Prompt and efficient handling of complaints helps organizations gain a deeper understanding of their customers. Effectively engaging with customers and increasing customer retention and loyalty translates to a more profitable business. However, this can be time-consuming and expensive. NIIT Technologies, with their data aggregation framework, ensures that insurance providers can take informed decisions related to fair treatment of customers throughout the product value chain faster.
Building Strong Customer Experience

Complaints play a huge role in continuous improvement of sales and operational policies, and product design and features. This significantly increases the role of a system that is robust enough to cope with the increasing number of complaints and varied complaint sources and formats; and intelligent enough to conduct root cause analysis of customer complaints. The system would thus not only act as a redressal system but also ensure generation of insights to avoid complaints in future.

NIIT Technologies’ framework aggregates data from various sources, analyzes accumulated data, and presents information in a visual format. The framework has the capacity to process millions of records at a time.
NIIT Technologies' framework:
- Captures every interaction with the customer with respect to claims, feedback, and complaints
- Analyzes customer interactions in terms of ease of access, transparency, efficiency, and closure
- Reviews timeliness and acceptability of redressal
- Reports complaints to the regulatory body in the desired format
- Creates and improves processes to make them fair and friendly to the customer

Figure: Sample Representation of the Output from the Framework
The output summarizes unstructured data on the following potential aspects/features:
- Complaints type (Policy & Claims)
- Categories and sub-categories of complaints
- Statistics based on location, product type etc.
- Reasons for complaint
- Other important attributes e.g. policy number, contact details etc.

**Delivering More Value**

- **More Relevance:** The framework extracts relevant data points at an appropriate level of granularity from various systems.
- **More Efficiency:** The framework helps insurance companies integrate data in a way that allows manipulation and drilldown of data. Companies can utilize internal and external data and statistical analysis to deal with significant data quality issues during pre-sale and post-sale from the range of legacy systems. The framework can also identify isolated or systemic issues from large sets of data using extremely powerful tools.
- **More Capabilities:** Insurance companies can add new models and tools with existing decision management solutions. The framework automates manual processes such as classification, visualization, and analysis—saving significant human costs and enabling employees to focus on more value-added activities.
- **More Satisfaction:** The framework helps you identify and measure operational risks—improving business efficiency and increasing return on investment. The risks are identified early in the process—helping you intervene and mitigate them.
- **More Specific:** Management information reporting is done in a timely fashion for appropriate stakeholders.
• **More Comparisons:** The framework performs outlier analysis where insurers examine their data to identify products or areas whose financial performance is unusual—either when viewed against their history, their competitors, or rest of the business.

**The NIIT Technologies Advantage**

NIIT Technologies has extensive experience helping organizations categorize and sub-categorize complaints for handling them efficiently. We have supported a significant number of insurance providers through development of a framework that streamlines the data capture mechanism, analyzes data, reviews customer experience, and provides reports to internal and external stakeholders.

Our network of experts is supported by risk and finance technology enablement teams, bringing to the table the experience and skills to diagnose and handle complaints successfully. NIIT Technologies’ framework helps insurance companies ensure that regulatory compliance commitments are clearly articulated and aligned to their strategic objectives.
For more information, contact marketing@niit-tech.com

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NIIT Technologies is a leading global IT solutions organization, enabling its clients to transform at the intersect of unparalleled domain expertise and emerging technologies to achieve real-world business impact. The Company focuses on three key verticals: Banking and financial services, Insurance, Travel and Transportation. This domain strength is combined with leading-edge capabilities in Data & Analytics, Automation, Cloud, and Digital. With over 10,000 employees serving clients across Americas, Europe, Asia, and Australia, NIIT Technologies fosters a culture that promotes innovation and constantly seeks to find new yet simple ways to add value for its clients. Learn more about NIIT Technologies at www.niit-tech.com