	FSR Pending	8	Assignments	202	Unpaid Reports	38	Completed Documents Uploaded	0	INSURED	DESCRIPTION	PTC BRANCH	Stage	Int.Date	View Detail	AT ALI KHAN F MEDICINE &	AMY-216	Karachi	Unpaid Reports	1/9/2016	Page 1 Page 2 View P.L.R View Bill	e Palmolive Ltd., Lakson ding No. 2, Sarwar ad, Karachi.		Karachi	Unpaid Reports	1/30/2016	View P.L.R View Report View Document View Bill	nk Pakistan Ltd.,	BF-0917	Karachi	Unpaid Reports	2/8/2016	Page 1 Page 2 View P.L.R View Bill
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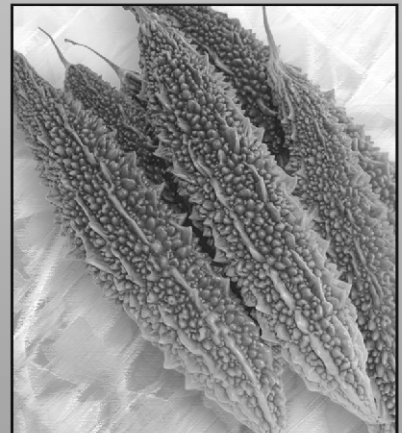
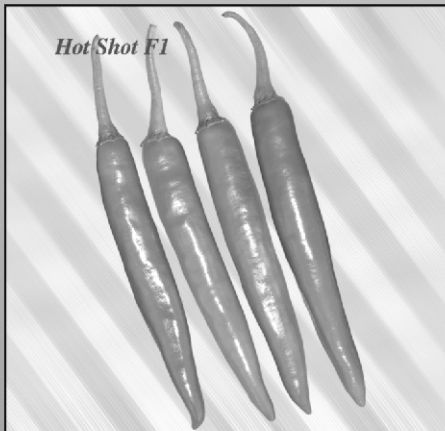
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[Lahore]

*Before Shams Mehmood Mirza, J****POSTAL LIFE INSURANCE through General Manager---Petitioner******Versus******MUHAMMAD ISHAQ BUTT and another---Respondents***

W.P. No. 11248 of 2014, heard on 9th December, 2014.

Insurance Ordinance (XXXIX of 2000)—

---Ss. 171(1), 171(2), 2(xxxi), & 118--
-Pakistan Postal Services Management Board Ordinance (CXXVI of 2002) Ss. 3 & 11---Civil Procedure Code (V of 1908), O. VII R.11---Constitution of Pakistan, Art. 199---Constitutional petition---Jurisdiction of the Insurance Tribunal--
--“Insurer”, meaning of---Exemptions under S. 171 of the Insurance Ordinance, 2000---Scope--
-Question before the High Court was whether the petitioner Postal Life Insurance, was amenable to the jurisdiction of the Insurance Tribunal under the Insurance Ordinance, 2000--
--Contention of the petitioner Postal Life Insurance was, inter alia, that since it was run by the Federal Government, it fell under the exemption created by S. 171 of the Insurance Ordinance, 2000---Held, that under S. 2(xxxi) of the Insurance Ordinance, 2000 any company incorporated under the Companies Ordinance, 1984 or a body corporate incorporated under any law carrying on the business of insurance came within the purview and jurisdiction of the Insurance Tribunal--- although S. 171 (1) of the Insurance Ordinance, 2000 made it clear that provisions of the Insurance Ordinance, 2000 were not to apply to any insurance business carried on by the Federal Government or Provincial Government, however, S. 171(2) of the insurance Ordinance, 2000 created an exception to the effect that insurance business carried out by a body corporate, even if controlled by

the Federal Government; shall not be deemed to be insurance business carried out by the Federal Government---Per Ss. 3 & 11 of the Pakistan Postal Services Management Board Ordinance, 2002; the Board of the Postal Life Insurance was body corporate and squarely fell within the exception created by S. 171 (2) of the Insurance Ordinance, 2000---Fact that petitioner was not registered with the Securities and Exchange Commission of Pakistan did not in any manner effect or had a bearing on jurisdiction of the Insurance Tribunal---High Court observed that a combined reading of Ss. 2(xxxi) & 171 of the Insurance Ordinance, 2000 together with Ss. 3 & 11 of the Pakistan Postal Services Management Board Ordinance, 2002; made it clear that the petitioner was amenable to jurisdiction of the Insurance Tribunal--
--Impugned order was therefore, rightly passed---Constitutional petition was dismissed, in circumstances.

Muhammad Amir Sohail for Petitioner.

Liaqat Ali Butt for Respondents.

Date of hearing: 9th December. 2014.

JUDGMENT

SHAMS MEHMOOD MIRZA, J---

Through this writ petition, the petitioner, Postal Life Insurance, has challenged the assumption of jurisdiction by Insurance Tribunal, Lahore on the petition filed by respondent No.1 and order dated 8-4-2014 whereby the application filed by

the petitioner under VII, Rule 11, C.P.C was dismissed.

2. The facts of the case are simple and need not be elaborately stated. The legal question to be determined by this Court is whether the petitioner is amenable to the jurisdiction of the Insurance Tribunal. The brother of respondent No.1 brought an insurance policy bearing No.CL-(A) 03460-LHB dated 15-8-2005 from the petitioner. On his death, respondent No.1 lodged the insurance claim with the petitioner which was repudiated on 1-7-2010. This compelled respondent No.1 to file a petition before the Insurance Tribunal, Punjab, Lahore seeking redressal of his grievance. The petitioner on being summoned filed an application under Order VII, Rule 11, C.P.C. before the Insurance Tribunal, Punjab, Lahore for dismissed on 8-4-2014.

3. The core issue raised by the petitioner's counsel is that the petitioner being run by the Federal Government does not come within the jurisdiction of Insurance Tribunal in terms of section 171(1) of the Insurance Ordinance, 2000 (the Ordinance). It was further stated that by virtue of the Rules of Business, the petitioner is placed under the Ministry of Commerce and as such the Insurance Tribunal had no jurisdiction over it. It was also submitted that the petitioner is run under Post Office Insurance Fund Rules, 2000 and it is not registered with the Securities and Exchange Commission of Pakistan. The learned counsel, for the petitioner

also referred to the definition of “insurer” as mentioned in section 2(xxxi) of the Insurance Ordinance, 2000 to argue that the petitioner is neither a company nor a body corporate and as such does not fall within the jurisdiction of Insurance Tribunal.

4. Section 2 (xxxi) of the Insurance Tribunal Ordinance, 2000 defines “insurer” and reads as under:-

“insurer” means

(i) Any company or other body corporate carrying on the business of insurance, which is a company or other body corporate incorporated under any law for the time being in force in Pakistan; and

(ii) Any body corporate incorporated under the law of any jurisdiction outside Pakistan carrying on insurance business which carries on that business in Pakistan.

Section 171 of the Ordinance reads as under:-

Exemptions --- (1) Nothing in this Ordinance shall apply to any insurance business carried on by the Federal or by a Provincial Government.

(2) For the purposes of this section, insurance business carried on by a body corporate shall not be deemed to be insurance business carried on by the Federal or by a Provincial Government by virtue only of the fact that the Federal or Provincial Government holds a controlling interest in the body corporate.

The aforementioned provisions together with section 2(xiv) of the Ordinance show that any company incorporated under the Companies Ordinance, 1984 or a body corporate incorporated under any law carrying on the business of insurance comes within the purview and jurisdiction of the Insurance Tribunal.

5. Although section 17(1) of the Ordinance makes it clear that the provisions of the Ordinance shall not apply to any insurance business carried on by the Federal or by a Provincial Government, subsection (2) thereof creates an exception to the effect that the insurance business carried out by a body corporate even if controlled by Federal Government shall not be deemed to be insurance business carried out by Federal Government.

6. In regard to the question whether the petitioner is being run by the Federal Government and therefore, the jurisdiction of the Insurance Tribunal is ousted, the provisions of the Pakistan Postal Service Management Board Ordinance, 2002 (Ordinance No. CXXVI of 2002) are quite instructive and clearly bring out the fact that the petitioner falls squarely within the exception contained in subsection (2) of section 171 of the Ordinance. By virtue of section 3 of Ordinance No. CXXVI of 2002, Pakistan Postal Services Management Board (the Board) was created. In terms of section 3(2) thereof, the Board is a body corporate having perpetual succession, a

common seal and has the power to acquire, hold and dispose of property and can sue and be sued in its own name. Section 11 of the said ordinance enumerates the powers and functions of the said Board, which include the power to manage, maintain and operate the petitioner, Postal Life Insurance, throughout Pakistan.

7. It is thus clear that the insurance business of the petitioner is being run, managed and carried on by the Board, which is a body corporate having been established under Ordinance No. CXXVI of 2002. The petitioner thus falls in the exception created by section 171 (2) of the Ordinance. The fact that the petitioner is not registered with Securities and Exchange Commission of Pakistan does not in any manner effect or has a bearing on the jurisdiction of the Insurance Tribunal. By a combined reading of section 2(xxxi) and 171(2) of the Ordinance read with section 3 and 11 of the Ordinance No. CXXVI of 2002, the petitioner is amenable to the jurisdiction of the Insurance Tribunal.

8. the Insurance Tribunal thus rightly passed order dated 8-4-2014 dismissing the petitioner's application filed under Order VII, Rule 11, C.P.C this writ petition being devoid of any merit is accordingly dismissed.

KMZ/P-4/L

Petition dismissed.



Pakistan to chair MEFIN

The Securities and Exchange Commission Pakistan SECP will chair for 2017 the Mutual exchange Forum on inclusive insurance Network MEFIN. MEFIN is an Asian network of insurance policy makers and regulators from Indonesia, Pakistan, Philippines, Vietnam, Nepal and Mongolia. The network serves as a platform for peer to peer learning among policy makers and insurance regulators in the region in advancing inclusive insurance solutions. The second MEFIN public Private Dialogue (PPD) was held in Hanoi Vietnam together with Munich Re Foundation and Micro insurance Network.

The Mutual Exchange Forum on inclusive insurance Network or MEFN Network is a collegial body of insurance policy makers and regulators in Asia. It was formed in 16 May 2013 in Cebu Philippines where Financial Inclusion Policy makers and insurance regulatory from six Asian countries Indonesia, Nepal, Mongolia, Philippines, Thailand and Vietnam signed the Cebu Declaration jointly with the officers from GIZ (Deutsche Gesellschaft fur internationale Zusammenarbeit) and Asian Development Bank. The Cebu Declaration is a non-binding document which declares commitment of the signatories to the promotion and development of inclusive insurance (microinsurance) markets. In 2016 MEFIN was transformed into a formal network with Pakistan as a new member as the network now serves as platform of peer –to–peer learning among makers and insurance regulators in the region as it develops and implements programs that provide mutual benefits to its members in advancing insurance solutions . Overall MEFIN aims to create impacts of regulation and supervision along the dimensions of market development, institutional development and client value for the benefit of the poor.

EFU Life becomes member of MEFIN

EFU Life Assurance Ltd., the leading private insurance company in the private sector has been enrolled as a member of the Mutual Exchange Forum on Inclusive Insurance of MEFIN Network. EFU Life is the first insurance industry player among the member countries to be accepted as a member of the network and has been recognized for its focused and forward looking strategy EFU Life induction was approved in the organizational meeting of MEFIN held in Hanoi Vietnam in March 2017. Mr. Muhammad Ali Ahmed Executive Director EFU Life represented the company.

TPL Life Insurance soon to be listed on PSX

TPL Life insurance Limited (formerly AsiaCare Health & Life Insurance Company Limited) has proposed an initial public offering (IPO) of shares and listing of the company on the Pakistan Stock Exchange (PSX). This was informed in a notice sent to the PSX. The IPO and the listing is subject to be in compliance with applicable laws and requisite approvals of the PSX and the Securities and Exchange Commission of Pakistan (SECP).

TPL Life Insurance is a subsidiary of TPL Trakker Limited. TPL Trakker recently signed a Share Purchase Agreement with AsiaCare Health and Life Insurance Company. The agreement allowed TPL to acquire 100% ownership of AsiaCare Health & Life Insurance Company to bring Life Insurance under its name. On July 16, 2016 AsiaCare Health and Life Insurance Company was reintroduced as TPL Life Insurance Limited.

With low insurance penetration in the country, TPL Life aims to develop and provide innovative life and health and insurance products based on global standards.

Brands of the Year Award for 2015-2016 won by Jubilee Life Insurance

Jubilee Life Insurance, the leading private sector life insurance provider in the country, has been awarded Brands of the Year Award for 2015-2016 in the life insurance industry. The much-awaited awards ceremony was held recently at Grand Convention Marquee PAF Museum, Karachi. The Chief Guest at the Ceremony was honorable Chairman Senate Mr. Raza Rabbani.

The prestigious award was received on behalf of Jubilee Life Insurance Company Limited by their Head of Corporate Business Distribution, Mr. Faiz ul Hasan. Talking about this achievement,

Mr. Hasan said, “This is indeed a great moment of pride and a milestone for Jubilee Life to receive this astounding honor. This award is a testament of our success from being the leading insurance service provider of the country to becoming the brand of the year. Jubilee Life, post our rebranding, aimed at creating awareness for the common man for sound understanding of financial solutions. We have done several campaigns with the same objective and have achieved remarkable results over the years. This award reaffirms our faith in the direction we have taken for branding and we will continue to surprise our consumers with meticulously planned new products.”

Brand of the Year Award is recognition for brands recognized as champions in their industry for a leading performance. Its evaluation process is comprised on a nationwide quantitative qualified consumer survey, expert analysis and attributes based on qualitative brand research.

Jubilee Insurance is a global brand of the Aga Khan Fund for Economic Development (AKFED) that offers diverse insurance solutions (life, health and general) in the Asian and East African markets. Jubilee Life in Pakistan offers a uniquely designed range of life and health insurance plans, catering to various customer segments and needs. These include retirement, child education, marriage, saving & protection, wealth accumulation, life insurance plans for women, rural insurance plans and life and health insurance solutions for the less privileged of our country.

Samsung Mobile's New Accidental Insurance Policy for 2017

Samsung has a series of products and this every day successful company is launching its handheld devices with the passage of every day. Samsung gives official warranties for each product and here we are going to talk about Samsung smartphones.

Samsung is providing mobile accidental/damage warranty from the last few years but from January 2017, there have been some changes by the new insurance company IGI (Intentional General Insurance) who is providing insurance for Samsung handsets.

Before this policy, every user of Samsung smartphone having accidental insurance card, can avail his/her claim free of cost (Only in case of touch panel damage) after proper submission of documents. Insurance company verifies the case by contacting with customers that how their phone was damaged and then verifies whether this case is legal or not. But if handset is total damaged (Touch panel and PBA both damaged or PBA damaged), then they have to pay depreciation charges according to warranty start up date to get replacement of new handset and old damaged device goes in custody of insurance. But Now there are few changes in Samsung Mobile Accidental Insurance Policy by new insurance company which is providing accidental coverage for Samsung Mobiles. From January 2017 IGI Insurance have started Depreciation charges on every claim according to below mentioned policies:

- All the approved handset for repair (only touch panel damage) or total loss(handset not able to repair) must pay the depreciation amount according to warranty start date.
- If handset is damaged during 0-3 months of warranty start date then you have to pay 10% charges of total cost of repaired part.
- 30% charges for 4-6 months
- 50% for 7-9 months
- 70% for 10-12 months
- Minimum of 10% depreciation will be charged to customer if claim will lodged before warranty start up date.
- For Total loss cases (Device totally damaged) depreciation charges remain same (10% per month) (60% MAX) and customer will receive new device as a replacement.

So from now everyone whoever going to buy smartphone of Samsung, make sure he/she knows about this new Insurance Policy by Samsung. If you are Samsung user, Now there is more need to take care of your smartphone because if once your smartphone got damaged, you have to pay to company even little. If you are buying a new smartphone of Samsung, do not forget to take care of your insurance card.

Inclusive Insurance Asia Public Private Dialogue and Microinsurance Learning Session - 2 days event held in Sheraton Hotel in Hanoi, Vietnam in partnership with Munich Re Foundation and Microinsurance Network.

Election of Mr. Tariq Bukhtawar of the SECP as a new chairperson and acceptance of First Private member EFU Life. The MEFIN organized meeting this year had two milestones.



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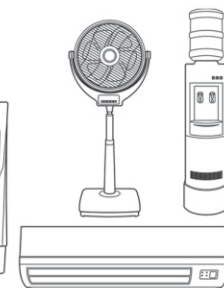
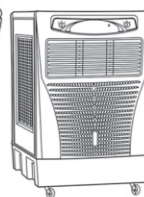
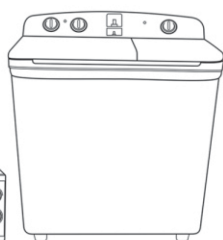
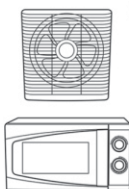
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*To accomplish great things we must not
only act, but also dream: not only plan
but also believe*

(Introductory speech at a session of Academia Françoise, December 24, 1896)



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