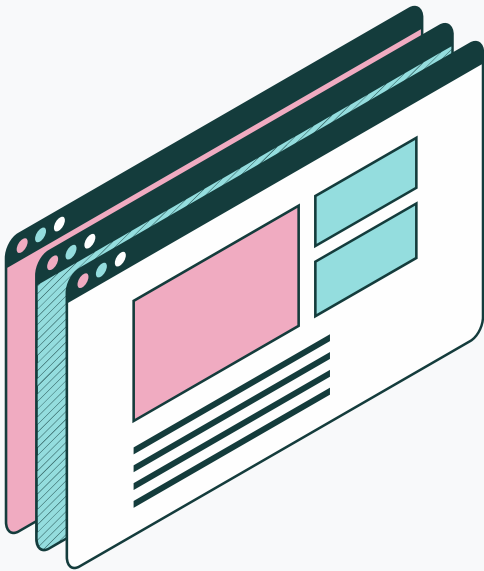


Automatically smarter | Exponentially faster | Remarkably flexible



An important decision point for auto carriers is whether to optimize claims for customer service or cost. With a customer service focus, one adjuster needs to handle the entire claim even if it has multiple types of exposure. With a cost-efficiency focus, a specialist for each exposure type should handle that part of the claim.

Claimatic enables you to optimize for either of these elements while also solving the common pain points below.

## What are the most common challenges to streamlining auto claims?

### Did you know?

The average American pays \$1,674 a year or about \$140 a month for auto insurance. Whether filing a claim that includes property damage, personal injury protection/med pay, and/or bodily injury, insurance customers look for minimal inconvenience and maximum payout.



### Unnecessary costs caused by delays

Any delay in assigning or processing a claim leads to increased costs for car rental and storage as well as a greater chance of customer dissatisfaction. In fact, the most likely time for a customer to leave their insurer is following a claim.



### Load-balancing for vendors

From rental car companies to repair shops, auto insurers need multiple partners available to move claims along. Having a range of preferred vendors on hand is essential since some reject work that doesn't meet certain criteria.



### Disconnected data

Many auto carriers manage certain data outside their systems or use it inconsistently. Using Claimatic to leverage data can help you improve claim efficiency and avoid variable customer outcomes.



Many claims management platforms lack the sophistication needed to incorporate an array of decision criteria and identify the ideal resources for each claim. That's where Claimatic comes in.

Our platform is a low-code/no-code solution so that your IT or development department doesn't have to be hands on. We help set you up, and then your claims team can drag-and-drop rules using if/then logic.

Claimatic can be set up in weeks, not months.

“ Within one week, we were able to complete training and go live in six days. — VP of Operations, Auto Insurance Carrier ”

## What you get with Claimatic



### Automated Claims Assignment

Assign claims in seconds after evaluating more than 25 standard and unlimited custom attributes.



### Custom Dashboards & Reports

Monitor claim assignments, resource availability, capacity, licenses, skills, and more via standard or custom dashboards or reports.



### Scenario Planning

Create and test scenarios outside of production and deploy at will. Easily revert back to normal operations once the surge has passed.



### Workforce Management

Create and test scenarios outside of production and deploy at will. Easily revert back to normal operations once the surge has passed.



### Plain-English Rules

Build rules using simple if/then logic and then drag-and-drop them into place.



### Data Management

Maintain a top-down, categorial data structure that enables you to make quick changes in mass without disrupting business.



### Low-code and Cloud-ready

Bring Claimatic online in weeks without overtaxing your IT teams, and be confident you can make changes on the fly and transition to the cloud.

Claimatic is the insurance industry's first SaaS solution dedicated to automating claim triage and assignment for optimal routing. It builds on the tools and data you already have to make fast decisions, reduce reassignments, and accelerate claims processing.