Automating Insurance Management & Claims: 85% reduction in Manual Effort



Overview

A leading insurance provider, serving diverse verticals including Health, Marine, Fire, and Corporate Insurance, managed extensive policy and claims operations. They needed to automate insurance management and claims processing for increased efficiency and reduced manual dependency.



Objective

The goal was to implement applications to reduce manual effort by 85% and policy/claim processing time to enhance insurance quotations, policies, and Claims management.

Business Challenges

The organization faced operational inefficiencies in their insurance management processes, which slowed growth and impacted customer and agent experiences:

- Slow Personal Details Verification: Manual verification of client details delayed processing
- Complex AML Compliance: Time-intensive AML checks reduced operational efficiency
- Manual Fraud Assessment: Real-time fraud and sanction details assessment was labor-intensive

The Solution

We deployed **Pega** low-code application, leveraging our global expertise in digital transformation. The solution automated insurance management and claims processing through an agent-driven systematic process. Leads received via phone, email, or in person triggered automated quote generation, followed by multiple automatic and manual validations and verifications steps, including AML and real-time fraud and sanction assessments. The process culminated in quote-to-policy conversion, with detailed reporting for internal and external auditing and finance calculations, streamlining operations.

Value Delivered

Our Pega-driven application transformed the client's insurance operations, delivering significant efficiency gains and a seamless experience for agents and underwriters. Previously hindered by manual validations, the organization now benefited from automated workflows and modern UX, reducing processing times.



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