

SCOR'S CLAIMS RULES ENGINE

IMPROVING THE CUSTOMER CLAIMS JOURNEY
& REDUCING INSURERS' TIME & EXPENSE

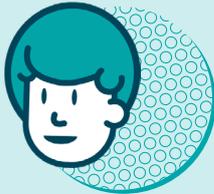
through a simple and comprehensive
digital experience



When a customer needs to make a claim, it is often a stressful and difficult time in their life and the claims notification process can be overwhelming.

The SCOR CRE enables insurers to offer the best claims experience by eliminating paper forms and requesting the correct information upfront, which facilitates rapid decision making and frees up claims assessors to better support customers with more complex claims.

A WIDE RANGE OF BENEFITS:



Customer Satisfaction:

- Rapid claims lodgement with easy-to-understand, instinctive questions: paper claim forms are no longer necessary
- Quick payments on standard claims, and increased support provided on more complex claims



Improved Operational Expenses:

- Reduce potential manual errors through automated data entry
- Shorten end-to-end times on low-risk claims, freeing time and resources to support and manage high-risk claims
- Request the right information at the outset of the process with smart rules
- Deliver immediate action, where possible, using auto-assessment and strategy focus points to guide the claims team



Improved Data Analytics:

- Collect customer data in a structured digital format for use in strategic pricing, future product development, and underwriting
- Gain instant insight into claim notifications and risks through live claims and operational dashboards

A SIMPLIFIED AND EFFICIENT CLAIMS PROCESS ACROSS ALL PRODUCTS

3 Key Elements:

Known Data: A wealth of information about the customer is held in policy administration systems, which is easily and digitally accessible, reducing data entry and freeing up resources.

Base Questions: Using behavioural economics principles, SCOR's CRE questions are relevant and written in 'simple language'. One question set can assess benefits across multiple products and policies.

Smart Catalogue: We've removed the medical jargon to improve and simplify the customer experience and encourage informed disclosures. The SCOR CRE is comprehensive - loaded with thousands of medical conditions, symptoms, and tests.

SCOR's smart rules create:

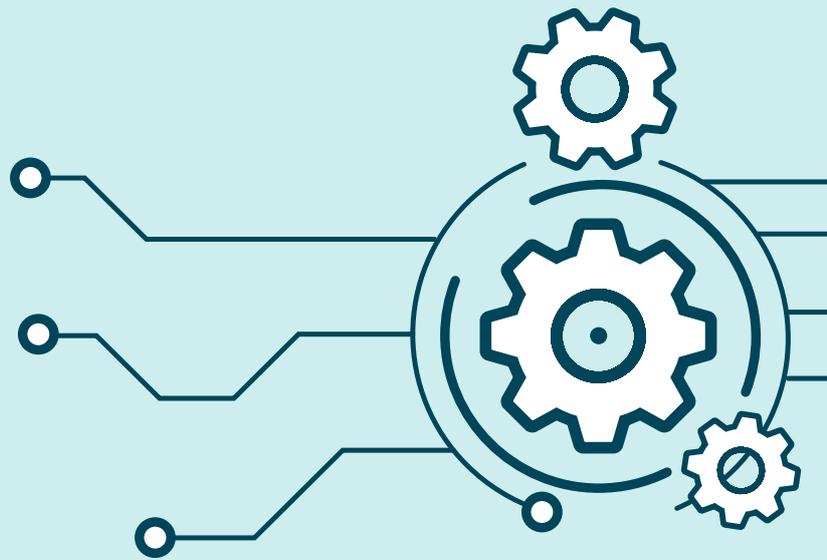
Improved Customer Response: Customised requirements are bespoke to each customer at the outset of a claim, based on the claimed condition and the products they hold. This can accelerate the claims process without waiting for paper forms.

Accurate Triage Scores: Identify low-risk claims for fast processing and complex claims that require early intervention for disability income customers which allows immediate support for the help they need.

Automated Assessment: Initial and ongoing claims are systematically assessed to support 'smart claims' and risk management capabilities.

The Technology behind the SCOR CRE:

The CRE is a flexible solution tailored to insurers' needs and the evolving expectations of their customers. New rules can be built into the existing technology or hosted through SCOR's expert technology partners. Application Programming Interfaces (APIs) are built into the SCOR CRE. This powerful tool accepts known data from an existing policy administration system and feeds the output into an insurer's Claims Management system. This can create tasks for any outstanding requirements and strategy flags.



The SCOR CRE was created from our desire to digitalise an archaic claims process and our dedication to create consistency in claims decisions.

At the cutting edge of medical knowledge and actuarial excellence, the SCOR CRE is the perfect tool to enhance customer relationships, lower operational costs, drive targeted pricing, and improve claims outcomes.

Improve speed, accuracy, and customer experience using the SCOR CRE!