About 15% of insurance claims result in missed subrogation, costing insurers an estimated $15 billion each year, according to the National Association of Subrogation Professionals. Furthermore, up to 32% of recoverable claims are not pursued for collection or the files close with no money recovered.

To mitigate claims leakage and net loss payouts and achieve maximum recovery, insurers and risk managers need to look for ways to optimize subrogation and recovery, as improving subrogation by even 1–2% could have a significant impact on an insurer’s bottom line.

**Better subrogation is a business imperative.**

Whether it’s a claim of small or large value, insurers need to flag candidates for subrogation early in the claims life cycle and proactively track claims progress to boost recovery efforts. Insurers also need a process to quickly identify, investigate, and pursue subrogation—a process with the ability to maintain a chronological record of claim activity throughout the life of the claim to remain up to date on subrogation activity.

This kind of process is best supported by an app. And an optimal subrogation application captures all subrogation activity, including potential recovery, actual recovery, percentage recovered, and loss type and displays this information in a single, consolidated view.

### Improve subrogation with low-code automation.

Built on the Appian Low-Code Automation Platform, the intelligent subrogation module within the Appian Connected Claims solution helps insurers create the right subrogation workflow supported by data from disparate, disconnected systems, enabling insurers to do the following:

- Summarize subrogation activity for each opportunity.
- Create a subrogation workflow and automate the process intelligently to expedite recovery.
- Access a timeline of all supporting documentation and research.
- Support the claims handler on specific cases with enhanced case management capabilities.
- Access daily, weekly, and monthly statistical reports.
- Enable detailed analytics of subrogation and recovery efforts.

In addition, integrations with third-party payment vendors make it easy to manage entire payment ledgers, write-offs, and settlements. Insurers can also generate automatic invoices and demand letters, which can then be seamlessly sent to third parties.
Shorten recovery time and reduce claims leakage.

Connected Claims provides insurers with the following subrogation case management benefits:

- **Automatically identify potential subrogation opportunities.** Reduce missed subrogation by automatically triggering it through customizable, configurable rules.

- **Gain full visibility into claim recovery operations.** Unify and extend existing systems to deliver a single, 360-degree view of each claim in an actionable dashboard.

- **Improve subrogation process efficiency.** Make the subrogation process more efficient with strong workflow and case management capabilities to better support internal agents.

- **Easily track tasks and performance metrics for each case.** Enable adjusters and external legal/recovery teams to collaborate across multiple channels (email, phone, and WhatsApp) and create automated reminders to ensure timely follow up.

- **Dramatically reduce time and cost to implement.** Leverage the speed and power of the Appian Low-Code Automation Platform to stay agile.

Take control of the entire claims life cycle.

With Appian Connected Claims, you can go beyond subrogation case management and streamline each part of the claims life cycle, including the following:

- First notice of loss (FNOL)
- Fraud case management
- Claims operations and settlement
- Customer service
- Field inspections
- Process mining

---

Learn more at: [appian.com/connected-claims](http://appian.com/connected-claims)

Contact us at: [info@appian.com](mailto:info@appian.com)

Leaders in Insurance Trust Appian