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Process Automation with Semantic Text Analytics



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About Us and Myself

Richard Forster

- PhD in Computational Linguistics, Zurich University
- 15 years of in-depth experience in all processes, tools and strategies related to language, text, retrieval and publications
- Passionate about chess and member of the Swiss national team for >20 years





Wabion in Olten

- Head Semantics & Cognitive Technologies
- Leading CH integration partner for Google, Fusion and Expert System
- Mission: help our customers achieve true digital transformation
- Customers: Zurich Insurances, AXA, Nestlé, Tamedia, Migros...



About Cogito







Multilingual, covering all major European languages (and then some)



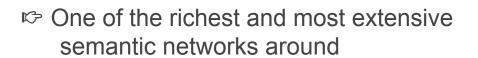






Used in all major industries around the World











Thanks to tight integration of syntax and semantics it understands language the way humans do

Insurance Process (Super-Simplified Sketch!)



Text Analytics – Success Factors

Standard document types with a lot of variety, but overall similar content and patterns (contracts, bills, medical reports, police reports, risk reports, forms...)

CH Insurances: >116'000 employees Fair degree Apply Text General Insurance CH: High of standard-Worth **Analytics?** 17B CHF/year ization Lots of people doing lots of Semi- or unpaperwork! structured Dozen or more information documents per case

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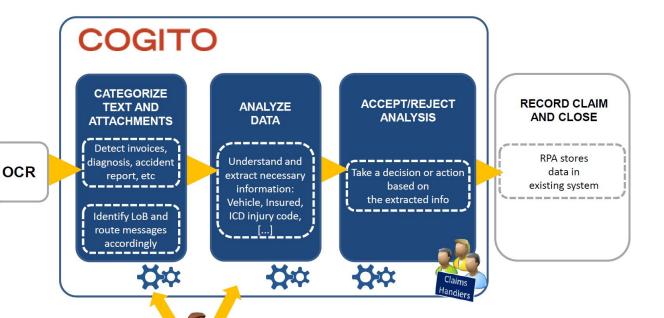
Figures: Finma 2015

Process Automation in Claims Management

Liability Decision

Valuation

Negotiation



Benefits

- Review time streamlined from days to hours
- Reduced claims leakage due to more accurate decision
- Smarter analytics thanks to more standard reporting



Process Automation in Claims Management

Liability Decision

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COGITO

- Detect claim notification forms, medical reports, invoices, etc.
- Extract metadata

Categorize

Analyze

- Medical Codes (ICD9)
- Injury progress & recovery time
- · Past medical history

- Calculation of expected damages payment
- Decide on settlement offer

Assess



Benefits



Process Automation in Claims Management

Valuation

Negotiation **Liability Decision** COGITO Validate Accident details Request further information Doctors and agencies •Request second report Compare accident accounts Past Incidents Forward to fraud for consistency investigation team Check for completeness of history ·Check for red flags Negotiate Extract

Benefits

- In detecting fraud indicators
- ∠More standardized and better informed negotiations
- and more time/ cost-effective



Claim concepts

Claimant

Claimant Name

(18)

Date of Birth Dec 18th 1971

(12)

Demand Amount

Demand Amount

\$ 60,000

(1)

Accident

Date of Loss

05/26/2014 (1)

Accident Time

3:06 pm EST (1)

Accident Description

PT was rear-ended

47 y/o man PT was the restrained driver in a rear-end collision 1 week ago

Medicine clinic at UMC Stadium, pt in rear end XVC 1 week ago, c/o numbness (1)



Document claim.pdf

Because of the underlying motor vehicle accident, curred the following damages as represented by his medical bills:

900.34 AMR (Ambulance) Montgomery Medical Center 6,024.28 2.348.09 **UMC Medical Center** Cabin Hills Chiropractic 1,297.00 TOTAL \$ 10,569.71

Please see attached exhibits for medical records (ex. 1-4) and billing (ex. 5). Further medical records and billing from UMC, Cabin Hills and Montgomery Medical Center have been ordered and will be sent to supplement this demand.

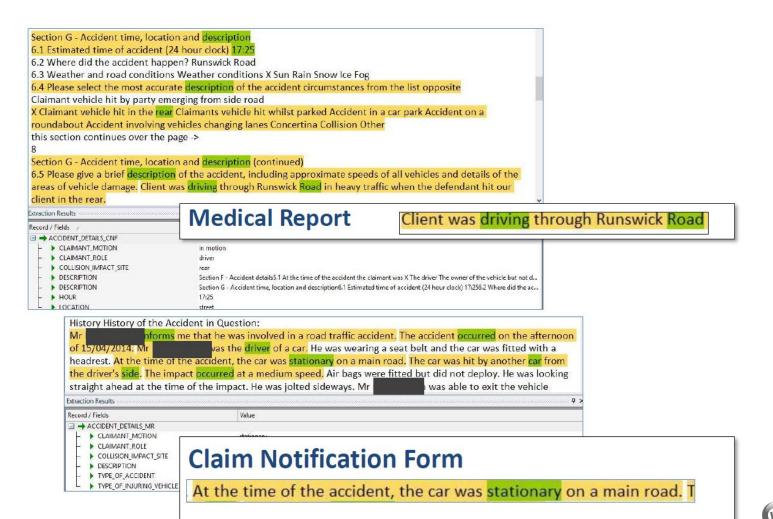
CONCLUSION

a very sympathetic plaintiff, who was thrust into this situation through no fault of his. The pain has made his work life excruciating as he is forced to sit for long hours. The pain has also impacted his sleep and made him constantly tired for many weeks. Because he did not have health insurance, he had to discontinue treatment after his PIP exhausted.

In light of the serious collision, we believe a jury would award John over \$75,000 for this accident. However in the interests of moving forward, sauthorized me to extend a settlement offer of \$60,000 n exchange for a full release of his claim against your insured. I look forward to your response.

Kind Regards,

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Wrap-Up



Very significant savings in time and effort spent per case



Reduced leakage; fewer unwarranted payouts, more reliable fraud detection process

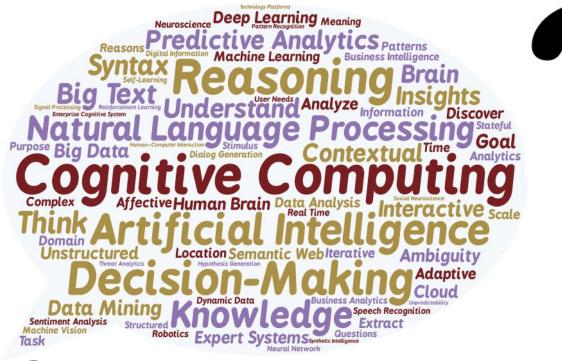


Improved consistency and higher quality of case assessments, enabling smarter analytics



Better understanding of subject matter, better alignment and better resource allocation

Your Questions







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