

# Automating Claims Intake: Challenges and the AI Opportunity

## ⚠️ The Problem: Manual FNOL Overload

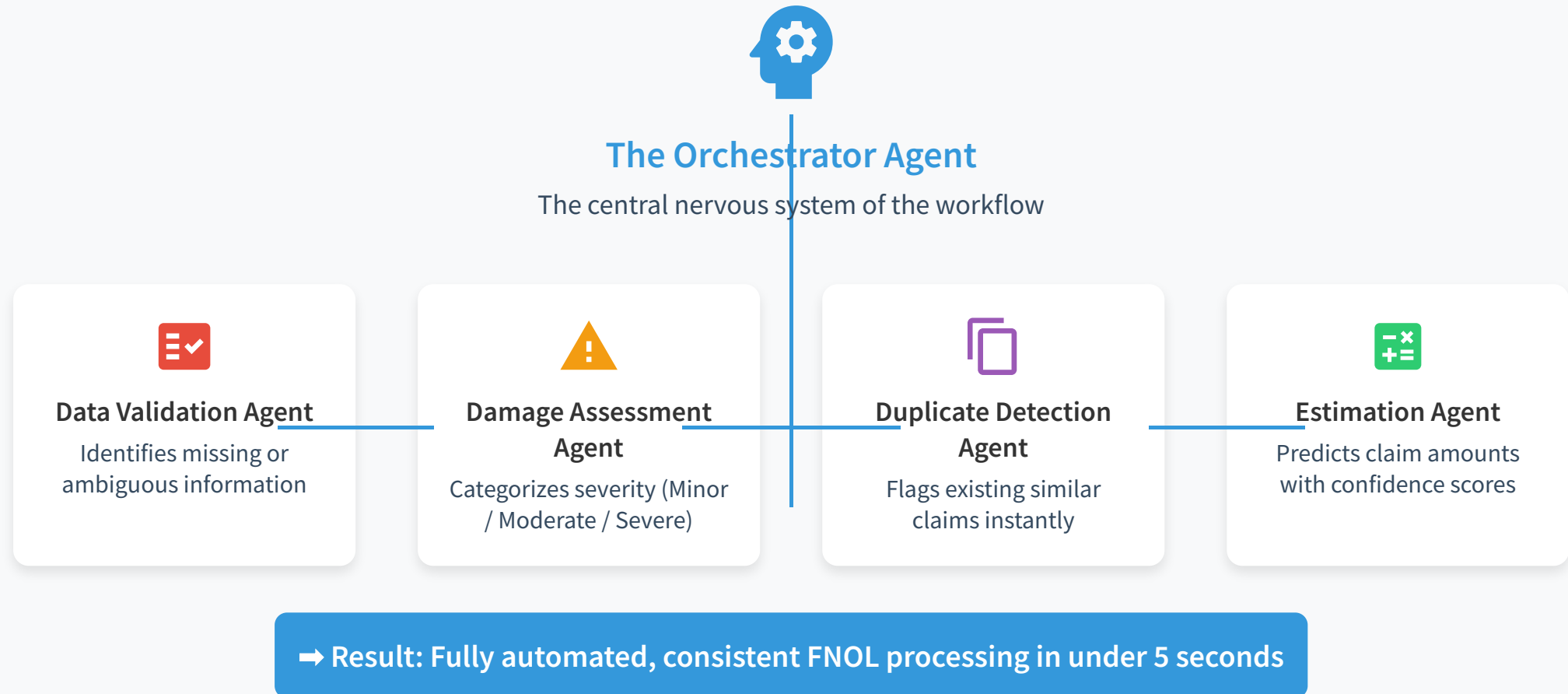
- ❗ **Incomplete Data:** Critical claim information is often missing.
- ⌚ **Slow Triage:** Manual sorting slows down the entire claims lifecycle.
- 🗨️ **Inconsistent Evaluation:** No standardized assessment of damage severity.
- 📄 **Hidden Duplicates:** Duplicate claims slip through unnoticed.
- ❓ **Unpredictable Estimates:** Initial claim reserves are often inaccurate.

## 🚀 The AI Opportunity

- 🤖 **Multi-Agent Orchestration:** Deploying AI to automate FNOL intake.
- 🔗 **Automate extraction:** Data extraction and validation.
- 📁 **Reduce workload:** Significantly reduce human administrative workload.
- ✅ **Improve accuracy:** Enhance data accuracy and consistency instantly.
- 😊 **Better experience:** Deliver a faster, superior customer experience.

# The Solution: FNOL AI Orchestrator System

We utilize a "Hub and Spoke" AI model to handle complex claims tasks autonomously



# End-to-End Automated Workflow

1

## Intake

Customer sends an accident report email with attachments



2

## Extraction

The Orchestrator Agent reads the email and extracts core claim details



3

## Parallel Processing

Simultaneous analysis occurs:

 Validation Check    Damage Severity Assessment    Duplication Search    Financial Estimation



4

## Generation & Action

The Orchestrator compiles results and generates:

 Internal FNOL Summary Report    Email to Claims Adjuster Team    Automated Customer Follow-Up



5

## System Integration

Structured data is pushed directly into the core claims management system

### System Highlights

- ✓ Fully automated triage without human intervention
- ✓ Stable, explainable outputs for auditing
- ✓ Designed specifically for real-world insurance workflows

# Business Impact & Demo Value

 **80%**



## Faster Claim Initiation

Drastically reduce the time from email receipt to file creation

 **60%**



## Reduction in Manual Follow-ups

AI catches missing info upfront, reducing back-and-forth emails



## Improved Accuracy

Consistent Estimates & Severity: Data-driven triage replaces subjective manual assessment



## Risk Mitigation

Early Duplicate Detection: Identify potential fraud or redundant claims immediately

## ★ Overall Value



Faster claims processing



Reduced operational costs



Enhanced customer experience

