

Agentic AI Solution for GL Claims

**Make
it
real.**



BUSINESS PROBLEM

General Liability insurance is highly litigated, with rising claim volumes, increasing bodily injury payouts, and escalating defense costs.

Loss exposure and severity are hard to assess due to missing or incorrect details, unclear third party involvement, and limited insight into long term medical or wage loss impacts, while even one misread coverage clause can trigger unintended defense or indemnity obligations.

These issues are worsened by late First Notice of Loss (FNOL), hidden litigation risk, fragmented documentation, and manual, reactive handling, leading to prolonged claim cycles and increased claims leakage.

SCOPE

Our Agentic Claims solution, powered by **Azure AI Foundry** and automated using the **Microsoft Power Platform**, is designed to enhance adjuster efficiency, preparedness, decision accuracy, and leakage reduction in the GL claims adjudication. It centers on operational excellence, smarter workflows, and improved adjuster enablement.

Addressing GL claims complexity with an Agentic AI driven approach

USE CASE

Agentic AI augment adjusters in making faster, better-informed decisions across complex GL claims. AI supports adjusters by **structuring and contextualizing claim information**, enabling **early loss exposure and severity assessment**, surfacing coverage and third-party implications, and **identifying potential litigation risk earlier** in the lifecycle. As claims evolve and new information flows in, AI continuously updates the claim view and supports proactive actions such as evidence readiness, early resolution, or escalation.

SOLUTION

The solution leverages a multi-agent Agentic AI architecture orchestrated through **Azure AI Foundry**, integrated with **Dynamics 365 Customer Service**, **Microsoft Fabric**, and enterprise content repositories. Specialized AI agents autonomously handle document ingestion, contextual claim structuring, indexing, investigation support, and continuous file preparation for claims and litigation. By synthesizing large volumes of unstructured data and referencing historical litigation patterns stored in **Microsoft Fabric**, Agentic AI strengthens coverage interpretation, improves loss assessment accuracy, and continuous litigation readiness. Using **Microsoft Power Automate** and **Power Apps**, workflows are orchestrated end-to-end—reducing manual effort while keeping adjusters firmly in control of final decisions.

IMPACT



Adjusters shift from administration execution to **strategic decision making**



Reduced cognitive overload allowing adjusters to **focus on oversight** and strategy



Lower claims leakage through stronger coverage and exposure clarity



Faster, more **predictable claims cycles** despite external litigation timelines



Improved litigation preparedness and more deliberate **resolution strategies**



Pain-points tend to be scattered across the GL claims workflow

PAIN POINTS

- Fragmented and unstructured information
- Massive doc and info overload
- Significant time spent on admin tasks
- Triage is based on incomplete/inconsistent FNOL narrative
- Reading 100+ pages of policy doc and mapping them to fact pattern
- Time consuming cross-references between facts, coverage triggers and exclusions
- Interpreting coverages, hidden litigation triggers (e.g. premise, operations or products)
- Multiple potentially responsible parties (owner, tenant, contractor, sub-contractor)
- Loss assessment and severity is ongoing and iterative, as new docs keeps arriving
- Building chronology of events and severity is extremely manual
- Adjuster requests docs by email, waits for days
- Investigation budgets are limited; manual reviews can't detect every anomaly
- Adjuster drafts letters and emails manually
- Claim files needs to be updated continuously, as per developments in loss assessment
- File preparation is manual
- Preparing defense instructions, legal summaries, and mediation briefs is time-intensive
- Legal file needs to updated continuously, as exposure, evidence and strategy evolve
- Inconsistent adjudication and knowledge gaps

FNOL/ TRIAGE & ASSIGNMENT

COVERAGE VERIFICATION

LOSS ASSESSMENT

FILE PREPARATION

LITIGATION MANAGEMENT

ADJUDICATION

IMPACT

- Incomplete/incorrect info creates delay in downstream claims process
- Claim intake is reactive and compressed
- Incomplete details remains status quo until it comes under adjuster's attention
- Mis-assignment to the wrong adjuster skill tier; High-risk claims may sit in a generic queue instead of being escalated
- Risk of missing key coverage details can potentially lead to claims leakage
- Coverage decisions become bottleneck for everything else
- Time consumed in coverage interpretation delays strategy alignment for defense counsel
- Increased legal spend
- Difficult to apply internal playbooks and best practices across the workforce
- Weak evidence quality (CCTV and logs often overwritten)
- Lost early resolution opportunity
- Manual, time-intensive claim file preparation
- Counsel briefing takes time
- Gaps discovered late
- Reactive litigation readiness
- Hard to see bigger picture across dozens of litigated files
- Higher defense and administrative cost
- Hard to quantify litigation risk systematically
- Two similar claims with very different outcomes
- Senior adjuster expertise is not reusable at scale
- Lessons learned identified too late

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Capgemini is an AI-powered global business and technology transformation partner, delivering tangible business value. We imagine the future of organizations and make it real with AI, technology and people. With our strong heritage of nearly 60 years, we are a responsible and diverse group of 420,000 team members in more than 50 countries. We deliver end-to-end services and solutions with our deep industry expertise and strong partner ecosystem, leveraging our capabilities across strategy, technology, design, engineering and business operations. The Group reported 2024 global revenues of €22.1 billion.

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