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Insights from 2026 RISKWORLD:

Emerging Risks, AI Adoption, and the Future of Claims

Introduction

The Risk Management Society's (RIMS) RISKWORLD® conference is one of the largest gatherings of risk management, insurance, and claims professionals. The annual event brings together employers, carriers, brokers, third-party administrators, and service providers to explore the current trends and opportunities shaping the future of risk and claims management.

During RISKWORLD 2026 in Philadelphia, CorVel surveyed conference attendees to gain valuable insight into how organizations are preparing for an increasingly complex claims environment. **The results reveal an industry navigating a period of rapid transformation.**

New technologies are creating opportunities for greater efficiency and improved outcomes, while also introducing emerging risks and implementation challenges. At the same time, long-standing fundamentals such as speed, communication, and access to care remain critical drivers of success.

AI Fraud Emerges as Top Severity Concern

When asked what will most likely increase claim severity over the next three to five years, respondents identified AI-enabled fraud and data authenticity issues as the leading concern. Thirty-two percent selected AI-related fraud risks, followed by social inflation, including larger verdicts and prolonged litigation, at twenty-five percent.

These findings highlight a growing reality for claims organizations. As AI becomes more accessible and sophisticated, concerns around fraudulent documentation, manipulated information, and data authenticity are becoming increasingly important. At the same time, continued social inflation places pressure on claim costs and litigation exposure.

When implemented responsibly, AI can be a powerful tool in identifying fraud, waste, and abuse by helping claims teams recognize patterns and anomalies that may otherwise go undetected. However, organizations must balance innovation with appropriate controls. Effective AI fraud prevention strategies include layered verification processes, continuous monitoring, strong governance practices, and ongoing education for claims teams.

CorVel addresses these challenges through proactive oversight and advanced fraud detection capabilities. By combining intelligent automation with experienced professionals, CorVel helps clients navigate emerging AI risks while maintaining confidence in the integrity of their claims programs.

What will most increase claim severity over the next 3–5 years?

The Biggest Barrier to Effective AI Adoption

While respondents recognize the growing importance of AI, they also identified significant challenges to implementing it effectively. One-third of survey participants cited governance concerns, including privacy, security, compliance, and model risk, as the biggest barrier to using data and AI effectively in claims today.

Additional concerns included a lack of time or expertise to operationalize insights, challenges validating recommendations and demonstrating return on investment, and difficulties integrating new technologies with legacy systems. The findings demonstrate that successful AI adoption requires more than innovative technology alone. Organizations need trusted partners with proven experience implementing AI responsibly, along with governance frameworks that support ongoing transparency, security, and accountability.

What is the biggest barrier to using data or AI effectively in claims today?

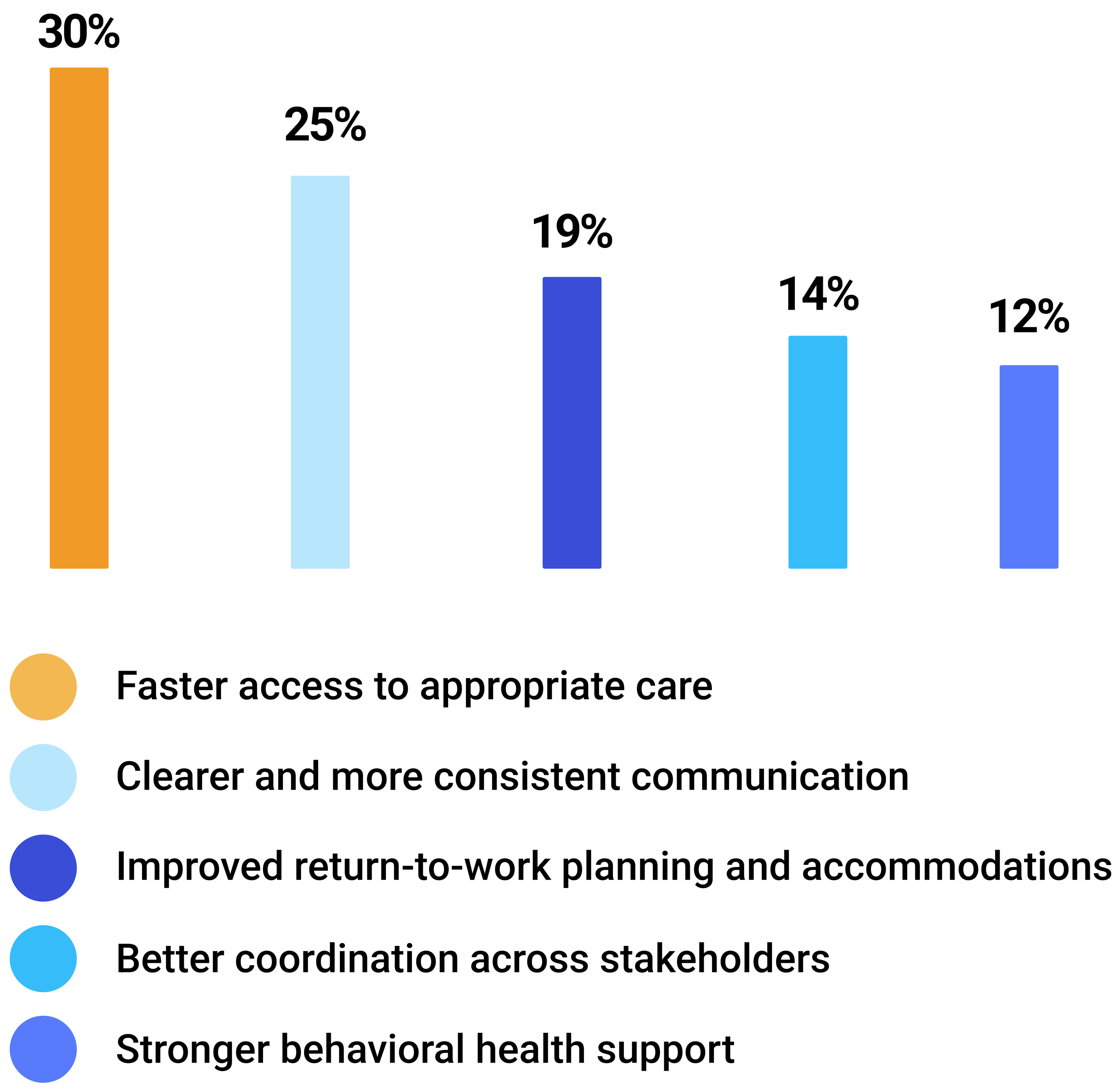
CorVel has spent years evaluating how AI can be effectively integrated into claims operations while maintaining rigorous standards for data privacy and security. Through practical implementation, ongoing oversight, and continuous refinement, CorVel has identified best practices that help organizations realize the benefits of AI while avoiding common pitfalls. This balanced approach allows technology to enhance decision-making, improve efficiency, and support better outcomes without sacrificing trust or compliance.

Faster Access to Care Remains the Greatest Opportunity

Despite the industry's focus on technology and innovation, respondents pointed to a familiar priority when asked what would most improve the claimant and injured worker experience while improving outcomes: faster access to appropriate care.

This reinforces what decades of claims data has consistently shown: early intervention matters. Delays in treatment can affect recovery timelines, increase claim duration, and contribute to higher overall costs. Conversely, timely access to appropriate care often leads to improved claimant satisfaction, better clinical outcomes, and more efficient claim resolution.

What would most improve the claimant or injured worker experience while improving outcomes?



CorVel has long prioritized immediate intervention and rapid care coordination as core elements of our claims management philosophy. Through integrated clinical services and technology-enabled workflows within Care MC®, CorVel helps claimants and injured workers access quality care quickly, while providing stakeholders with the visibility and support needed to drive positive outcomes.

Although speed to care emerged as the leading priority, respondents also emphasized the importance of communication, return-to-work planning, stakeholder coordination, and behavioral health support. Together, these findings underscore the value of a holistic approach to claims management that balances clinical and operational considerations.

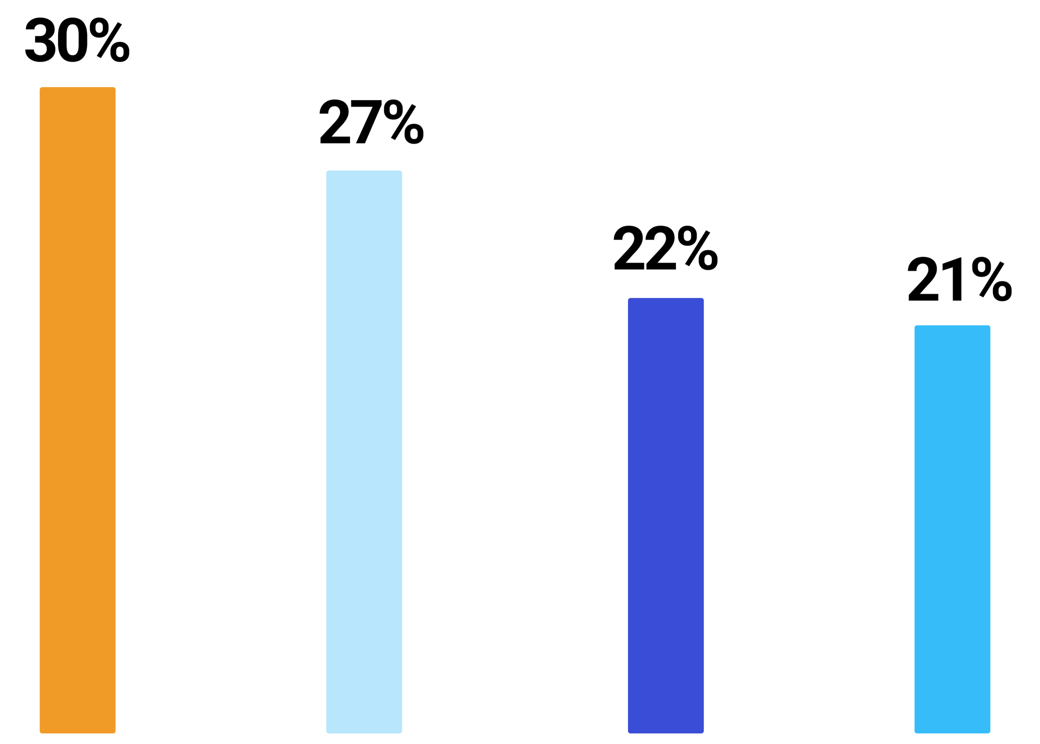
Speed Separates High Performers

Respondents identified speed—specifically time to triage and first contact—as the characteristic that best differentiates a high-performing claims program today. Thirty percent selected speed as the defining factor, ahead of cost control, claimant experience, and claim outcomes. Notably, no respondents identified proactive insights as the primary differentiator, suggesting that execution remains more important than information alone.

The findings reinforce a key industry truth: even the most sophisticated analytics and technology platforms deliver limited value if it is not effectively integrated into the current workflow and action is delayed. Early engagement, rapid triage, and prompt communication create opportunities to influence outcomes before costs escalate and complications emerge.

CorVel's integrated approach is built around this principle. By combining technology-enabled workflows, clinical expertise, and experienced claims professionals, CorVel helps accelerate critical touchpoints throughout the life of a claim.

What best differentiates a high-performing claims program today?



- Speed (time to triage or first contact)
- Cost control (severity, litigation, total cost of risk)
- Claimant experience
- Claim outcomes (return-to-work, functional recovery)

Conclusion

CorVel's RISKWORLD 2026 survey points to an industry where emerging risks are evolving alongside new technology. AI-enabled fraud and data authenticity concerns now rank among the top risks, while governance and trust continue to shape how organizations adopt and scale AI.

Even with these shifts, performance is still defined by execution early in the claim. Speed to care, rapid triage, and timely communication remain the clearest indicators of high-performing programs.

In this current claims environment, success depends on both managing new risks and strengthening execution. CorVel helps organizations navigate change and deliver the speed, transparency, and outcomes that matter most.