

Claims Processing

Accelerate claims processing with next-generation intelligent automation



Find out how intelligent automation—powered by AI, machine learning, and document understanding—can transform claims processing into a streamlined, scalable, and customer-centric operation.

Key challenge

Claims processing is a critical function for organizations in insurance, healthcare, and government services. Yet, it remains one of the most resource-intensive and error-prone operations. Manual data entry, fragmented systems, and complex validation workflows often lead to delays, increased costs, and poor customer experiences.

Traditional claims processing workflows face several persistent challenges:

- **High volume and complexity:** Thousands of claims are submitted daily, each with varying formats and documentation requirements.
- **Manual effort:** Staff must extract, validate, and enter data from forms, emails, and scanned documents.
- **Slow turnaround:** Processing times can range from days to weeks, impacting customer satisfaction and operational efficiency.
- **Compliance risks:** Errors in data handling or missed deadlines can result in regulatory penalties and reputational damage.

Solution

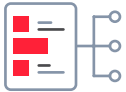
ABBYY's intelligent claims processing solution leverages AI-powered document intelligence, robotic process automation (RPA), and business rules engines to automate the end-to-end lifecycle of a claim.

Key capabilities:



Document ingestion and classification

Automatically ingest claims from multiple sources (email, portals, scanned documents) and classify them by type (e.g., auto, health, property).



Data extraction and validation

Use AI to extract structured data from unstructured documents (e.g., handwritten forms, PDFs) and validate against policy databases or external systems.



Workflow automation

Route claims through configurable workflows for approvals, exceptions, and escalations—reducing manual handoffs and bottlenecks.



Real-time monitoring and analytics

Gain visibility into processing times, error rates, and SLA adherence through dashboards and alerts.

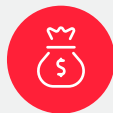
Business impact

Organizations implementing intelligent claims processing have seen measurable improvements:



Up to 70% reduction in processing time

Automation accelerates claim intake and adjudication, enabling faster payouts and improved customer satisfaction.



30%–50% cost savings

Reduced manual labor and rework lower operational costs and free up staff for higher-value tasks.



Improved accuracy and compliance

AI-driven validation ensures data integrity and supports audit readiness.



Scalability and resilience

The solution adapts to seasonal spikes or crisis events without compromising performance.

Insurance claims processing: Use case example

An insurance provider automated its auto claims process using ABBYY. Claims submitted via mobile app were instantly classified, relevant data was extracted (e.g., VIN, damage photos), and they were routed for approval.


The result: 80% of claims processed within 24 hours, with a 40% reduction in operational costs.



Why choose **ABBYY**?

-  **Industry expertise:** Proven success across insurance, healthcare, and government sectors.
-  **Flexible integration:** Works with existing claims management systems and CRMs.
-  **Enterprise-grade security:** Ensures data privacy and regulatory compliance.
-  **Rapid deployment:** Go live in weeks, not months.

Ready to modernize your claims processing?

-  **Contact ABBYY** to schedule a demo or explore a pilot tailored to your organization's needs.

ABBYY

For more information, please visit www.abby.com
If you have additional questions, contact your local ABBYY representative listed under www.abby.com/contacts
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