

# HOUSEHOLD BURGLARY

The following is an example case study which, thanks to the implementation of Diglog's Solution identified significant risk factors which more than likely would otherwise have been missed...

The client was tasked with screening all Household Burglary cases across numerous regions for an affiliate company. This was a new concept but thanks to the versatility of Digilog's Voice Analysis technology, experience in designing robust and customer focused risk screening processes across many perils and product lines, the solution was implemented to risk assess these burglary cases.

In this particular case, during the initial FNOL call, 2 significant and relevant High Risk system messages were triggered through Voice Analysis, both of which were supported by Narrative Integrity Behaviours ('Thinking Time', 'Disassociation' and 'Detail Problem'). The case handler was also met with unjustified resistance from the customer, specifically where the customer questioned the need to confirm detail around the extensive list of items they were claiming for with the statement "Why do you need to know that?"

The relevant risks surrounding claim circumstances and items stolen (including large items of machinery and €5.000 cash), resulted in the handler assessing the claim as High Risk.

As a result of the risk areas identified during the FNOL call, follow-up desk-top and field investigations were required to verify the relevant risks presented. Further checks confirmed the truthful elements of the account provided during the FNOL call but, significantly, the risks identified were further supported with concerns uncovered by the field investigator surrounding invoices subsequently provided to support his claim, with the invoice stating 'Obligation to pay cash at date of placing'.

Spurred by the High Risk outcome of the first call, correlating with her desk-top investigations, the case handler arranged an appointment to visit the customer of the insured and question the concerns and anomalies identified. During the visit the customer provided the investigator with another invoice, with no reference to 'cash payment'. Further investigation revealed that he had in fact paid via bank transfer of which he was able to provide proof. The insured was guilty of producing a false and fraudulent document having manipulated the invoice to make it seem like he had a large sum in cash.

*" The correlating risk identified through Voice Analysis technology and Narrative Integrity Behaviours pinpointed the key underlying risk issues in this claim. Further focused investigations uncovered evidence where we could prove that the claim was fraudulent. As a result the total claim of €11.000 was rejected by the insurance company – another great saving!"*