

Insurance Fraud

Tackling Insurance Fraud at Scale With AI

Insurers have been under pressure like never before to onboard customers quickly and pay out claims even faster — all in as light-touch an experience as possible. The answer is automation, but that also increases opportunities for fraud. From individuals inflating the value of the claims, to organized rings resubmitting the same forged claims across different insurers, digital channels have created a new universe of risk — one that mere human oversight cannot tackle.

Going digital means everyone can be an artist with the right tools, creating bogus claims the human eye can't catch. Coupled with an industrial provision of fake, synthetic, and stolen identities with which to submit them, fraudsters can flood digital channels to quickly iterate on their attacks and find new ways of getting past checks. They then automate winning tactics with bots and account takeovers to scale up their attacks.

Because each new tactic is by definition unknown, Resistant AI submits every single customer interaction — their documentation and their behaviors — to a level of forensic analysis impossible for humans, filtering out fake or reused claims, fake or stolen IDs and bots, and eliminate new attacks before they can scale.

Insurance Fraud in Numbers ¹

>\$80B lost every year
in US alone

Up to
10% of claims are
fraudulent

£12,000 average fraudulent
insurance claim
in UK

45% of fraudulent
claims linked to
organized crime

How Resistant AI Stops Insurance Fraud

Document forgery detection

Each submitted document is analyzed over 550 different ways to catch signs of forgery — even on documents never seen before — and give a clear, explainable verdict.

Serial fraud detection

Any available behavioral data — from device intelligence to service usage patterns and more — is used to detect serial fraud, bulk account creation, stolen identities, bots, account takeovers, and claim reuse.

Serial forgery detection

All documents are compared to detect forgery patterns, uncover common templates behind industrially produced forgeries, and highlight identity or claim reuse across different insurers.

Authenticity as a Service

Authentic documents and behaviors are modeled in production — quickly and economically with very little input — to enable automated approval, decline, or escalation workflows.



¹ Coalition Against Insurance Fraud 2020 Fraud Stats & Globalization of Insurance Fraud Study 2021 | Association of British Insurers

Get in touch and request a demo now

Make Your Underwriting and Claims Resistant

Let good in, keep bad out



- Speed up onboarding and claims payouts, and automate declines
- Uncover new and unknown threats before they scale

Predict, detect, and deter insurance fraud



- From account opening to underwriting and claims processing
- Catch ghost brokers and attempts to submit claims to multiple insurers

Find forgery and fraudulent behaviors where you least expect



- Detect forged claims, itemized receipts, ID cards, accounts statements, utility bills
- Catch reused claims, stolen or synthetic IDs, bots, account takeovers, and more

Augment your existing checks with new smarts



- Enrich your existing systems rather than replace them
- Get risk assessors and investigators to confident conclusions faster



Get in touch and request a demo now