

Workflow review

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Staff claims, end to end.

One workflow mapped, its breakpoints named, and the first fix worth building.

PREPARED FOR Example Bhd	WORKFLOW REVIEWED Monthly staff expense claims	REVIEW DATE April 3, 2026	NOTE ISSUED April 6, 2026
PROCESS OWNER Finance lead and payroll clerk	SESSION 45 minutes, remote	FEE RM 1,999	CREDIT WINDOW Creditable 60 days

This note records how one workflow runs today, where it loses time and accuracy, and the first block stack worth building. It is yours to act on: take it to your IT team, your accountant, another vendor, or back to us. The figures below are composite ranges drawn from comparable engagements, not measured from your records.

THE VERDICT, UP FRONT

BUILD NOW

This workflow repeats every cycle, the cost is concentrated and measurable, and the first four blocks are low-difficulty. We recommend building a single claims track run as one pipeline from submission to payroll export to resolve duplicate data entry and manual checking.

This crunch repeats on the 25th of every month. Nothing below requires a redesign, only building what already runs.

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01 • MAP

How claims move through today.

A claim begins as a phone photo and a few WhatsApp images, and ends as a row your clerk re-keys into a payroll spreadsheet. Five systems touch it and none of them talk to each other. The flow below is what your team described in the session.

STAGE	WHAT HAPPENS NOW	WHERE IT LIVES
Submit	Claim form, receipts, and mileage arrive across separate messages, often on different days.	WhatsApp, email, paper
Stitch	The clerk assembles one submission from four messages and types receipt totals by hand.	Shared inbox, spreadsheet
Check	Totals are re-keyed and eyeballed. Currencies are mixed (MYR/SGD). GST lines are sometimes missing.	Spreadsheet
Apply policy	Caps and evidence rules are enforced when the reviewer remembers them.	Reviewer's judgement
Approve	Approvals sit with one person. There is no surfaced queue and no record of what is stuck.	Email threads
Export	The spreadsheet is reformatted each cycle to match payroll column order before the 25th.	Manual CSV, payroll system

Volume signal. Your team described roughly 120 to 180 claims a month across three entities, with the load concentrated in the four working days before payroll cut-off. That concentration, not the per-claim effort, is the real cost: it drives the cut-off crunch.

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02 ▪ DIAGNOSIS

Where time and accuracy are lost.

Of the eight patterns we look for, four showed up clearly in this workflow. They are ranked below by impact against effort to fix. The top two are where the first build should focus.

#	BREAKPOINT	WHAT IT COSTS	FIX DIFFICULTY
1	Duplicate data entry Receipt totals typed into a spreadsheet by hand, then re-checked.	6 to 10 hrs per cycle. Re-key errors reach payroll.	■ □ □ Low Extraction and matching are well-mapped.
2	Manual checking Verification by eye. Errors are caught at submission, not at source.	2 cycles typical lag before a wrong payment surfaces as a clawback.	■ □ □ Low Rule-based and deterministic. Needs your policy written down once.
3	Inconsistent policy enforcement Caps applied only when remembered.	1 week typical time to resolve a resulting dispute. Overspend is quiet and cumulative.	■ ■ □ Medium Depends on chase and export automation.
4	Cut-off crunch Reformatting and chasing compressed into four days. Downstream of breakpoints 1 and 2, not a separate problem.	4 days of overtime pressure every cycle. Missed claims roll to the next month.	■ ■ □ Medium Resolves as 1 and 2 are fixed.

Breakpoints 1 and 2 alone cost roughly 70 to 120 clerk-hours a year at current volume, before counting the clawbacks, disputes, and overtime the other two breakpoints add on top.

None of this is carelessness. It is what happens when claims are processed by hand in a tool that was never built for it. The structure is the fix, not more discipline.

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03 ■ RECOMMENDATION

The first block stack to build.

Recommendation: build now. This workflow repeats every cycle, the cost is concentrated and measurable, and the first four blocks are low-difficulty. We recommend a single claims track built from six standard blocks, run as one pipeline from submission to payroll export.

Claims processing is one of the workflows we run most often. The stack below is close to what we build on day one for comparable claim volumes, not a design exercise starting from a blank page.

BLOCK	WHAT WE DO IN YOUR WORKFLOW	WHAT YOUR TEAM STILL OWNS
Collect	We pull submissions from WhatsApp, the shared inbox, and paper-scan upload into one queue.	The channels we listen to and the monthly cut-off date.
Read	We lift line items, totals, dates, currencies, and tax components from forms and receipts.	Approving the field map and claim categories on day one.
Verify	We match each line to its receipt, convert currency, apply caps and evidence rules, and flag variances.	The policy rules themselves and any annual updates.
Chase	We follow up missing receipts on the claimant's own channel and track them against cut-off.	The escalation point when a claimant misses a second reminder.
Review	We hand exceptions and high-value claims to the named approver with the images, the rule that fired, and a recommended decision.	The approval decision and any claimant communication.
Deliver	We write approved claims into payroll in the exact column order, with a per-claim audit trail.	Releasing payroll once the export lands.

What you receive, once it runs

- A running claims queue: every submission, its claimant, its state, and open exceptions.
- A policy-exception report: caps exceeded, missing receipts, duplicates, and unusual amounts, each with the rule that fired and the source evidence attached.
- Receipt-matching evidence per line: the claim row, the receipt image, the extracted total, and any variance.
- A payroll-ready export in your system's column order and date convention, delivered before each cut-off.

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- A monthly variance and audit report: claims processed, exceptions raised, average submission-to-payment time, and the policy patterns to revisit.

Indicative scope

PHASE	DURATION	WHAT IT COVERS
Build	6 to 10 weeks	Channel connections, policy-rule map, receipt-extraction tuning, approver routing, payroll-export format, and a parallel run against one full live cycle before go-live.
Operate	Monthly retainer	Daily queue, a weekly exception review with your reviewer, monthly variance report and payroll export, integration maintenance, policy-rule tuning, and exception handling. Your team's ongoing time cost is the weekly review, not day-to-day processing.

The parallel run is the point where your team sees the stack process a full live cycle alongside your existing process, before payroll depends on it. Nothing goes live until that cycle matches what your clerk produced by hand.

Final scope, duration, and fee are confirmed at a build quote against your claim volume, channel count, and payroll integration footprint. No price is committed in this note. If implementation starts within 60 days of your review, the RM 1,999 review fee is credited in full.

04 ▪ ONWARDS

What's next?

1. Engage Scellus to build and operate the claims stack. We write a fixed scope, fee, and timeline from this note for your team to approve, then build and run it with you. The RM 1,999 review fee is credited in full if you start within 60 days of this note.
2. Take this note to another vendor. It is written to be acted on without us, though a new vendor will need time to rebuild the mapping captured here before they can quote against it.
3. Handle the first fixes internally. The duplicate-entry and manual-checking breakpoints are the place to start, and the block table above documents the field-level detail your team needs to build them.

Compliance note. Claim data is staff data. The brief, session notes, and this map are handled under PDPA 2010 and the 2024 Amendment, on Malaysia-resident infrastructure, with no cross-border transfer of client-identifying material. Receipt images, IC numbers on medical claims, and bank-account fields are treated as the sensitive layer.

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