

Simplify appeals & grievances processing

Create seamless, consistent outcomes with AI-powered automation

Streamline appeals review & processing

Leveraging automation for appeals and grievances review and appeals case creation helps payers resolve cases faster, reduce manual effort, and ensure consistency.

UiPath AI-powered automation handles routine tasks like document collection, case routing, and decision support, allowing staff to focus on complex issues. This leads to improved turnaround times, less member and provider abrasion, and enhanced compliance, all while reducing operational costs and minimizing errors.

The benefits of AI-powered automation



Intelligent decision-making

AI and machine learning assist in reviewing and classifying appeals, providing consistent and accurate decision-making and reducing delays.



End-to-end automation

Automate the entire workflow from case intake to resolution, including document collection, eligibility verification, routing, decision support, and stakeholder notifications.

Midsize health payer



2+ hrs

Reduction in turnaround time (TAT) per case

20%

Reduction in research time

Systems impacted:

- Claims processing & adjudication systems
- Customer relationship management (CRM) system
- Document management
- Provider portals
- Workflow management & appeals case management systems
- Payment systems



Scalability

Handle increasing appeals volumes efficiently without additional staffing.



Seamless integration

Integrate with existing claims management, EHR/EMR, provider portal, and CRM systems to ensure smooth data flow and avoid disruption to current workflows. Connect with legacy and cloud-based systems without requiring complete overhauls, enabling easy adoption.

Evolution of appeals & grievances processing with AI-powered automation

Whether your appeals & grievances process is fully manual or partially automated, you can do more with UiPath. Use the chart below to benchmark your progress and discover the technology that can support your automation journey.

Manual



Utilizing RPA

RPA monitors the in-bound channel and categorizes as either an appeal or a grievance. It validates coverage and creates a case. It notifies the provider, 3rd parties and member of case determination via email.



Utilizing RPA and IDP

RPA & IDP review the case and send the data request to providers, 3rd parties and the member. Requested data is received and files are organized to facilitate reviews. The process is repeated/expanded for 2nd level appeals if needed.



Utilizing agentic automation

Agentic automation reviews received data, policy documentation, and historical appeals data and builds an appeals determination recommendation for employee review. The case management system is updated based on determination results.



Manual effort: Automation: Employee review (if needed): * Optional Process Activities **RPA** - Robotic Process Automation **IDP** - Intelligent Document Processing

Why UiPath?

UiPath is the ideal platform for automating appeals processing due to its powerful RPA capabilities and agentic approach that significantly enhances operational efficiency and accuracy.

By combining best in class RPA automation with Agentic Orchestration, UiPath delivers a smarter, faster, and more efficient appeals and grievances processing solution that transforms your workflow, reduces costs, and improves both operating costs and member/provider experience.

With end-to-end automation, AI-driven insights, and scalable workflows, UiPath is the optimal solution for automating pending claims, improving adjudication accuracy, and unlocking new levels of operational excellence for payers. reduces operational costs—making it the ideal choice for payers looking to modernize claims auditing at scale.

Ready to take the next steps?

[Contact us](#) to get started with AI-powered appeals and grievances today.

UiPath[®]
Agentic automation