



Appian Connected Claims

Life Insurance

Faster claims settlement is a business imperative.

Today's claims operations teams are challenged by manual document processing and multiple disconnected systems that slow down the claims process. As a result, they're dealing with lengthy time to close, poor customer experience, and increased costs.

Life insurers need a way to optimize their claims processes, mitigate claims leakage, and improve straight-through processing—and all while providing superior customer service and empathy during what is often a very stressful, emotional time for the beneficiary or policyholder. Balancing efficiency and speed with transparency,

communication, and support is essential in meeting the evolving needs of customers.

Better, faster claims handling is here.

Appian Connected Claims is a prebuilt solution that reduces leakage, optimizes claims operations, and improves the claims experience by expediting claims handling and delivering a single-pane-of-glass view of claims data.

Connected Claims consists of five integrated modules that can be sold separately to complement life insurers' existing core claims systems.



Increase efficiency and optimize claims operations.

With Connected Claims, life insurers can:

- **Unify disparate data to enable faster, more accurate claim assessment.** Unlock a single-pane-of-glass view of each claim by using Appian's data fabric to quickly connect disparate data (e.g., claims systems, CRMs, policy admins, advanced data sources, etc.).
- **Optimize claims handling with process automation.** Leverage built-in intelligent document processing to quickly capture and verify claims intake data. Then use robotic process automation to further drive efficiency and increase straight-through processing.
- **Deliver a more seamless customer experience.** Meet rising customer expectations for touchless claims, including delivering multi-channel loss reporting and real-time access claims information.
- **Optimize fraud case management** with a unified view that gives insurers full control of all potential fraud alerts for SIU teams.

Appian delivers value across the claims process.

Life claims management: Aviva receives an average of 80,000 calls per year in life insurance claims. With Appian, Aviva increased the amount of same-day claims settlements from 1% to 25%, with a 530% jump for claims settled within three days. With greater automation and a 360-degree view of claims with Appian's data fabric, Aviva was further able to free up customer service agents to focus on customer satisfaction.

Life claims processing: One of the world's largest reinsurers partnered with Appian to automate its manual claims process. Delivered in four months end to end, the reinsurer was able to digitize and manage all claims files in one platform and substantially reduce the amount of time spent on each claim.

Leaders in Insurance Trust Appian



Learn more at appian.com/connected-claims