The Power of User Experience: How to Simplify the Claims Decision-Making Process

June 10, 2019
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This is the third article in a seven-part series that highlights how technology and solution integration can result in improved claim outcomes. Click to read the [first](#) and [second](#) articles in the series. Humans make [thousands of decisions every day](#), from small choices like what to eat, what to watch on TV, or what to wear, to larger decisions like purchasing a home or changing careers. Some of us even suffer from [decision fatigue](#), which can make it more difficult to make the right choices. Decision fatigue can be so taxing that some leaders, [including Barack Obama and Steve Jobs](#), have chosen to wear the same outfit every day in order to help minimize the number of decisions they have to make. Property and Casualty insurance adjusters who make critical decisions every day that can change the course of a claim—like whether or not to approve a treatment or if they should send a claim to a case manager—can not afford decision fatigue. The claims decision-making process can be very complex, considering all of the different information available to adjusters for each and every claim. Adding technology into the claims, like a [property & casualty insurance software](#) workflow can help improve adjusters' experiences and give them the right information at the right time to simplify the process. Here are a couple of ways that claims organizations can help improve the adjuster user experience in order to streamline the claims decision-making process.

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1. Provide Adjusters with Tools to Give Them the Right Information at the Right Time

There is so much information available to adjusters for each and every claim—some extremely relevant and valuable and some extraneous. Claims organizations should be providing their adjusters with technology that

sorts through all of that data and automatically surfaces the key insights the adjuster needs to know and when they need to know it. Providing adjusters with the right information at the right time can help them to see the full picture of the claim and therefore set them up to make better decisions that lead to better outcomes for the company and the claimant. For example, a third party liability adjuster often receives demands that are unorganized and can be hard to understand. A claims organization should set up solutions like third party demand package solutions that sort through those demands for adjusters, checks for accurate coding and reviews the bills. Even better, that service should connect with an adjuster portal that surfaces the key findings from the demand and the bill review process—for example treatment timelines—so that the adjuster enters negotiations armed with the right information that they need to achieve a successful outcome for each claim.

2. Simplify the Adjuster User Experience with a Single Portal

Between claims systems, bill review systems, scheduling systems, pharmacy benefit management portals and liability assessment systems, adjusters could use somewhere between three and 15 different software programs every day. Each of these systems helps adjusters do their jobs effectively, but switching between systems and trying to gather information from multiple screens can be both time-consuming and error-prone. As mentioned in the first article in this series, in a recent user experience study, Mitchell determined the time it took users to complete bill review tasks in a bill environment that had information scattered across multiple pages versus tasks conducted in an optimized environment that had all of the information located on one page. Users completed multiple actions, including changing payment and entry settings, applying those actions, and adding comments to 16 of the states in the U.S. Users who worked from a single page saved an average of 88 percent of total time spent to complete the task, when compared to users who had to switch between multiple page locations. To solve for this user experience issue and improve workflows, claims organizations should be looking for opportunities to provide adjusters with consolidated workspaces or portals that give them all of the information they need in one place. Providing a single portal not only facilitates efficiency improvements, but also quickly helps adjusters and claim handlers see the claim information holistically. As a result, this will better equip them to make decisions, ensuring the best outcomes.

3. Integrate Systems and Data

Another way to simplify the claims decision-making process for adjusters is to integrate systems and the data that passes between those systems. Integrating systems and data can help facilitate adjusters by providing the right information at the right time. For example, integrating utilization review (UR) and bill review data can help adjusters easily know if they should approve or deny treatments based on the UR determination. System integrations can also help improve workflow processes and efficiencies. One example of an integration that can improve efficiency is between a direct-to-provider negotiation service and an adjuster portal. By integrating these two solutions, adjusters can simply click a button to send a bill to be negotiated and then automatically receive alerts back with information from the negotiation process. Without the integration, the process of sending a bill to negotiations can be tedious and time consuming and an adjuster could easily miss updates that come back from the service. Improving adjusters' user experience by introducing integrated technologies and easy-to-use portals can help give adjusters the information they need at the right point in the claims process. By making these changes, claims organizations can start to simplify the complex claims decision-making process and empower adjusters to bring their claims to better outcomes.

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