JOLT ADVANTAGE GROUP

CASE **STUDY**

AUTOMATIC CLAIM PROCESSING

INDUSTRY:

Healthcare

PROJECT BACKGROUND:

A large healthcare insurer wanted to augment their claim processing efficiency, remove bottlenecks and errors that would cause major roadblocks and increase the volume of customer complaints.

CHALLENGES:

- \> 1000 claims stopped daily due to code related errors associated with missing or incorrect data

- High volume of manual labor dedicated to fix errors

- Manual submission of claims into systems from stopped claims and incentives to end-customers to re-activate their insurance coverage

SOLUTION:

Our RPA solution architects helped customer deploy solutions that provided:

- Automated scripts to correct error codes and resubmit claims

- Automated work queues based on rule-based workflows

- Bots navigate across different systems for automated data collection

RESULTS:

- \> 20 FTE savings from manual error correction efforts

- Significant jump in claim processing efficiency

- 90% of time reduction in error correction

- Better ability to handle volume spikes in claims

- Automation of low-value work allow reassignment of FTEs to higher value work