later by this months.



AI for Health Insurance

COO of AXA Partners Asia Simon Lee

September 2020 - Taipei

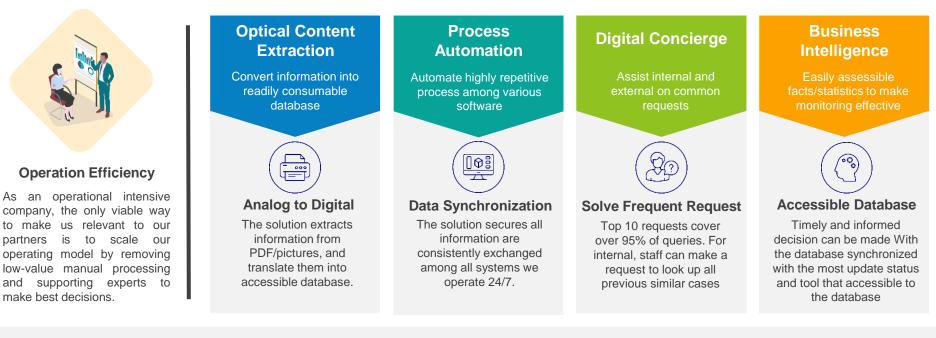
Segregated, overlapping and manual process

Core driver on non-scalable operation and claim leakage



Operation efficiency enhancement is the fundamental of DTI

Majority of the our operation can be low-value added, repetitive, distractive, and prone to human error



Operating model enabled by DTI foundation

Incoming documents will be converted into database and entered into system automatically. Process Automation is triggered to set everything ready for adjudicator to review the case. Digital concierge can help agents/members/providers to follow up the status and provide additional documents. It also helps answer internal staff's requests. Bl enhances the presentation of facts or statistics for internal/external purposes. In particular, we no longer need to make blind decision.



Result realization: Automate highly repetitive process among core systems

WHY

For **Operation**:

- Most tasks are repetitive, manual, low risk.
- Inputs come from various sources (email, drop files, upload) and in various format (different headers, formats)

For Business:

• Not getting service standard on-par with the bar in the industry.



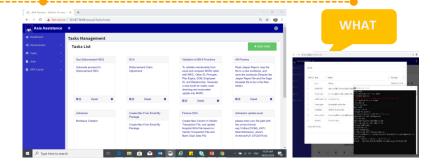
HOW

- Business first, data, AI as support. All solutions are validated by BU leaders.
- Focus on low hanging fruit with partial data team.
- Rely on internal resources to build tailor-made solution that cannot be replicated by competitors
- Utilize state-of-the-art AI and data technology to get maximum efficiency

PROBLEM

received ad-hoc, repetitive incoming request via email, drop files and web site upload in various format. Agent driven manual process are causing 10% of omissions error, 80% of delay and 10% of wrong update.

riven rocess Ising of delay Vrong te





Result realization: Liberate adjudicators from administrative routines

WHY

For Operation:

- Inputs come in paper/PDF/image format.
- Majority of these information are not captured / Captured by manual read.

For Business:

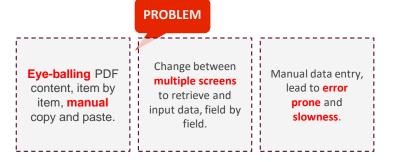
• Slow data capture, not getting service standard on-par with the bar in the industry.

For Clients:

• More data, better analysis to understanding better the risk, members' profile, happy customers, and beneficial business partnership with AXA Partnership.

For members:

 More data, better analysis to suggest the best medical advice and service when needed most.





HOW

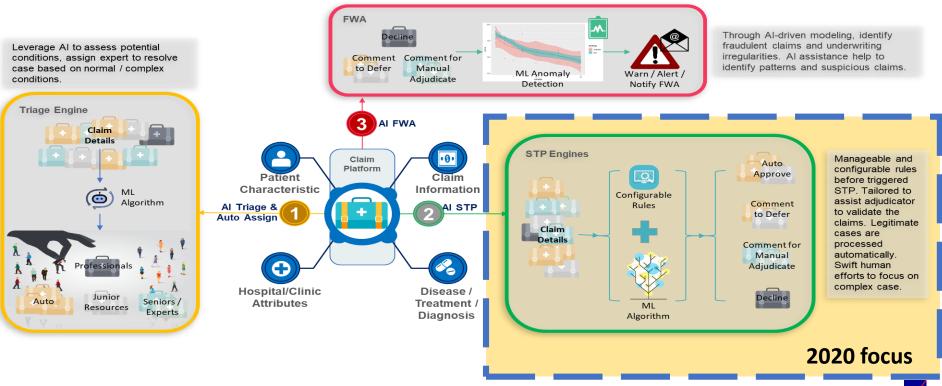
- Business first, data, AI as support. All solutions are validated by BU leaders.
- Focus on low hanging fruit with partial data team.
- Rely on internal resources to build tailor-made solution that cannot be replicated by competitors
- Utilize state-of-the-art AI and data technology to get maximum efficiency

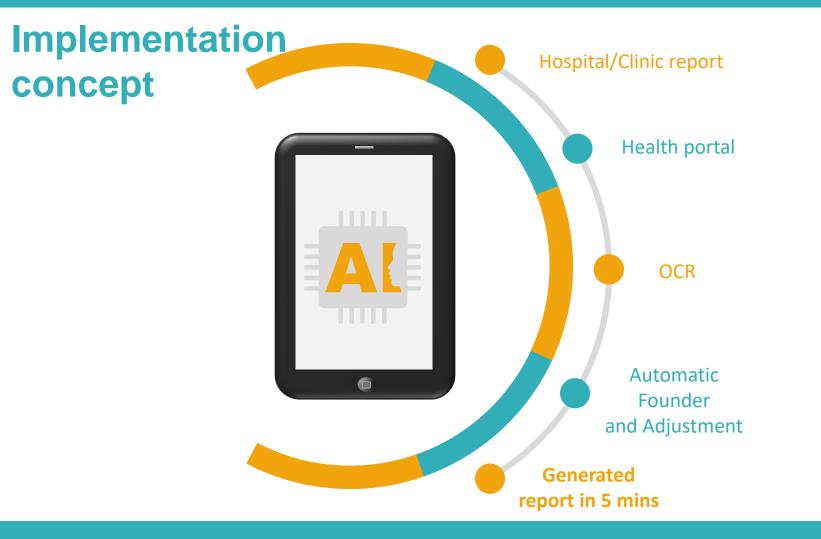




AXA







Segregated, overlapping and manual process Core driver on non-scalable operation and claim leakage



reasonable and customary cost

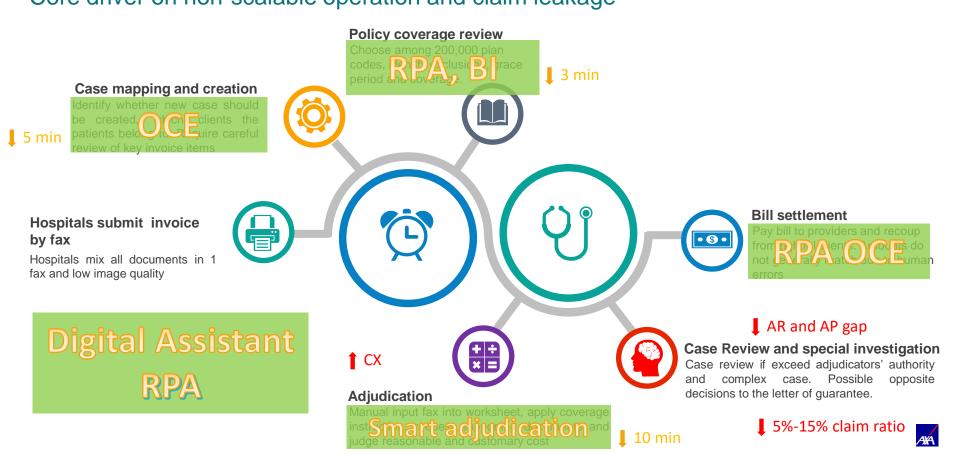
AXA

Segregated, overlapping and manual process

Core driver on non-scalable operation and claim leakage



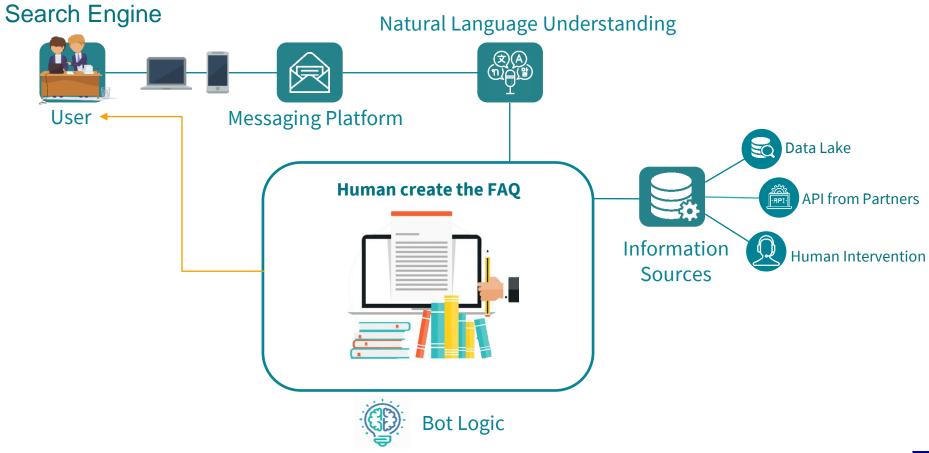
Segregated, overlapping and manual process Core driver on non-scalable operation and claim leakage



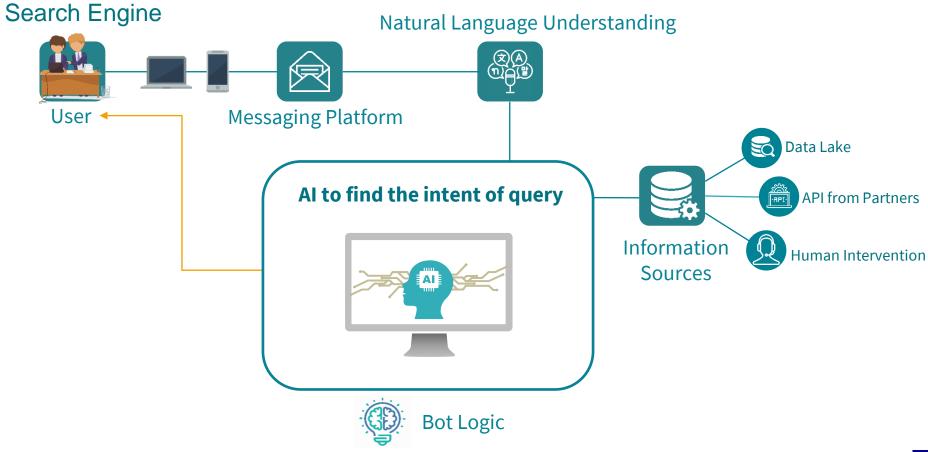


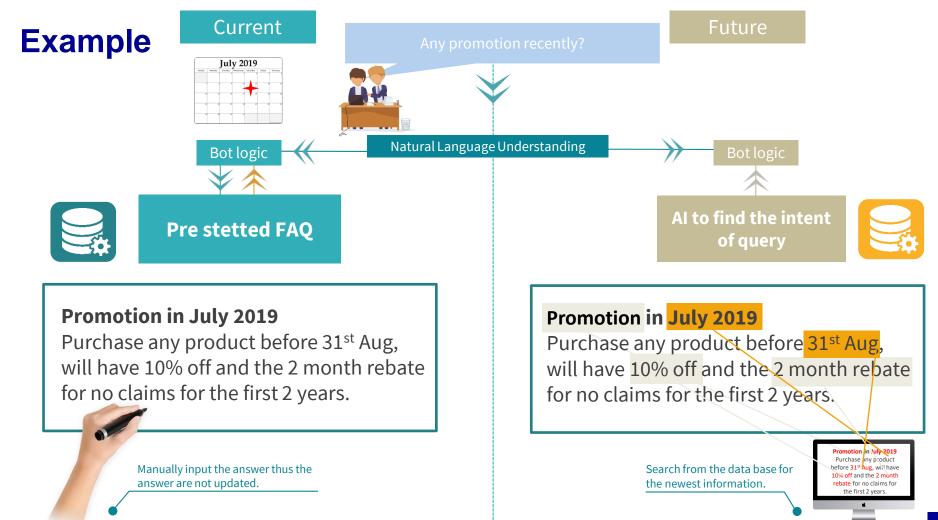
Al driven digital assistant

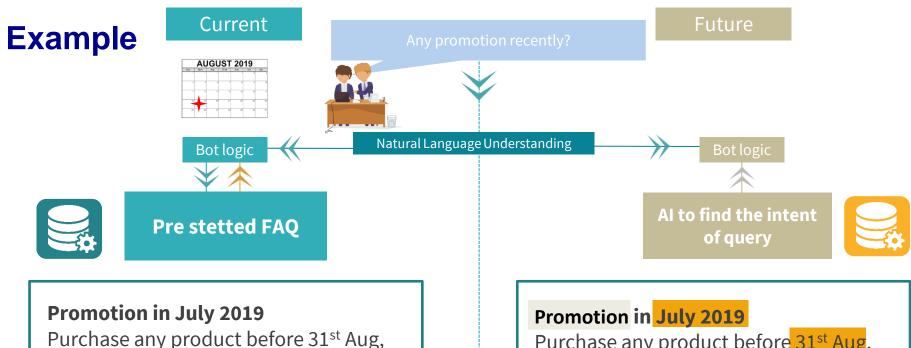
Knowledge Base



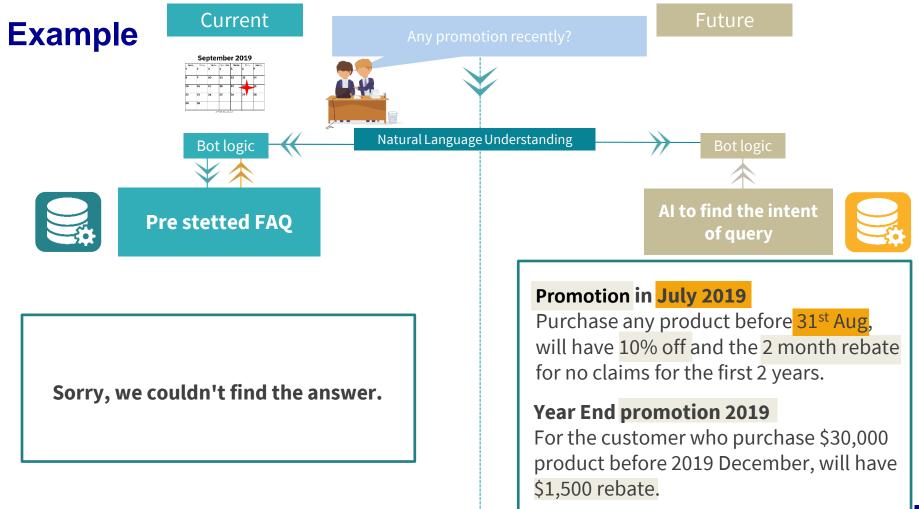
Knowledge Base







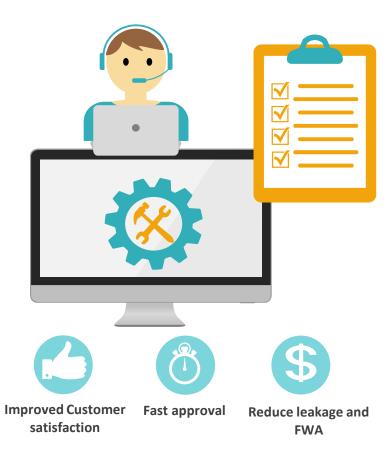
will have 10% off and the 2 month rebate for no claims for the first 2 years. Purchase any product before 31st Aug, will have 10% off and the 2 month rebate for no claims for the first 2 years.





Al driven underwriting

Data driven automatic underwriting and claim assessment



Data science to drive the orchestration among system, business rules and experts

Most of the policies are underwritten and claims are approved without contest. Underwriters and adjudicators nevertheless need to review the full cases manually. The time spent on those case essentially takes away the time available to evaluate complex case, leading to leakages. Data science identifies cases that are **safe for automatic approval, triage the remaining to the right personnel, provides messages to guide experts to effective investigation**. The main-stream technology of deducing risk from history has proven not successful in underwriting and claims. Below is the core features of the proposed technology

Anomaly detection

Single out cases in question by spotting the deviation from normal pattern. E.g., claims from different cities. Through data science, much more convoluted patterns can be extracted.

Real-time self learning

Insurance exhibits strong seasonality, epidemic, trends. Self-learning data science model reduce the potential gap of timeliness of re-training

Al driven triaging

There is in general strong variance among adjudicators and underwriters. Al mapping between cases and experts will maximize the business values of individuals. A potential of 1-3% of claims ratio saving can result

Network analysis

Analyzing the aggregated patterns at providers, facilities, treatments, diagnosis to establish evidence to FWA. E.g., A clinic coded the cosmetic treatment as medical necessary



Thank You