

# Automating Group Claims with AI-Powered Multi-Agent Orchestration

## Customer:

A Leading Asian Financial Services Group

## Abstract:

By automating group claims intake and routing with AI-powered multi-agent orchestration, a leading insurer cut claim acknowledgement times by 96%, reduced manual effort, and lowered NIGO rates. The streamlined process accelerated benefit payouts, improved accuracy, and freed staff for higher-value work, while establishing a reusable blueprint for other lines of business.

## The Context:

The customer managed thousands of group health and life policies for corporate clients, relying on a manual, email-driven process to handle claims. Clerical teams spent hours sorting through shared mailboxes, classifying claims, renaming attachments, and manually preparing case packets for adjudicators. This created inefficiencies, delays, and inconsistent triage. A streamlined, automated approach was needed to reduce cycle times and improve accuracy.

- 4-6 hours to acknowledge simple claims; up to 2 days during peaks.
- Inconsistent triage with varying clerical rules.
- Limited auditability due to fragmented email-based storage.
- Resource-intensive manual claim preparation and routing.



## The Solution:

Neutrinos deployed a multi-agent orchestration on its AI Hub to automate intake, classification, summarization, and routing of group claims. By embedding intelligent document processing, automated eligibility checks, and adjudication support, the solution eliminated manual mailbox handling and standardized the claims journey.

- **AI-driven intake agent** to classify claims and tag priority from incoming emails.
- **Automated summarization** of medical and policy documents using IDP and NLP.
- **Rules-based triage & NIGO outreach** with policy validation and targeted employer notifications.
- **Adjudication agent** to apply benefit rules, detect fraud indicators, & generate structured recommendations.

## The Impact:

Acknowledgement times collapsed from over **4 hours to under 10 minutes**, enabling near-instant employer responses. Manual touches per claim dropped by 60%, freeing clerical staff for higher-value tasks.

The NIGO rate reduced from **14% to 4%** through precise, automated outreach, while faster case routing allowed adjudication to begin the same day, improving benefit payout speed and employer satisfaction.

## Value Realized:



**Same-day adjudication**  
start for 95% of cases



**Annualized**  
cost avoidance



**A scalable pattern**  
for e-claims and new-business



**14% to 4% drop**  
in NIGO rates