# Improving CX with analytics – Case automated claims processing in car insurance

Ilkka Huotelin 31.1.2017 CXPA Switzerland Event, Zürich



# Agenda

- Background
   Challenge
- 2. Requirements
- 3. Solution
- 4. Outcome & Next Steps





## Background & Challenge

#### Company

- A European multi-national insurance company
- Over 3 million customers

#### Challenge

- 1. Traffic insurance products are very similar with little differentiation
- 2. Needed to stand out from the competition
- 3. Customers dissatisfied with unpredictable processing times
- 4. Constant cost pressure

#### Goal

- 1. Have the highest customer satisfaction in the market
- 2. Decided to be the easiest insurance company to deal with
- 3. Promise: process at least 70% of claims within 24 hours and pay immediately after



## Requirements

- 1. Easy to use for the customers
- 2. Keep the customers informed
- 3. Process clear cases immediately
- 4. Concentrate human resource on the unclear or suspicious cases
- 5. Identify claims that are:
  - a) Not covered by customer's policy
  - b) Incomplete
  - c) Unclear
  - d) Disputed
  - e) Untypical
  - f) Fraud



## Solution

- New digital customer journey for the car insurance claims
- On-line input by customers
- Automated processing (except specific cases)
  - 1. Rules based
  - 2. Machine learning
- Automated payment or permission to invoice (for garages, rental companies ...)





### Process

Input

- The customer fills in an on-line claims form
- Sanity checks on inputs

Filtering

- Rules-based decision engine
- Check against the policy and deductibles

Analytics

- Supervised machine learning (Black Box)
- Outlier detection and segmentation

Clear cases

\* Flagged case loop

Automatic payment

Manual processing



## Model

- The model is trained by previous cases flagged by claims processors
- Clear (can be paid automatically) "1"
- Flagged (needs to be checked manually) "0"
- Output is a propensity number between 0 and 1
- Setting the threshold is an optimisation problem between:
  - False positives someone is paid unnecessarily
  - False negatives additional resources are needed and lower customer satisfaction
- To monitor model accuracy some clear cases are randomly selected for manual checking
- The results of manual checking are fed back to the model



## Outcome & Next Steps

- 90% (previously 73%) of customers either satisfied or very satisfied with the automated claim process
- The insurance company wants to extend the new customer journey to cover more insurance products

#### Improvement areas and the next steps:

Improve the touchpoints and the interactions

- 1. Improve the design of the on-line claim form
- 2. Import the customer data to the form automatically from the CRM
- 3. Add more automatic communications channels for updating the customers on the status of their claims



# **Contact Information**

Do you need more information? We are glad to continue the conversation.

#### Zürich Office:

Hungerbergstrasse 27 8046 Zürich Switzerland

T: +41 78 884 6612

E: <u>info@becustomersmart.com</u>
W: www.becustomersmart.com

#### **Geneva Office:**

Plateau de Champel 20 1206 Geneva Switzerland

T: +41 79 741 9577

E: info@becustomersmart.com

W: www.becustomersmart.com

