# Claims Processing

## *Critical Process Issues*

PRO Process Research & Optimization

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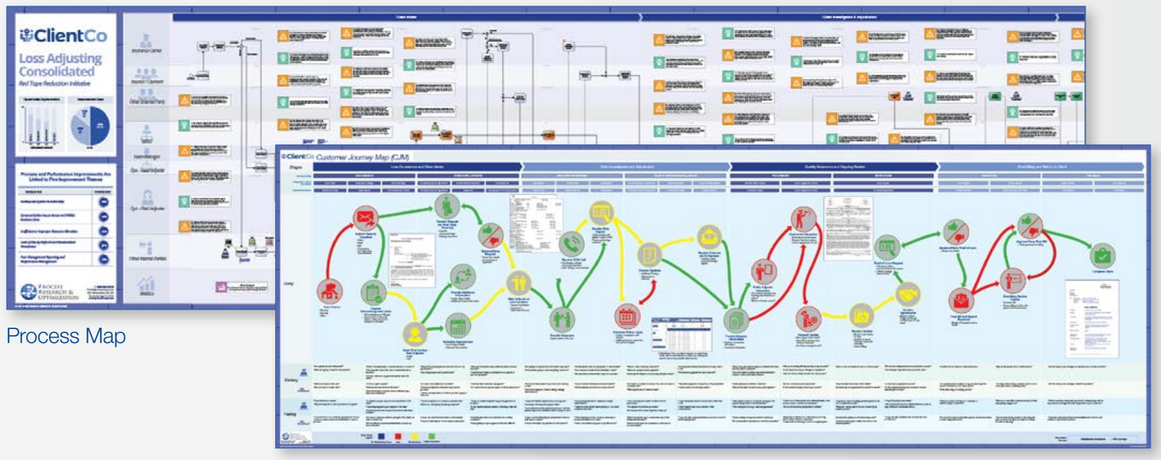
# Sample Deliverables and Output

### *Process Map and Customer Journey Map Depict Issues at the Point of Execution*




Process Map

Customer Journey Map

### *Numerous Constraints Inhibit Performance and Customer Satisfaction*

**Claims Intake**

- Claims management system forces manual work
- Assignment of account program numbers is rigid and inefficient
- Recruiting lacks support and depth
- Claims intake experiences misalignment in call demand pattern to available resources

**Claims Investigated & Adjudicated**

- Data availability is inefficient
- Client customization slows down adjustments
- Training and task understanding tends to be poorly communicated
- Miscommunication between departments

**Quality Assurance (CCS Only)**

- Quality assurance standards applied inconsistently across teams
- Supervisor reviews delay product output
- System issues drive rework
- Recommendations are acknowledged but not acted upon

**Submit for Carrier Approval**

- Excessive approvals
- Approval requests often fail to make expected changes
- Lower value tasks reduce productivity
- Different insurers need to be billed properly

# Typical Improvement Issues

### *Key Process Steps*

- *Account Setup & Management*
- *Claim Intake & Reporting*
- *Ongoing Review & QA*
- *Claim Investigation*
- *Final Billing & Return to Carrier*

### *Business Issues*

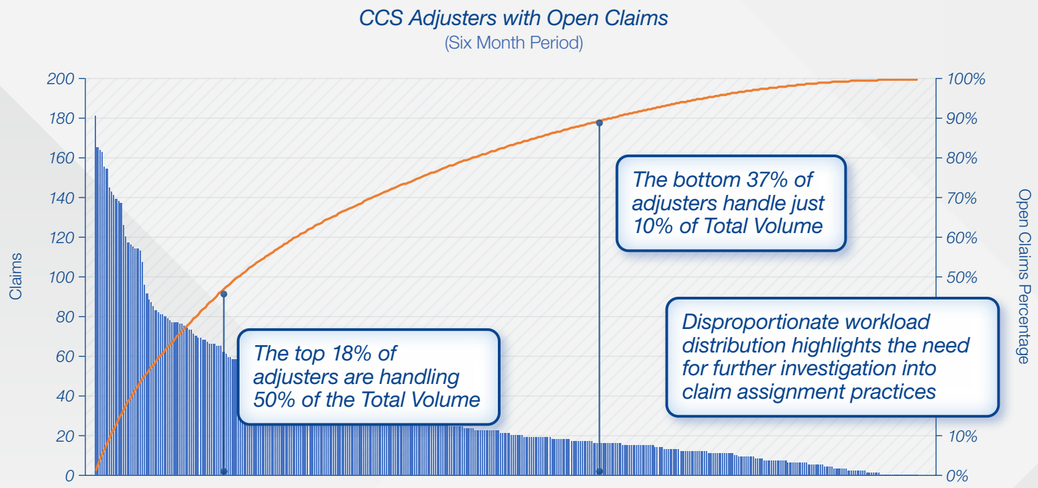
**Business Alignment**
- Complex and customized client instruction structure
- Lack of "Teaming" and cross-selling
- Coordination with contractors and public adjusters
- Client fragmentation due to program numbering system

**Reporting**
- Lack of visibility into adjuster capacity
- Subjective claim assignment practices
- Performance disparity across adjusters
- Lack of work-to-time measures

**Resource Utilization**
- Quality Assurance responsibility fragmented
- Underutilized automated and centralized QA solutions
- Lead adjuster report standardization
- Rework during claim handoff due to poor communication

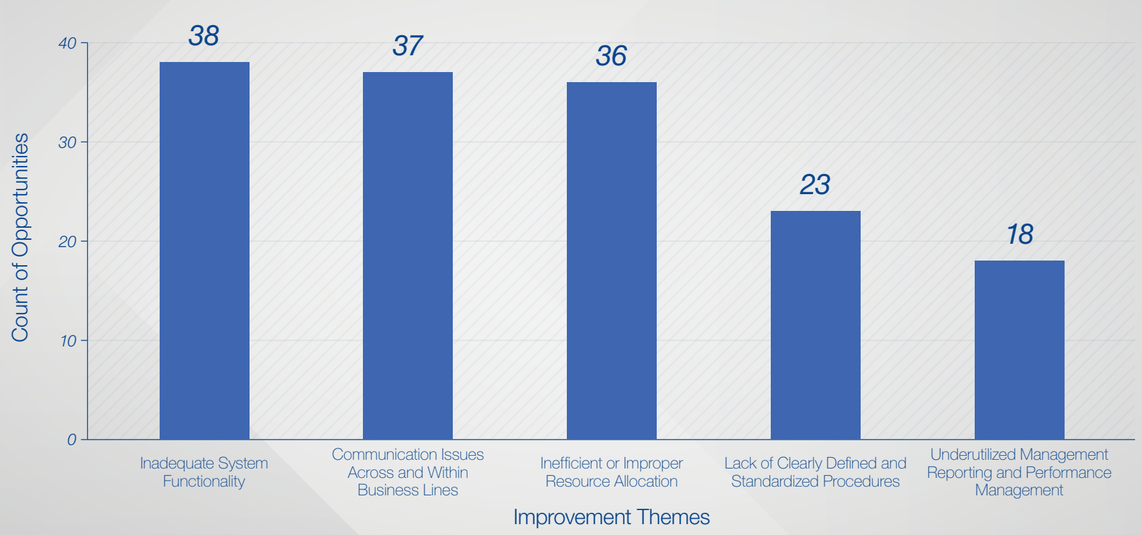
**Client Service**
- Increased billing disputes and a lack of protocol
- Claim re-opening due to client disagreement
- Suboptimal claim satisfaction measures
- Client confusion due to lack of proactive communication

### *Claim Volume is Significantly Skewed Toward a Subset of Highly Productive Adjusters*




# Solutions and Benefits

### *Current State Customer Values When Filing a Claim*

| | |
|---|---|
| *Rapid Notification of Loss* | Initial damages reported quickly and accurately |
| *Ease of Claims Submission* | Transparent and efficient claim submission process, minimizing hold times |
| *Fair Loss Assesment* | Value of damages meets policyholder expectations |
| *Accurate Claim Settlement* | Final settlement value is congruent with initial assessment |
| *Personal Assurance and Support* | Claim agent provides policyholder with considerate service and assurance of efficient claim processing |

### *Opportunities are Linked to Key Improvement Themes in the Claims Process*