# Insurance & TPA Intelligence



**AI That Takes the Load Out of Claims Operations.**

**More volume. Complex rules. Tight SLAs. Growing operational pressure.**

Turn manual, document-heavy claims workflows into intelligent, governed and scalable operations.

## Where the operational load accumulates

### Prior Authorisation

Manual clinical review and time-sensitive decisions.

### Claims Adjudication

Benefit and policy rules requiring repeated interpretation.

### Coding

Errors and disputes creating rework.

### Fraud, Waste & Abuse

Patterns often identified too late.

### Claims Operations

Multiple data sources, teams and SLAs creating limited visibility.

# Five Ways to Apply AI

### Prior Authorisation Automation

Clinical criteria matching, clean-case automation and exception routing to medical review.

### Claims Adjudication Intelligence

Convert benefit and policy documents into a governed, centralised rule repository to support consistent adjudication.

### Fraud, Waste & Abuse Detection

Analyse provider billing patterns before payment authorisation, rather than relying only on retrospective audit.

### Medical Coding Validation

Automated coding review and dispute prediction to reduce rework and free medical team capacity.

### Claims & Operational Intelligence

Cloud-native data ingestion with near-real-time visibility into:

- Cost
- Utilisation
- SLA performance
- Claims operations
- Employer-facing reporting

# Human-Governed AI

Every AI decision is designed to be:

**Explainable | Auditable | Reversible**

### Weeks 0–2

Discover one workflow and establish the baseline.

### Weeks 2–8

Pilot inside the existing environment.

### Week 8+

Scale across workflows and lines of business.