



COMBINING TECHNOLOGY WITH EMPATHY

to Strengthen the Insurance Claims Process





Build Customer Loyalty

Change is a small word but lately it's become one of the most important for insurance companies. Forced to the forefront by the pandemic and bolstered by the availability of new technologies, change has accelerated transformation in the insurance sector. Customer expectations for a seamless, accurate and fast response from their insurers has also accelerated, with the bar being set by digital leaders in other sectors, such as retail, ecommerce and banking, and the now not-so-new "insurtech" sector.

Certainly, for retail insurers, the concept of customer loyalty has become somewhat outdated. Price is the primary motivator for whether a customer renews a policy, with inertia undoubtedly a close second. And, while focusing on creating the best possible customer experience across the policy lifecycle has the potential to influence the decision, it is not a guarantee.

Enter the insurance claims process. The claims department is, perhaps, the one area of insurance where customer experience can truly help to build loyalty to your brand. In a time of crisis for the customer, you have a chance to be empathetic and to help ease the pain of the situation, building an emotional connection that goes beyond the usual, distant insurer-policyholder relationship.



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What do customers want from the claims process?

Empathy is becoming a new buzzword in customer experience, particularly in the claims space where customers have experienced an event that has left them stressed, anxious and in need of help. With a high volume of claims to be processed, it's easy to treat a claim like a transaction, but more insurance companies are trying to change their approach.

Your customers want to know that they're being heard and that the trust they put in your company when they paid for their insurance policy wasn't for naught. They also want to get the uncomfortable task of reporting the claim and providing supporting documentation out of the way as quickly as possible. Obtaining a quick settlement is clearly important and the ability to do so a big win for any insurer. But an understanding of the reality of the situation while the customer is waiting for that decision is crucial.

Transparency, particularly setting expectations at the start of the policy and then again at the start of the claims process, can help. Your customers want to be involved in the process to an extent; they want to know how the claim is progressing and to be kept in the loop. This helps them handle other matters resulting from the circumstances of the claim. For example, the outcome of the claim will decide when they can start repairs on their home, replace a vehicle, or arrange a funeral. Giving your customers confidence during a difficult time can create the emotional connections that cultivate brand loyalty.





The role of intelligent automation in claims management

According to Hugh Pelling, insurance accounts director at Blue Prism, "Customers are looking for fast, accurate responses and decisions, along with proactive customer journey management. So, being guided and informed rather than having to chase for updates. To do that, an insurer needs access to big data, and to manipulate it quickly and accurately. And give the customer access to their preferred choice of communication channels."

Connecting your empathetic claims team with clever technology, like intelligent automation, helps take the customer experience to the next level. To start, it ensures that—on the back end of the claim—people and systems are connected and working efficiently together at speed to process data and make decisions. It also gives your claims specialists more time to focus on the customer, as well as the confidence to offer help, knowing that the technology and data is behind them.

Creating a claims culture of empathy and transparency, built on the foundation of intelligent automation, can be a catalyst for transformation. Skills such as artificial intelligence (AI), natural language processing (NLP), and optical character recognition (OCR), combined with RPA and automation management tools, enable your claims team to truly streamline every step in the claims process. Blue Prism clients have seen claims processing times significantly reduced, with settlements being achieved in a day rather than weeks.



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Create the right environment for a premium customer experience

Getting engagement right at the first notice of loss (FNOL)

Bringing the decision-making process as close as possible to the FNOL is key to settling claims quickly. This way you have the ability to signpost accurately, triage and manage the claim, and create certainty for the customer whenever possible. To achieve this, you'll want to collect all the information you need from the customer on day one, or as near to day one as possible.

This means ensuring that your FNOL channels are easily accessible by customers, that they are collecting and verifying all the relevant information, and that they are connected to your systems. A digital worker can support all this, speeding up the process and automatically communicating with the claimant where a personal approach isn't needed.

Getting personal in the contact center

FNOL and claims queries are often managed separate from the other customer transactions. However, it's likely difficult to control where your customers go to report a claim or get an update. To your customers it's all one business, and if a customer service agent sends them on a wild search to get to the claims team, or if they try to handle the conversation without the relevant information at hand, it can lead to a poor experience despite the best efforts of your team.

With a digital workforce working behind the scenes, your agents can have customers' claim details at their fingertips in seconds and FNOL can be achieved efficiently on any channel. What' more, agents can spend time assisting customers on the phone when they need extra help or a bit of reassurance.

Building better broker connections

When a broker is part of the customer experience, it's crucial to maintain seamless communication between all parties. As the customer relationship holder, the broker is often the party held accountable to service levels when a claim is made, even if they are not the ones servicing the claim. Brokers rely on personal relationships with their customers, so they need confidence that the insurers they work with are also focused on customer relationships.

Intelligent automation can facilitate the insurer-broker relationship in many ways, but in terms of a claim, it provides much needed connections between systems and people. A digital workforce can ensure that everyone involved is kept in the loop and that broker portals and insurer databases are operating from a single source of truth.



Untangling disputes faster

A digital workforce enables automated data collection and hand-offs to third-party legal teams, in cases of disputed liability. It can also help you connect data between other third-party companies involved in managing a claim.

By connecting all these processes with intelligent automation, you end up with a single version of the truth—one set of data that is accessed by everybody on the team, regardless of the process they are operating.

A people-first approach to meeting customer goals with technology

In order to start making changes that build trust with your customers through the support of technology, it's time to also create that trust internally. Introducing intelligent automation will require input and buy-in from your claims teams and senior executives, so involvement from the start of the project is key. A feeling of ownership and comradery with a digital workforce helps people see clearly how automation can align with their goals and help them meet customer experience KPIs.

In a Blue Prism World talk, Alastair Robertson, UK head of continuous improvement and automation at Zurich Insurance, said "To get any kind of success in automation, you need to understand the human element. You need to understand why people are fearful about it. You need to understand what training is required. Our CEO is passionate about workforce sustainability. There's now no exec member that doesn't have automation as a topic on their agenda."

The shape of the insurance sector may have been altered forever, but the pace of change in technology will only continue in the years ahead. Even as automation becomes more standard in claims teams and insurance operations, it's the people who will become even more important in overcoming the challenges involved with building and retaining customer loyalty. A digital workforce simply helps them to do that.

To find out more about how we're helping insurance companies like yours meet their customer experience and digital transformation goals, visit our insurance web page.



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