

## Insurance Claims Analysis Using Power BI

*Amsterdam (Netherlands)*

*13 - 17 July 2026*

UK Training

# PARTNER



## Insurance Claims Analysis Using Power BI

Code: IT32 From: 13 - 17 July 2026 City: Amsterdam (Netherlands) Fees: 5900 Pound

### Introduction

The Insurance Claims Analysis Using Power BI course is designed to help participants transform insurance claims data into interactive reports and dashboards that support performance monitoring, cost analysis, fraud indicator detection, and operational decision-making. Claims are one of the most critical areas in insurance companies because they directly affect costs, customer satisfaction, processing efficiency, risk management, and fraud exposure.

This course focuses on analyzing the full claims lifecycle, from claim registration to settlement or closure. It covers claims data integration and preparation, claims lifecycle analysis, claims key performance indicator monitoring, fraud detection in claims, claims cost and loss analysis, claims trend and pattern analysis, operational claims dashboards, customer and policyholder analysis, risk indicators, claims forecasting, claims processing performance analysis, executive claims reporting, and real insurance claims case studies.

The course follows a clear and progressive structure. It begins with an introduction to insurance claims analytics, then moves into data preparation, claims lifecycle analysis, performance monitoring, cost and loss analysis, fraud detection, customer and policyholder analysis, forecasting, executive reporting, and practical case studies.

### Course Objectives

By the end of this course, participants will be able to:

- Understand the role of Power BI in insurance claims analysis and interactive reporting.
- Identify claims data sources and prepare them for analysis.
- Integrate claims data from multiple sources into a structured reporting model.
- Analyze the claims lifecycle from registration to settlement or closure.
- Build reports for open, closed, delayed, high-value, and under-review claims.
- Design claims key performance indicators to measure processing efficiency and service quality.
- Analyze claims costs, loss ratios, claim severity, and settlement trends.
- Detect fraud indicators through repeated patterns, unusual values, and exception analysis.
- Build operational claims dashboards for daily claims monitoring.
- Analyze customer and policyholder data and connect it with claims behavior.
- Use risk indicators and forecasting to support claims planning and control.
- Evaluate claims processing performance in terms of speed, accuracy, cost, and compliance.
- Prepare executive claims reports for senior management and decision-makers.
- Apply the full workflow through real insurance claims case studies.

### Course Outlines

#### Day 1: Introduction to Insurance Claims Analytics and Data Preparation

- Introduction to insurance claims analytics and its role in improving performance.



- Understanding the claims lifecycle and its connection with cost, risk, and customer satisfaction.
- Identifying claims data sources, including policy data, customer data, settlements, payments, and service providers.
- Integrating claims data from multiple sources into a structured analytical model.
- Cleaning claims data by handling duplicates, missing values, and operational errors.
- Practical application on preparing a claims dataset for reporting and dashboard development.

## Day 2: Claims Lifecycle Analysis and KPI Monitoring

- Analyzing claim stages from opening to review, assessment, settlement, and closure.
- Building reports for open, closed, delayed, and under-review claims.
- Measuring claims processing time, average settlement time, and delay rates.
- Designing claims key performance indicators such as claim count, closure rate, average claim cost, and delayed claims ratio.
- Monitoring the performance of claims teams and service providers through clear indicators.
- Practical application on building a claims key performance indicator monitoring dashboard.

## Day 3: Claims Cost, Loss Analysis, and Fraud Detection

- Analyzing claims cost by claim type, product, region, channel, and claim status.
- Measuring loss ratios and identifying factors that increase claims costs.
- Analyzing high-value claims, repeated claims, and unusual cases.
- Identifying fraud indicators through behavioral patterns, abnormal values, and exception analysis.
- Designing fraud detection dashboards that highlight high-risk cases and suspicious activities.
- Practical application on creating a dashboard that combines claims cost analysis with fraud indicators.

## Day 4: Customer, Policyholder, Risk Indicators, and Claims Forecasting

- Analyzing customer and policyholder data and linking it with claims behavior.
- Reviewing claims by customer segment, policy type, coverage period, and service channel.
- Analyzing claims trends and time-based patterns across costs, settlements, and volumes.
- Using forecasting to understand future claims movement and expected operational pressure periods.
- Preparing risk indicators to identify portfolios or customer segments with higher claims exposure.
- Practical application on building an analytical report connecting customers, policies, risks, and claims trends.

## Day 5: Operational Dashboards, Executive Reporting, and Real Case Studies

- Designing operational claims dashboards for daily claims monitoring and processing stages.
- Preparing executive claims reports covering claims indicators, costs, risks, and trends.
- Measuring claims processing performance in terms of speed, accuracy, compliance, and service cost.
- Using interactive data visualization to support claims teams and senior management.
- Reviewing dashboard quality in terms of data accuracy, clarity, usability, and decision value.
- Real insurance claims case study covering claims lifecycle, key performance indicators, fraud detection, cost analysis, customer analysis, risk indicators, forecasting, and executive reporting.

## Why Attend this Course: Wins & Losses!

- Gain practical knowledge of using Power BI for insurance claims analysis.

- Improve the ability to integrate and prepare claims data from multiple sources.
- Build clear reports that track the claims lifecycle from registration to closure.
- Design key performance indicators that measure claims processing efficiency.
- Analyze claims costs and loss ratios with greater accuracy.
- Detect unusual patterns and fraud indicators in claims data.
- Improve monitoring of delayed, high-value, and repeated claims.
- Connect customer and policyholder data with claims behavior and risk indicators.
- Use forecasting and trend analysis to support operational planning.
- Prepare operational dashboards that support daily claims management.
- Build executive reports that help senior management make faster decisions.
- Apply learning through real insurance claims case studies.

## Conclusion

The Insurance Claims Analysis Using Power BI course provides a practical framework for building specialized reports and dashboards for insurance claims management and analysis. It covers the key areas that connect claims data, claims lifecycle, key performance indicators, costs, losses, fraud indicators, customer and policyholder data, forecasting, and executive reporting.

The program follows a clear training sequence. It begins with understanding claims data and preparing it for analysis, then moves into claims lifecycle analysis and key performance indicator monitoring. It then focuses on cost and loss analysis and fraud detection, before expanding into customer and policyholder analysis, forecasting, and risk indicators. The final day brings the content together through operational dashboards, executive reports, and real insurance claims case studies.

By the end of the course, participants will understand how to use Power BI to transform claims data into practical insights that improve processing speed, reduce costs, monitor risks, strengthen fraud detection, and improve reporting quality. The course supports claims teams and senior management through interactive dashboards built on clear data and accurate indicators.



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