

EMERGE



**THE SOLUTIONS  
TO THE WORLD'S  
BIGGEST PROBLEMS  
ARE IN THE DATA**

# Today we have mountains of data but...



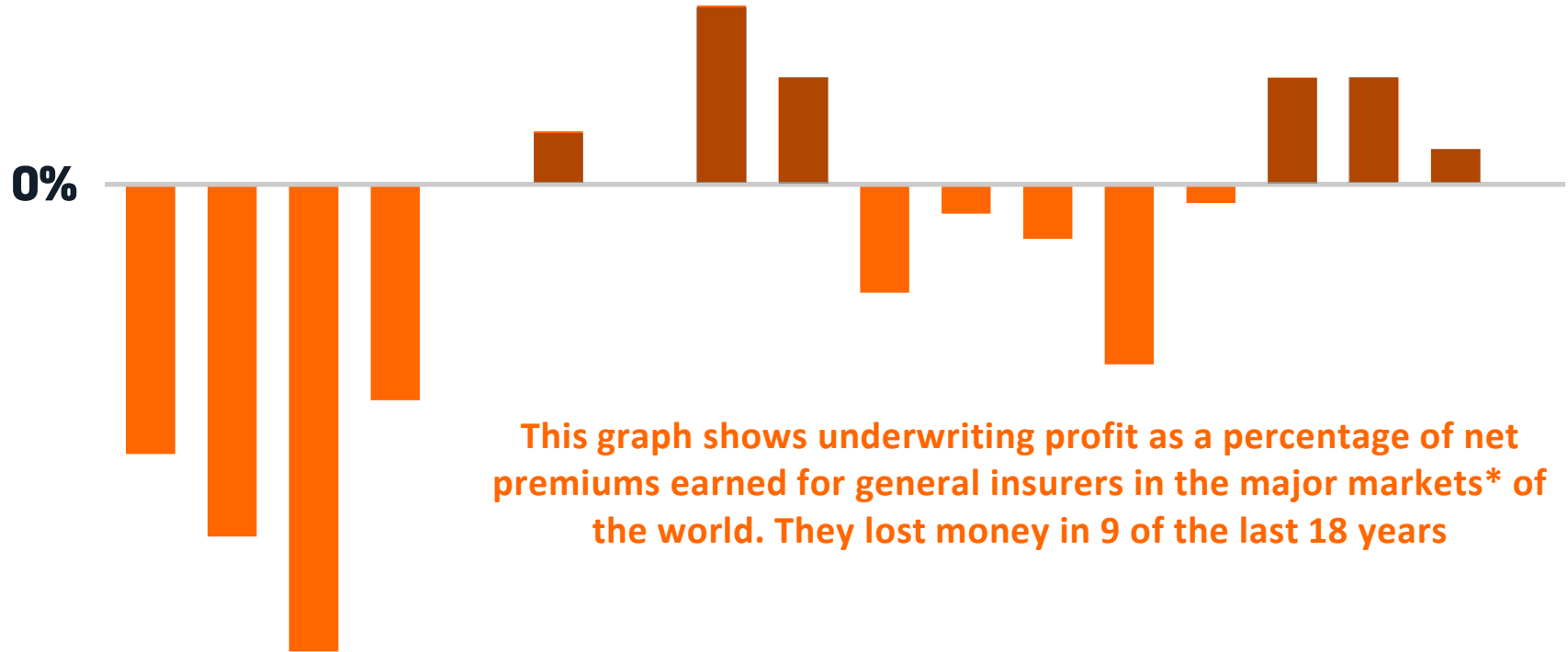
“Only 0.5% of all data is analysed or used”

Bernard Marr, Forbes.com

# The data landscape



# Insurance companies are not using the data to solve efficiency and customer relationship challenges in their businesses and are missing opportunities for profit



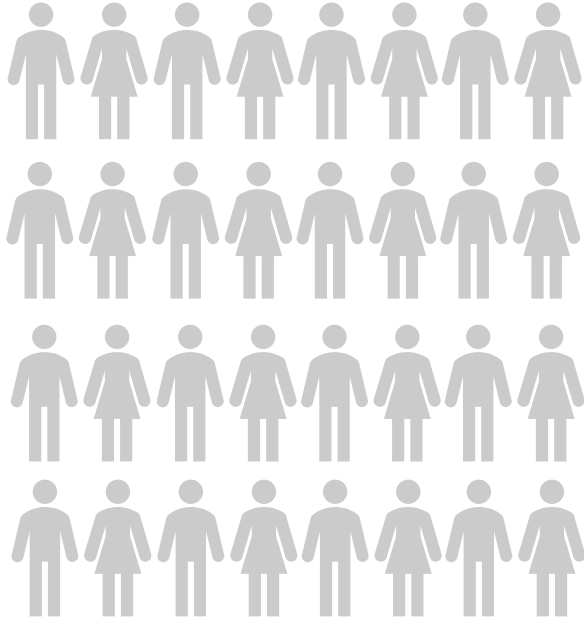
This graph shows underwriting profit as a percentage of net premiums earned for general insurers in the major markets\* of the world. They lost money in 9 of the last 18 years

\* For US, Canada, UK, Germany, France, Italy, Japan and Australia

## Small changes can impact financial value exponentially

	Model impact	Accounting profit	In force EV	New business EV
Baseline		£372m	£1.79bn	£78m
Expenses	-10%	£74m	4%	10%
Claims	-10%	£136m	11%	28%
Lapse	-10%	£173m	5%	18%
Acquisition	+10%			11%
New position		£755m	£2.16bn	£144m
Improvement		Double	21.1%	84.5%

# The new way of managing risk...

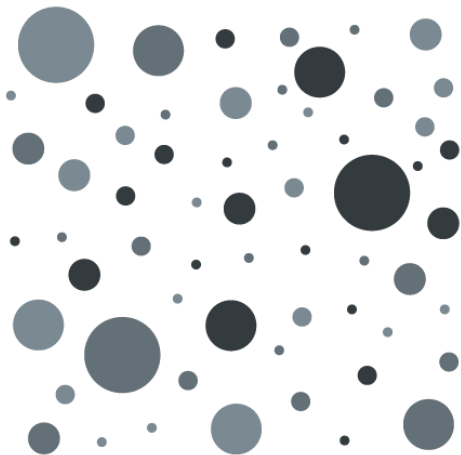


No more generic **rule-based**  
segmentation

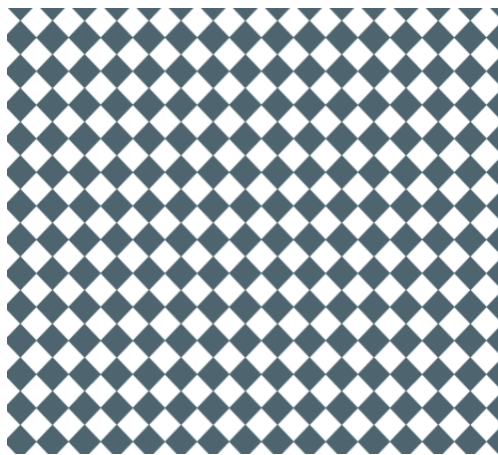


Use machine learning to enable  
scalable **personalised** interactions

# How is this done?



Provide **your data** in whatever amount and format you have it - don't spend time cleaning it first



Find unique patterns to identify pockets of value using **Emerge's proprietary machine-learning** software



Run the model in your operational systems through an **API or batch process in** the Azure cloud



# There is opportunity to personalise the full customer lifecycle

For example, let's look at a few insurance case studies



# SALES

## Aim

Identify the propensity for orphan clients to buy a savings product through the DFA channel

## Input data

All savings campaigns since January 2016

**243 000**

Campaign leads considered

**12 hours**

To run the model

**35**

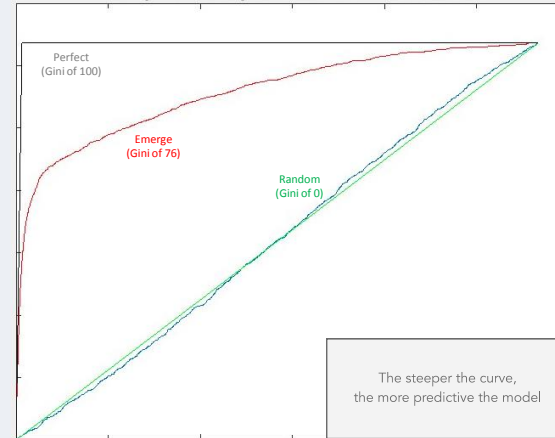
## data variables

- Demographics
- Policy details
- Other policies
- Broker descriptors

## Model results



**Increased conversion rate by 350%  
compared to the existing  
propensity model**



# FRAUD

## Aim

Identify which insurance claims should be rejected

## Input data

Claims for the last 2 years on a particular portfolio

26 000

claims reviewed, with an underlying fraud rate of 3.1%

6 hours

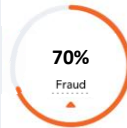
To build the model

120

## data variables

- Policy details
- Demographic details
- Claim features

## Model results



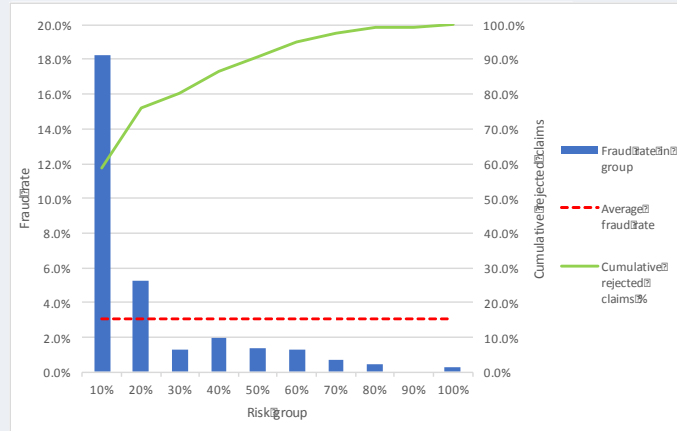
### Identified

In 15% of claims

71

Gini coefficient

Potential to prioritise claims investigations, and to quickly pay a large portion of policies that are very unlikely to be fraudulent



# RETENTION

## Aim

Identify the propensity for a health insurance policyholder to cancel in the next three months

## Input data

All data available for the policies with a lapse date in the future where relevant

**110 000**

policyholders considered

**7.5 hours**

To run the model

**360**

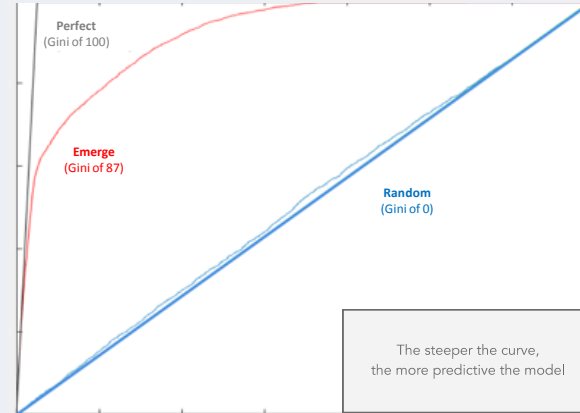
## data variables

- Client details
- Policy details
- Other products
- Channel
- Claims

## Model results



**Identified**  
In 15% of the base  
**87**  
Gini coefficient



By emailing clients that are at risk of leaving with relevant communication we halved the lapse rate from 30% to 15%

# There is opportunity to personalise the full customer lifecycle

For example, let's look at a few insurance case studies

## Sales



## Fraud



## Retention



*Case Study:*  
*Sales call centre*

Which clients will  
buy a savings  
product?

**Increased  
conversion rate  
by 350%**

*Case Study:*  
*Fraud operations*

Which claims  
should be  
investigated?

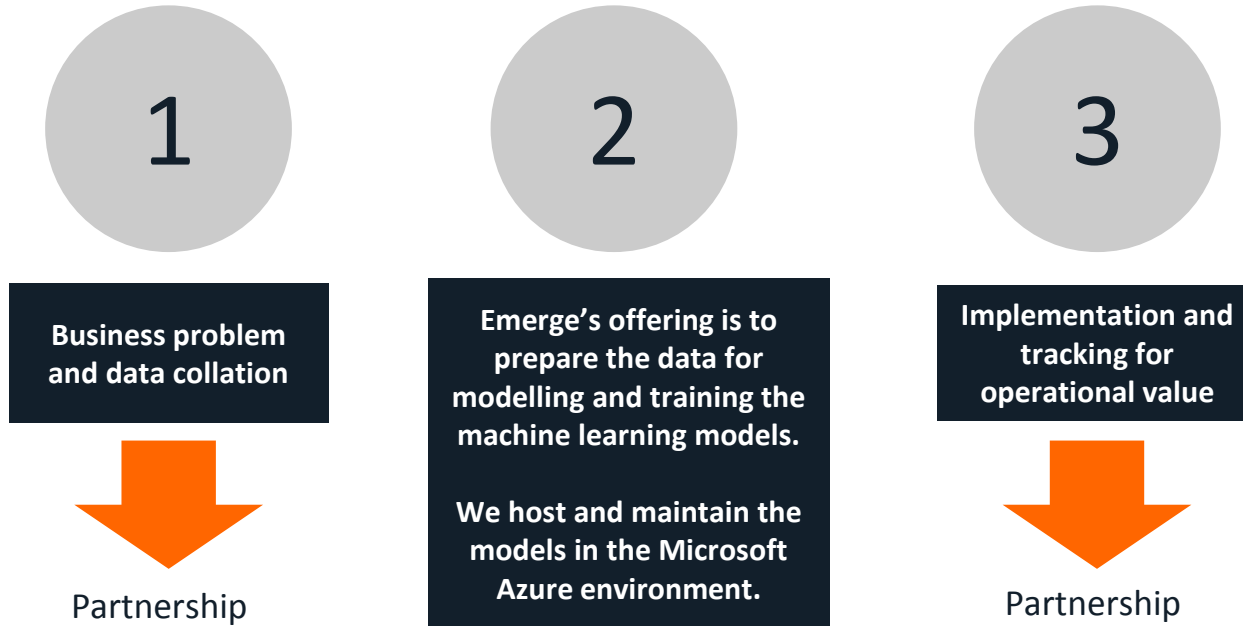
**70% of fraud  
found in just  
15% of claims**

*Case Study:*  
*Client retention*

How can I engage  
clients to create  
loyalty?

**Reduced client  
cancellations  
by 50%**

# The way we envisage a partnership with you...



# EMERGE

[info@emergeml.com](mailto:info@emergeml.com)

[www.emergeml.com](http://www.emergeml.com)

  
  
  
KING  
POWER