How Britam MI identified the bottlenecks in its claims process

Timely claims processing is crucial for client satisfaction and value, but insurers often struggle to get it right. Britam’s Microinsurance (MI) business unit in Kenya had struggled with slow processing of its medical claims for several years. This caused payment delays and dissatisfaction among its partner hospitals, some of which threatened to leave the network. Furthermore, the business unit’s helpline was constantly flooded with queries from hospitals and clients, 49 per cent of which related to claims payments and pre-authorizations for inpatient claims.

As a result, Britam MI decided to conduct a systematic diagnostic review of its claim process. The plan was to measure the average time taken for each step to identify bottlenecks. This turned out to be more difficult than expected, however, because of the way in which data had been captured and stored. Firstly, the processes differed depending on whether a claim was made for death, medical reimbursement or medical cashless cover. This reality was not captured in the process manuals, which documented a single standard process. Therefore, new process maps had to be drawn up to reflect the actual workflow for each type of claim before the analysis could begin.

Secondly, the claims data was fragmented, with external data from hospitals and internal data, generated during processing and payment, hosted on different IT systems. This information had to be consolidated to form a claims trail from the time of hospitalization to the time of payment. Furthermore, the claims documents were time stamped by Britam MI at each step, but this information was not stored in one place. The team therefore had to access the original physical documents and manually record the time stamps at each step.

After addressing these challenges, the business was able to break down its claims process into constituent steps and measure the time taken for each. The two main bottlenecks identified were the time taken for hospitals to send the claims documents to Britam MI and the time spent on data entry from physical documents into the IT system. Britam MI is now overhauling its claims process to address these two steps and reduce the overall claim processing time. In addition, this review demonstrated for Britam MI the importance of storing and managing data in a way that makes such analysis easier and quicker in the future.

STEP WISE BREAK-DOWN OF CLAIM PROCESSING TIME: