

FORCE for Travel Insurers

DETECT FRAUD, REDUCE FALSE POSITIVES AND IMPROVE INVESTIGATOR EFFICIENCY

Travel insurance fraud is more widespread than ever, and takes many forms. It represents a growing cost in terms of time and money to travel insurance carriers. This threat consists of both opportunistic fraud based on fictitious or exaggerated claims, and the growing trend of sophisticated schemes perpetrated by professional fraudsters.

Unfortunately, due to the high-volume, low complexity nature of travel insurance claims, most carriers do not have the resources or the technology to detect and investigate suspected fraudulent claims effectively.

Even when the resources are available, manual fraud detection can be a challenge if it slows down the claims settlement process. In the highly competitive travel insurance industry, speed of claims settlement can be a key differentiator.

Travel insurers need to quickly analyze a growing amount of structured and unstructured data, such as images and scanned documents, to immediately detect suspicious activity and determine the legitimacy of a claim. Fortunately, the emergence of artificial intelligence (AI) is helping insurers in the fight against travel insurance fraud by detecting suspicious activity quickly and accurately.

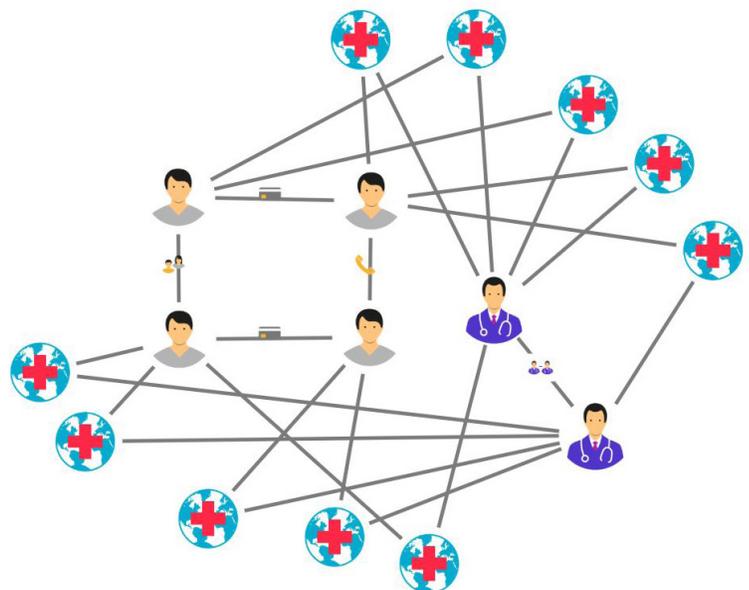
Force is the only AI-native, SaaS-based, solution designed to quickly and accurately detect fraud for the global travel insurance industry.

KEY BENEFITS:

- Identify more fraud cases
- Superior network provider fraud detection
- Reduce fraud losses
- Fewer false positives and negatives
- Improved investigator efficiency
- Faster path to ROI with SaaS deployment
- Continually updated fraud models and other enhancements
- Deep insurance data science expertise

FORCE FOR TRAVEL INSURERS DELIVERS:

- Hundreds of travel insurance-specific fraud scenarios and data models
- Prioritized and actionable alerts
- Intuitive user interface and network link visualization tool
- Easy integration with existing claims platforms
- SaaS deployment model



Force for Travel Insurers effectively identifies individual and network fraud suspicions

Find more fraud with FORCE

Using a unique approach that combines sophisticated AI and data science expertise, Force replicates the deductive reasoning of an insurer's best investigators and fraud handlers. The solution applies this reasoning capacity at scale on all claims for increased accuracy and more informed investigations.

AI-NATIVE DECISION ENGINE

Force scores each claim against an evolving library of hundreds of travel insurance fraud scenarios to detect claims matching fraud patterns. Force then applies a range of AI techniques to each claim, including:

- Automatic anomaly detection validated by human expertise
- Algorithms that use "privileged learning" provided by fraud handlers claims classifications
- Natural language processing (NLP) of text variables

THIRD-PARTY AND UNSTRUCTURED DATA ANALYSIS

Force is able to analyze a range of structured and unstructured data — including scanned documents, images and medical documents — along with external data sources such as weather information and flight delays to uncover fraudulent activities that would otherwise go undetected.

DATA CLEANSING AND ENTITY RESOLUTION

Force consolidates all relevant claims data using embedded data quality routines and travel insurance-specific data models to ensure greater data accuracy. Force denoising algorithms cleanse the data and reconstruct entities to identify hidden individuals.

NETWORK LINK VISUALIZATION

Force AI models identify correlations within the insurer's full data set, build and connect the "social networks" of related entities, and detect and extract only the most highly suspicious "sub-networks" within the larger networks.

DEEP INSIGHT INTO FRAUD SUSPICIONS

Force provides investigators with greater insights into fraudulent activity by providing them with simple reasons as to why a transaction or entity is suspect. This simplifies and accelerates the triage and investigative processes, enabling investigators to focus on cases most likely to yield the highest return.

ACTIONABLE, SPECIFIC ALERTS

Force provides prioritized, scored claim alerts and fraud network alerts to claims handlers and SIU investigators. Teams can easily view and manage fraud scenarios and indicators, along with third-party data, maps, and network visualizations in an intuitive interface.

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Research found that
5% of claimants invented
their claims, while 15%
exaggerated the value
of their claims.
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Direct Line Travel Insurance (UK)

Applying Force AI-native technology to the claims process can quickly and significantly increase the discovery of suspicious activities. This enables insurers to prevent fraudulent claims from being paid.

Learn more about Force AI-native
fraud detection at [shift-technology.com](https://www.shift-technology.com)

About Shift

Shift Technology delivers the only AI-native fraud detection and claims automation solutions built specifically for the global insurance industry. Our SaaS solutions identify individual and network fraud with double the accuracy of competing offerings, and provide contextual guidance to help insurers achieve faster, more accurate claim resolutions. Shift has analyzed hundreds of millions of claims to date, and was named by CB Insights to the 2018 Global AI Top 100. For more information please visit www.shift-technology.com.