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Transforming Life & Health underwriting and claims with generative AI

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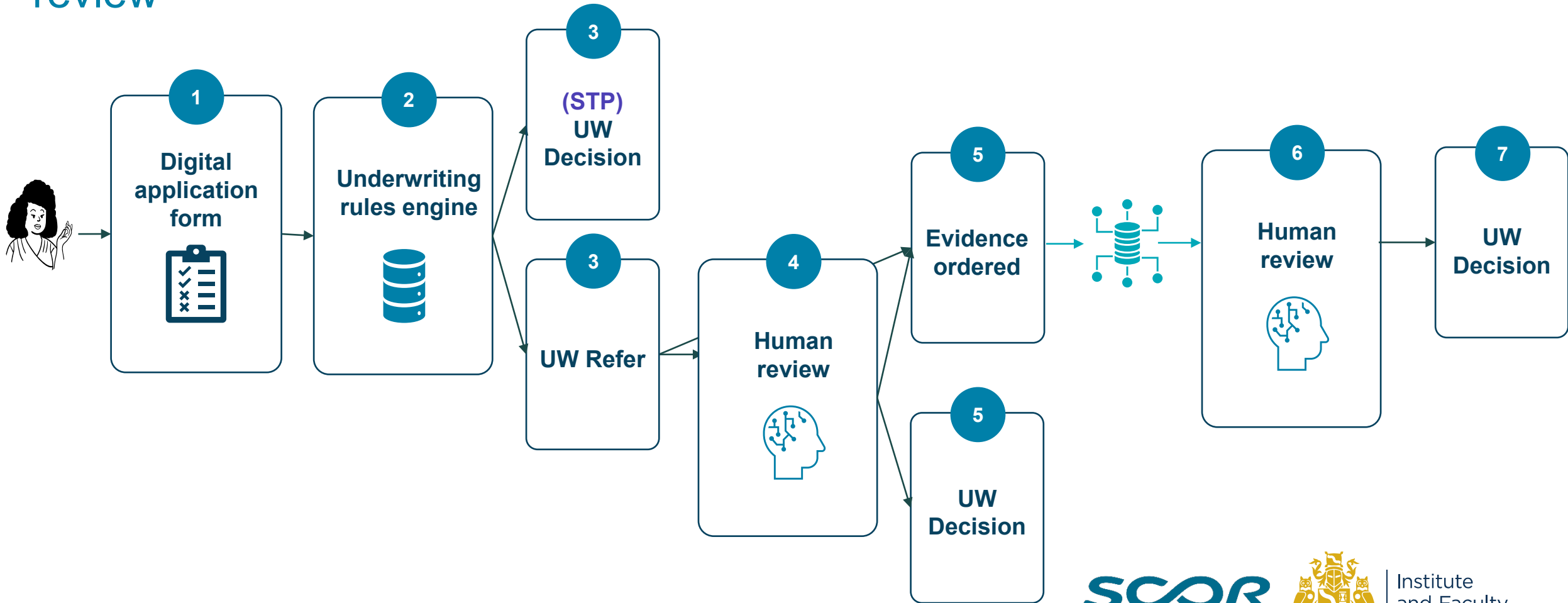
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Current underwriting process

Underwriting journey

Majority of applicants are straight-through processed but ~30% need human review





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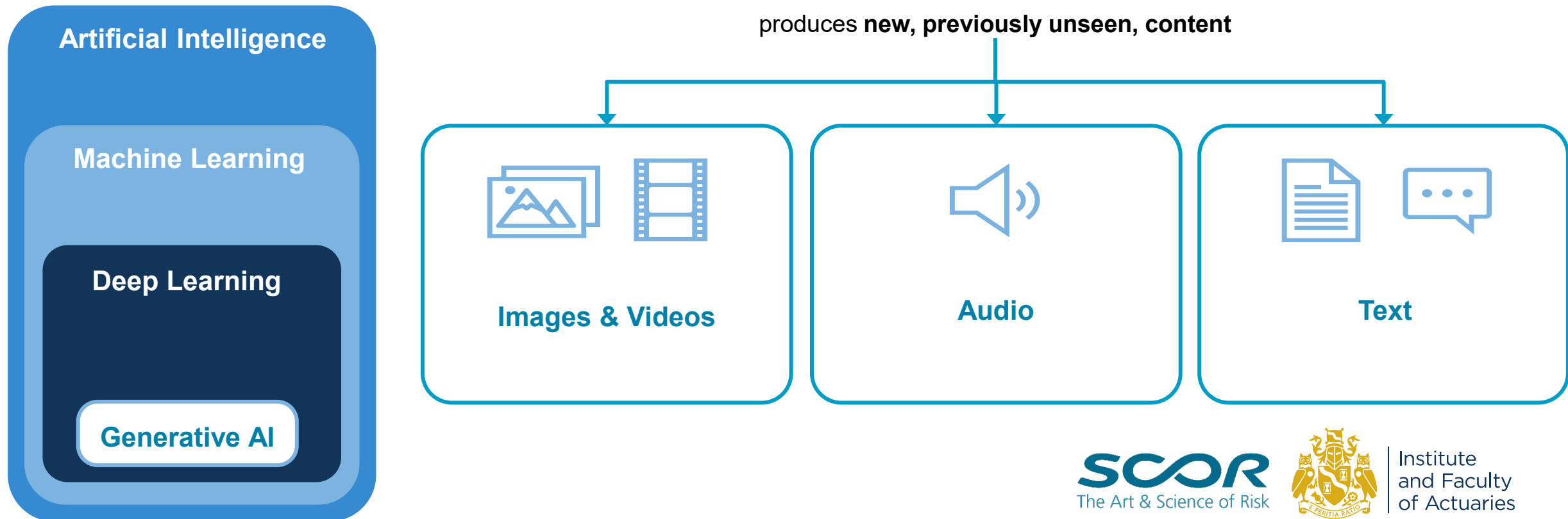
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What is generative AI (Gen AI)?

Expertise
Sponsorship
Thought leadership
Progress
Community
Sessional Meetings
Education
Working parties
Volunteering
Research
Shaping the future
Networking
Professional support
Enterprise and risk
Learned society
Opportunity
International profile
Journals
Supportin

Context

The launch of Open AI's Chat GPT in November 2022 has highlighted the huge potential of Gen AI across a wide range of tasks

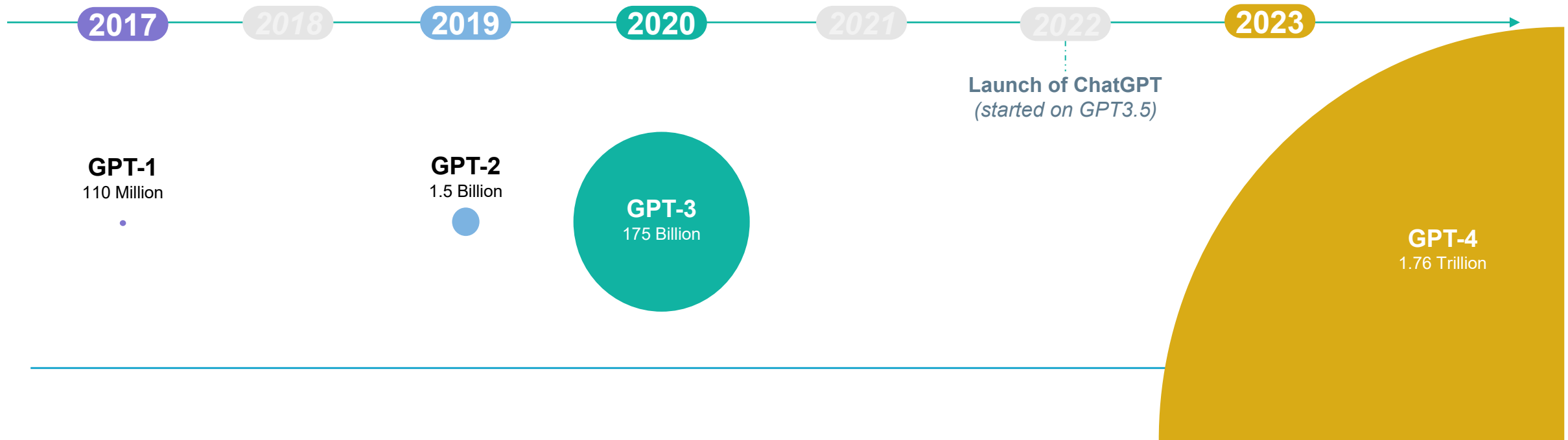


Context

Text is one of the main use cases, propelled by growing computing power and large language models (LLMs)

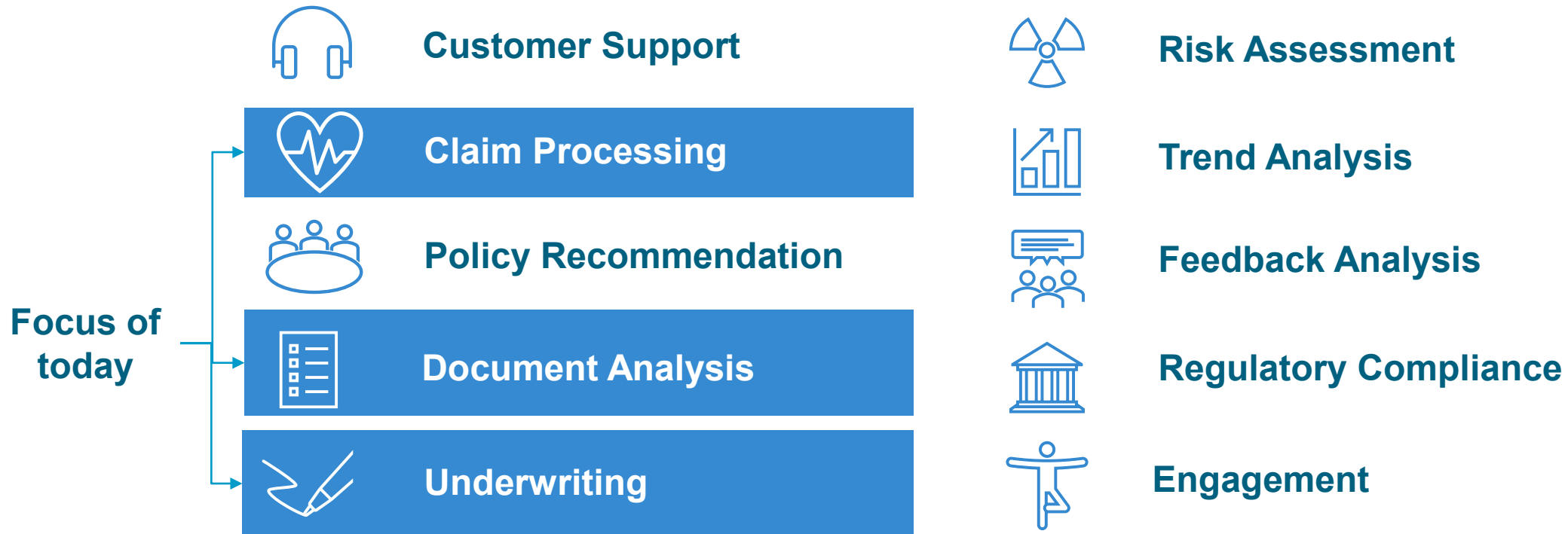
The models are not new – but the tech is now mature enough to turn them into truly powerful solutions, based on a wide range of parameters

Number of parameters of Open AI's GPT models



Context

Gen AI has the potential to power life & health (re)insurance use cases, across the whole customer journey





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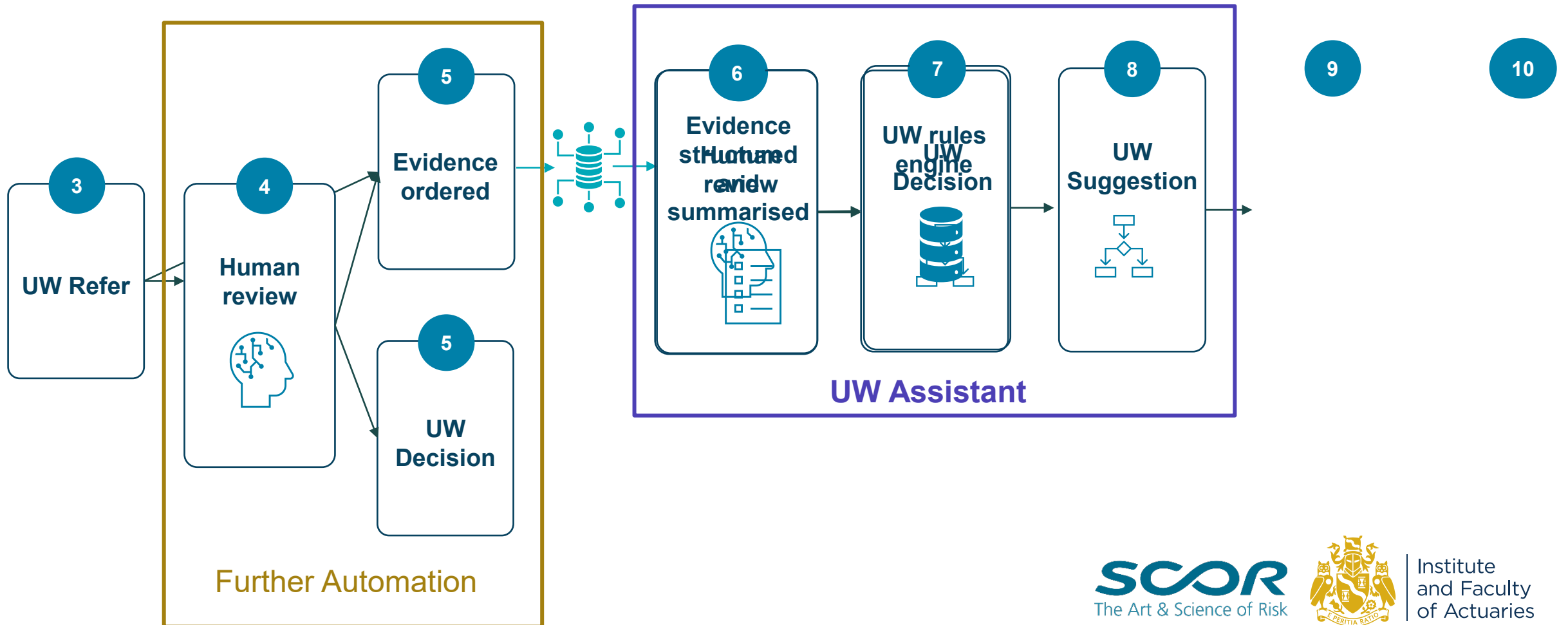
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How can generative AI help underwriting and claims processes?

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New Underwriting journey

The review of structured and unstructured evidence can be considerably quicker and *recommended* UW decisions returned for human review



Summary

Details

Search details...

Pages of classifications

| | |
|--------------------------|-----------------------|
| Cover sheet | 1-3 |
| Exams, Labs | 5-10 |
| ECG | 16 |
| GP reports | 17-20 |
| Misc. (handwritten etc.) | 21-50 |

Personal information

Edit values

| | |
|----------------|---|
| Name | Richie Williams |
| Date of birth | 11/14/1962 |
| Marital status | Married |
| Policy number | Information not specified in provided documents |

Impairments

Edit values

| | |
|-----------------------------------|--|
| Heart and blood pressure issues | Hypertensive disease |
| Mental health issues | Information not specified in provided documents |
| Cancer | Family history of breast cancer in sister |
| Endocrine disorders | Information not specified in provided documents |
| Respiratory disorders | Asthma |
| Gastrointestinal disorders | Information not specified in provided documents |
| Marfan Syndrome disorders | Not implemented yet, please review Open chat |
| Brain or Nervous System Disorders | Information not specified in provided documents |
| ENT issues | Information not specified in provided documents |
| ENT issues | Information not specified in provided documents |

Application_Richie.PDF

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Application_Richie.P...

PATIENT:
 DATE OF BIRTH: 11/14/1962
 DATE: 08/18/2023
 VISIT TYPE: Office Visit
 PROVIDER:

This 60 year old female presents for hypertension, anxiety and insomnia. Established patient

| # | Detail Type | Description |
|----|------------------------|---|
| 1. | Assessment Impression | Essential (primary) hypertension (I10). stable on meds. |
| | Patient Plan | Advised to maintain a low-fat, low-cholesterol diet. Counseled on reducing risk factors to reduce chance of heart attack/stroke. Reviewed lab results in detail. Counseled regarding importance of weight loss. Maintain a low-sodium diet (less than 2 grams per day). |
| | Plan Orders | CMP to be performed. counseling included. -Routine. |
| 2. | Assessment Impression | Mixed hyperlipidemia. check labs.. |
| 3. | Assessment Impression | Anxiety disorder, unspecified. continue meds.. |
| 4. | Assessment Impression | Insomnia, unspecified. stable on meds.. |
| 5. | Assessment Impression | Hyperlipidemia LDL as above.. |
| 6. | Assessment Plan Orders | Radicular pain in left Physical Therapy in ddd. . |
| 7. | Assessment | Encounter for screening |
| 8. | Assessment Plan Orders | Hyperglycemia (R73) HEMOGLOBIN A1C t |
| 9. | Assessment | Body mass index (BMI) |

Chat with Assistant

Hello, I am an Artificial Intelligence based assistant. How can I help you?

Could you please search for any Marfan syndrome Disorders?

Sure, I haven't been fine tuned to accurately find this. However, based on the reading of the document, I did find some Marfan syndrome information you might want to check in page 16,17 and 50.

Ask a question

History of Present Illness

1. hypertension It is currently stable. Risk factors include high salt intake, inactive lifestyle, male, pain, dyspnea and headache.

Summary

Details

🔍 Search summary...

Gender/occupation/citizenship

| | |
|---|---|
| Gender | Female |
| Occupation | Accountant |
| ! Citizenship | Information not specified in provided documents |
| Travel | No foreign travel vaccination discussion noted |

Vitals

| | |
|--------|--------|
| Height | 175 cm |
| Weight | 93 kg |
| BMI | 30.4 |

Blood pressure readings

| | | |
|-----------|----------|------------|
| Reading 1 | 145 / 90 | 06/01/2023 |
|-----------|----------|------------|

Tobacco use history/status

| | |
|-------------|---------------------------------------|
| Tobacco use | Current smoker, 20 cigarettes per day |
|-------------|---------------------------------------|

Personal medical history

| | | |
|---------------------------------|--|------------|
| Heart and blood pressure issues | Hypertensive disease | 06/01/2020 |
| Cancer | Family history of breast cancer in sister | 12/01/2020 |
| Respiratory disorders | Asthma | 06/01/2020 |
| Musculoskeletal Issues | ACL, discussed surgery but proceeded only with physio | 23/02/2020 |
| Surgery/Medical Procedures | ACL, discussed surgery but proceeded only with physio | 06/01/2020 |
| Recent prescribed Medication | Amlodipine 5mg Tab 1 tab per day, Micardis 80mg - 25mg 1 tab per day | 12/01/2020 |

Application_Richie.PDF

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Application_Richie.P... ▾

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| 1. | Assessment Impression | Essential (primary) hypertension (I10). stable on meds. |
| | Patient Plan | Advised to maintain a low-fat, low-cholesterol diet. Counseled on reducing risk factors to reduce chance of heart attack/stroke. Reviewed lab results in detail. Counseled regarding importance of weight loss. Maintain a low-sodium diet (less than 2 grams per day). |
| | Plan Orders | CMP to be performed and Lipid Panel - LIPID to be performed. Today's instructions / counseling include(s) Follow a low sodium diet and increase activity. follow-up visit -Routine. |
| 2. | Assessment Impression | Mixed hyperlipidemia (E78.2). check labs.. |
| 3. | Assessment Impression | Anxiety disorder, unspecified (F41.9). continue meds.. |
| 4. | Assessment Impression | Insomnia, unspecified type (G47.00). stable on meds.. |
| 5. | Assessment Impression | Hyperlipidemia LDL goal <100 (E78.5). as above.. |
| 6. | Assessment Plan Orders | Radicular pain in left arm (M79.2). Physical Therapy in 4 Weeks. Clinical information/comments: Axis, neck pt cervciall ddd. . |
| 7. | Assessment | Encounter for screening mammogram for malignant neoplasm of breast (Z12.31). |
| 8. | Assessment Plan Orders | Hyperglycemia (R73.9). HEMOGLOBIN A1C to be performed Today. |
| 9. | Assessment | Body mass index (BMI) 30.0-30.9, adult (Z68.30). |

Provider Plan Diagnosis code placed for administrative purposes.

History of Present Illness

1. hypertension
 It is currently stable. Risk factors include African American race, age over age 60, depression, high salt intake, inactive lifestyle, male gender and obesity. Pertinent negatives include chest pain, dyspnea and headache.

Benefits

Used in underwriting, claims or as a post-issue tool



Reduces human error and improves consistency

Enables quicker manual underwriting or claims processing

Underwriters and claims assessors able to focus more on high-value tasks

Benefits

The business case centres around the savings in operational costs without impacting the risk profile

| Example (medium-sized insurer with high STP rate) | Without UW assistant tool | With UW assistant tool - Scenario 1 | With UW assistant tool - Scenario 2 |
|---|------------------------------|---|---|
| Applications with additional medical evidence (per year) | 12,000 | | |
| Human underwriter – cost per hour | £50 | | |
| | | | |
| Human underwriter – time per case | 1 hour | 30 mins | 10 mins |
| Total human underwriting cost (per year) | £600k | £300k | £100k |
| Potential annual savings | | £300k | £500k |



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What are the challenges in building a Gen AI tool for underwriting and claims?

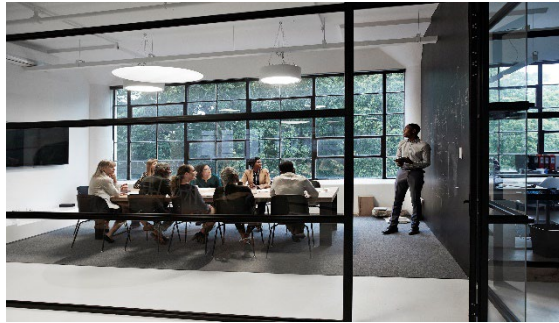
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Challenges

The promise of Generative AI is high, but it is moving quickly and needs considered adoption into business processes



Fast-moving environment



Management buy-in



Insurance specificities



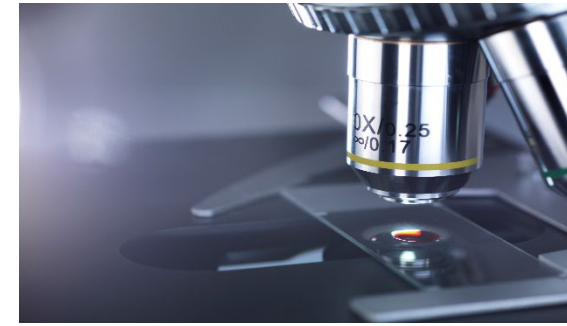
Benefits > Costs?



Security



Guardrails



Testing



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Why do we need underwriting and claims expertise to help build a solution?

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A tool needs to be more than an LLM

Underwriting and claims expertise is important in prompt engineering and post-processing

| Date | Height | Weight | BMI |
|-------------|---------|---------|------|
| 1 Jan 2022 | 1.70 cm | 90.2 kg | 31.2 |
| 30 May 2022 | 1.69 cm | 88.3 kg | 30.9 |
| 18 Nov 2022 | 1.70 cm | 86.2 kg | 29.8 |
| 1 May 2023 | 1.69 cm | 80.1 kg | 28.0 |

What BMI will the underwriter want to see?

| Electronic Health Record | |
|--------------------------|------|
| Date | BMI |
| 1 Jan 2022 | 31.2 |

Which data source do we trust when they tell us different things?

| Blood Test Report | |
|-------------------|------|
| Date | BMI |
| 12 June 2022 | 33.0 |

| Application Form | |
|------------------|------|
| Date | BMI |
| 1 June 2022 | 30.9 |

| Date | Height | Weight | BMI |
|-------------|---------|---------|------|
| 1 Jan 2022 | 1.70 cm | 90.2 kg | 31.2 |
| 30 May 2022 | 1.69 cm | 58.3 kg | 20.4 |
| 18 Nov 2022 | 1.70 cm | 86.2 kg | 29.8 |
| 1 May 2023 | 1.69 cm | 80.1 kg | 28.0 |

How will we spot data errors?

| Impairment | UW Decision |
|------------------------------|----------------|
| 'Mild' Asthma + no smoking | Standard rates |
| 'Mild' Asthma + smoking | +50% |
| ... | |
| 'Severe' Asthma + no smoking | +250% |

How do we ensure we extract sufficient and relevant information for each impairment?

Summarisation is good but full integration is the gold standard

The real value comes when underwriting summaries can be structured to feed underwriting rules engines...but still with human review

Underwriting
summary for
human
underwriters to
review

+ Integration into
underwriting
workbenches and
admin systems

+ Link to
underwriting
manual to return
suggested
underwriting
decision



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When will it fully replace human underwriters?

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Never ?

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Risks and mitigations

All AI carries risk, but generative AI has additional risk

Risks

- Hallucinations – incorrect conclusions
 - Decisions too harsh
 - Decisions too lenient
- Inability to act on misrepresentation at claim stage
- Legal – the right to request human decisions
- Legal – use of impermissible data
- Data/systems may evolve

Mitigations

- Human review of every case used in UW/claims
- Regular testing



Questions

Comments

Expressions of individual views by members of the Institute and Faculty of Actuaries and its staff are encouraged.

The views expressed in this presentation are those of the presenter.



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