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Insurtech Claims Automation and Robo-Advice Training Course

22 – 26 February 2027
Vienna

Insurtech Claims Automation and Robo-Advice Training Course

Ref: 2471_93542 **Date:** 22 – 26 February 2027 **Location:** Vienna **Fees:** 5900 GBP

Insurtech Claims Automation and Robo-Advice is a 1-week training course for claims, distribution and wealth platform managers at insurers, asset managers and other non-bank financial firms, built around a non-bank digital operating model sketch. Policyholders and investors now expect instant claim decisions and low-cost advice through apps and partner channels, so firms must redesign how work flows between people, rules engines and partners. Jupiter Prime Training delivers this course on Insurtech Claims Automation and Robo-Advice.

Why Insurtech Claims Automation and Robo-Advice Matters Now

Three forces shape this field. Customers compare every claim and every investment journey with the smoothest app they use. Distribution is moving to aggregators, embedded insurance and partner platforms that own the customer screen. Supervisors expect automated claim and advice decisions to stay explainable and suitable. Firms that handle this well settle simple claims in minutes and serve smaller investors profitably; firms that handle it badly pile cost on legacy systems and face conduct complaints. The course rests on general principles for suitability, fair customer treatment and model oversight.

Who Gains Most from Insurtech Claims Automation and Robo-Advice

- Claims operations leads responsible for intake, triage, settlement and fraud referral
- Distribution managers responsible for broker, aggregator and embedded insurance channels
- Wealth platform managers responsible for digital onboarding, risk profiling and model portfolios
- Partnership managers responsible for selecting and overseeing insurtech and wealthtech vendors
- Change managers responsible for operating model, process and capability redesign

A claims, distribution and wealth trio gains most when attending together, since the sketch links their journeys.

Insurtech Claims Automation and Robo-Advice Capabilities

Participants decide which claim and advice steps machines, people or partners should own.

- Assess straight-through claim eligibility rules and fraud triggers — claims director approving automation scope
- Design a digital risk-profiling questionnaire and model portfolio mapping — investment committee signing off robo-advice
- Weigh build, buy and partner options for claims and advice engines — chief operating officer funding choices
- Specify partner integration, data sharing and service levels — partnership board approving a platform deal
- Build human override and complaint paths for automated decisions — conduct and customer outcome owners
- Communicate a target operating model in one page — executive committee setting transformation priorities

Key Insurtech Claims Automation and Robo-Advice Terms

- Straight-through claim processing — settling a claim from notification to payment without manual handling, under preset limits.
- First notice of loss — the first report of an insured event, often captured through an app.
- Robo-advice — automated advice that profiles a client online and recommends a model portfolio.
- Risk-profiling questionnaire — questions measuring a client's capacity and tolerance for investment loss.
- Embedded insurance — cover sold inside another firm's purchase journey, such as travel checkout.
- Operating model sketch — a one-page view of channels, processes, technology, partners and people behind a strategy.

Insurtech Claims Automation and Robo-Advice Day by Day

Day 1: Forces Reshaping Insurers and Asset Managers

- Customer Journey Benchmarking — Where Claimants and Investors Drop Out
- Insurtech and Wealthtech Landscape Map — Which Entrants Threaten Which Margins
- Value Chain Unbundling — Which Activities a Non-Bank Firm Keeps
- Conduct and Suitability Expectations — Limits on Automated Customer Decisions
- Legacy Policy Administration Constraints — Realistic Pace of Digital Change

Day 2: Automating the Claims Journey

- Digital First Notice of Loss Design — Capturing Clean Claim Data Early
- Claim Triage and Segmentation Rules — Routing Simple and Complex Claims
- Image and Document Recognition — Speeding Motor and Property Assessment
- Fraud Scoring and Referral Thresholds — Balancing Leakage Against Customer Friction
- Straight-Through Settlement Limits — Setting Authority for Automatic Payment

Day 3: Robo-Advice and Digital Wealth Distribution

- Digital Onboarding and Identity Checks — Reducing Abandonment for New Investors
- Risk-Profiling Questionnaire Design — Matching Clients to Suitable Portfolios
- Model Portfolio and Rebalancing Rules — Keeping Allocations Within Mandate
- Hybrid Advice Escalation — When a Human Adviser Steps In
- Algorithm Oversight and Testing — Evidence That Recommendations Stay Suitable

Day 4: Platform Partnerships and Embedded Channels

- Embedded Insurance Partner Models — Sharing Revenue, Data and Customer Ownership
- Aggregator and Marketplace Economics — Pricing Pressure and Retention Trade-Offs
- Vendor Due Diligence Scorecard — Choosing Claims and Advice Technology Partners
- Application Programming Interface Contracts — Defining Data Flows and Service Levels
- Partner Exit and Continuity Planning — Protecting Customers if Vendors Fail

Day 5: Practising the Non-Bank Digital Operating Model Sketch

- Claims Automation Scope Mapping — Applying Triage Rules to a Sample Book
- Robo-Advice Journey Walkthrough — Testing Profiling Against Client Cases
- Partner Portfolio Review — Applying the Scorecard to Current Vendors
- Capability and Role Shift Planning — Moving Staff From Processing to Exceptions
- Non-Bank Digital Operating Model Sketch — Presenting Priorities to Executives

Applying Insurtech Claims Automation and Robo-Advice After the Course

- Review triage rules on one claims line, marking which claim types could settle straight through.
- Test the risk-profiling questionnaire against five client cases and record unsuitable portfolio matches.

Insurtech Claims Automation and Robo-Advice Questions FAQ

What is Insurtech Claims Automation and Robo-Advice and why does it matter now?

It is the use of rules engines, data and partners to settle claims and give investment advice digitally. It matters now because customers expect instant service and partner platforms increasingly control distribution, so slower firms lose both margin and customers.

Which roles gain most from Insurtech Claims Automation and Robo-Advice?

Claims, distribution, wealth platform and partnership managers gain most. They decide which steps to automate, which partners to trust and how staff roles change.

How does Insurtech Claims Automation and Robo-Advice differ from a general fintech course?

It focuses on insurers and asset managers rather than banks. A general fintech course surveys payments, lending and digital currencies; here the focus is claim settlement, investor profiling and embedded insurance.

What do you bring back from Insurtech Claims Automation and Robo-Advice?

You bring back a one-page operating model for your firm. It shows which steps to automate, which partners to use and how human oversight works.

Insurtech Claims Automation and Robo-Advice: The Way Forward

The non-bank digital operating model sketch first informs which claims line or advice journey to automate next. Claims directors, wealth heads and the chief operating officer use it to agree funding and partner choices. After first use, revisit the balance between automation and human judgement, as complaint and fraud data show where limits were set too loosely.