



# Detecting more fraud with automation

Fraudulent claims are a major cost for the insurance industry, but detecting them can be hit and miss. Agents are typically given a list of terms that could indicate fraud; when they hear one, they are required to flag the case on the system. One of our clients wanted to see if an automated approach, using speech analytics, could be more effective.

Starting with the same list of terms given to agents, plus detailed call recordings, we built the speech analytics engine. It then reviewed thousands more calls. In the first set, the automated approach identified four times as many potentially fraudulent claims.

Of course, not every alert results in a real fraud case: our client has deliberately cast a broad net to identify a large number of potential fraud cases. The automated solution brings greater consistency to that process – and has even identified real fraud cases that had been missed with the manual process.

That meant the client had to increase the size of its fraud team, but with a strong return on investment, that's money well spent: based on initial results, the approach will lead to annualised savings of £1.6m.



## Get in touch:

We deliver solutions to help organisations realise their customer service vision and increase commercial value from their service operations. We have teams of specialists across various practices and disciplines, including service operations, digital, outsourcing, technology, commercial and finance, analytics, recruitment & search, training and L&D.

Find out more



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