

Specialty Insurance Analytics: AI Techniques for Niche Market Predictions

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Abstract

Industry consolidation and a war for talent has sparked a surge in the development of InsurTech start-up firms. Because established insurance companies take a conservative regulatory stance, specialized insurance is an emerging market for coverage. The rapid accumulation of business data in high-dimensional vector fields opens up an opportunity for machine learning solutions based on huge datasets. However, usage of machine learning in specialized insurance is a frontier market that is mature. Gaps exist in availability of domain knowledge and machine learning guidance on a shared platform for start-ups, generalists and experts. It is an urgent need to construct comprehensive guidance on AI solutions for niche market predictions by making sense of insurance vernacular through the lens of word2vec and the architecture of a suite of supervised and unsupervised machine learning. This modeling framework capitalizes on fast search speed and high numerical efficiency of eigenvalue decomposition to remedy the curse of dimensionality while offering an excellent graphical visualization. The versatile modeling power and generative theory of neural networks built on local learning can set up the next decades of AI development while shaping a product-rate predictor. The proposed approach has been tested on telematics auto, specialty insurance, and exploration insurance to exhibit its applicability in real market phenomena. A path forward for insurers and GTs is to adopt this open-source toolbox of auto machine learning, time series and large network applications to create a huge behavioral database for precise pricing. A case study of spam

detection is discussed to illustrate the tool for tens of decimal hypotheses testing which is a nightmare for manual analytics propensities in terms of number of hypotheses and number of linear constraints.

Keywords: Adverse selection, affordability, artificial intelligence, generative model, machine learning, niche market, premium prediction, specialty insurance.

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1. Introduction

The emergence of digital activity and consequent availability of large amounts of detailed data from social media and devices connected to the Internet of Things (IoT) presents specialty and other insurance markets with unprecedented opportunities but overwhelming new risks at the same time. There is a growing number of insurance companies, including specialist niche insurers entering complex, less well-understood but potentially very profitable insurance markets. Incorporating both new granular sources of data and new risk structures in predictive pricing models presents significant hurdles for both specialty and larger insurers with natively different underwriting processes and data availability. Budget-constrained specialty insurers are considering, or in some cases gradually adopting, advanced digital analytics techniques, particularly machine learning (ML) and deep learning (DL). These techniques may deliver more accurate insights, but transitioning to ML and DL presents different challenges compared to implementing traditional statistical approaches. For example, most traditional statistical models are interpretable but more complex analogy-based techniques are opaque, necessitating new interpretability methods. DL model training also involves a different approach to data wrangling, which may require both careful features transformation and processing of new data types. As a consequence, specialty insurers need to make important strategic decisions and will require new practical skills that are in short supply in the industry. For them, understanding available options and potential approaches to moving forward is essential for meeting new advantages and risks presented by data in the evolving digital insurance market.



Fig 1: Specialty Insurance Analytics

1.1. Background and Significance

Insurers are in a data-rich environment, collecting a growing variety of data for use in the insurance process. However, most traditional ratemaking models were not designed to support these data sources. Consequently, it remains difficult for actuaries to extract information from these data sources, in turn preventing them from sharing them with analytic teams. Despite most of these data sources being publicly available, few actuaries understand them well enough to act on them. On the other hand, a large portion of these sources contain an enormous amount of information that may complement traditional data. These data sources provide better insights to predict which risk is likely to generate future losses in a given insurance contract. The insurance industry will lose competitiveness and profitability if they adopt a conservative approach relative to other industries.

Niche markets are harder to collect data points for. Many providers of niche insurance only take on a very limited number of clients. Conversely, others are large insurance companies but offer one type of insurance in a niche market or do not yet provide insurance. In either case, there are very few, possibly none, observations of the specific niche market. Due to challenges such as these, it often requires a lot of effort to collect a data set. Even if data can be gathered, especially for newer and more experimental insurance models, the data may contain observations

that would not typically be included in standard insurance models. For example, one-off events with very high claims or something not completely under the insurer's control, such as the pandemic. It will be difficult to predict the probability of these happening in practice, so they are often excluded from models as outliers.

By extending the availability of both external and alternative data sources, new ways of predicting the probability of occurrence and expected loss amounts will be discussed. Some of these new methods will be based on knowledge gathered from remotely sensed information, such as satellite imagery data. In niche insurance, nothing is more important than good data and analytics. This idea will be used to create frameworks for acquiring better data and finding correlations and information in them in places where models previously did not exist.

Equ 1: Claim Amount Prediction

$$\hat{y}_i = \sum_{m=1}^M \gamma_m h_m(x_i)$$

Where:

- \hat{y}_i = predicted claim amount for policy i
- h_m = base learners (e.g., regression trees)
- γ_m = weight for each learner

2. Overview of Specialty Insurance

The specialty insurance market is an enormous but heterogeneous market comprising small niche markets ranging from targeted nefarious risks to coverage for parking lots and fire insurance for unoccupied homes. These market segments have a large number of customers that are few in number and very dispersed, which makes them difficult for insurers to effectively price. As a result, specialty insurance markets often have some market inefficiencies driven by a lack of good data or a lack of available data, which creates opportunities for rates to change or the availability of insurance to shift. Specialty insurance is generally sold via insurance brokers or independently produced coverage documents, often referred to as an "off-the-shelf" policy. Insureds are often referred to as submitters, and the submission often contains a minimal template

request for a quote, customized according to the risk class and prepared by the insured's broker. This quote submission is sent to underwriters, who then analyze the potential risks. If a broker markets a submission to several carriers at once, it is often referred to as a marketing package.

Brokers are in the best position to present to an underwriter all the critical information about the insured. Specialty insurance products are often viewed as “dark data” due to the volume of non-standardized information embedded in writing and images. Brokers must extract and summarize the relevant features of a submission case and provide a comprehensive yet coherent view of the insured to the underwriter. Traditionally, the submission preparation process is a tedious “human-in-the-loop” process, which depends on the knowledge and skills of the broker. A good submission is one of the key factors determining the eventual acceptance of the premiums by underwriters. Brokers continue to rely on human experts to prepare submissions. However, large specialty brokers now face high turnover rates of underwriters and brokers due to market conditions.

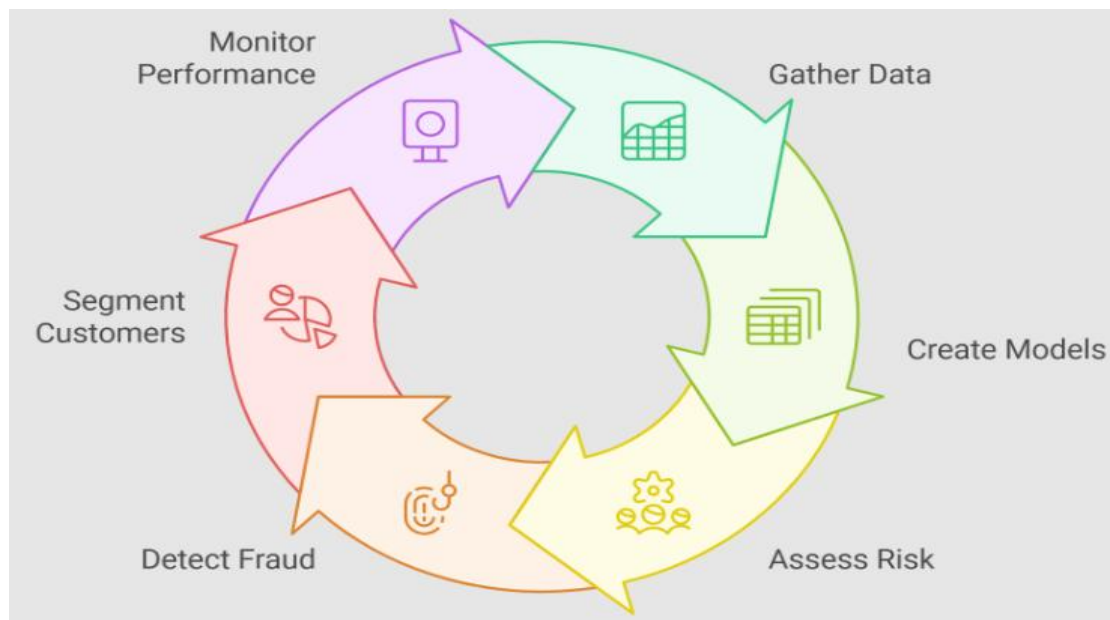


Fig 2: Specialty Insurance

2.1. Definition and Scope

Specialty insurance is a niche market focused on underwriting specific risks. It operates within the broader insurance industry, with specific underwriting techniques, products, and

regulatory requirements to address potential unique risks. Given these unique features, traditional insurance analytics tailored to the more standard product lines may be ineffective. Commercial specialty insurers rely on a combination of in-house tools, technical specialization, and human oversight to understand their risks better. Despite these approaches, the necessity of insurance data changes and predictive modelling methods is increasingly recognized by regulators and academics.

Activity-based insurance (ABI), encompassing a broad range of applications including, but not limited to, telematics, with feedback for behaviour change or gamification, market segment proposals, etc., is a growing subclass of usage-based insurance. Here, insurance contracts, rates, and premiums are based on the behaviour (or lack thereof) of the insured. This behaviour can be explicitly evaluated in line with natural phenomena (or activities) such as driving speed profiles affecting the risk of an accident, or be rooted in human activity level or life type accountable for the occurrence of adverse events. Often with little or severely limited predicted consequences based on traditionally accessible internal and external data, hence the growing awareness and research into AI techniques, both per se and applicable within ABI.

Insurers can employ AI techniques or data analysis on insurance data upon which the conditions and rates are opened and closed. Both AI techniques and usage-based applications have been employed for many years, but mostly within unstructured solutions that are proprietary and auditable or meaningfully explainable, hence the growing awareness and suggestions for techniques based on basic AI principles, applicable to insurance data. Because of the nature of the goods and services provided, insurance markets with disciplined consumer behaviour have been traditionally strongly regulated. Consequently, such regulation also applies to the navy sector. Regulators have remarked on variations in both performance measures and market conduct, signifying the possible introduction of new practices, yet not surprisingly remain unaware of their nature.

2.2. Market Segmentation

The emergence of big data analytics capabilities has transformed the data landscape of specialty insurance markets. This new data landscape comprises traditional structured data, such as losses and exposures, but also new non-traditional structured and unstructured data sources, ranging from external weather data to internal reports. Such a shift requires a response from companies to establish their own data management capabilities. Some insurance companies have

pioneered insurance data science, working together with futures studies departments to think ahead and explore how various data analytics capabilities could be beneficial for their company. Workstations have been created that are interconnected with internal systems and provide rapidly deployable end-user analytics on multiple data sources and types. Quantifying business value remains challenging, making it difficult for companies to make investment choices. Combined with the desire to enhance innovation, tech giants and data-rich companies have joined forces with insurance companies to find new profitable data use-cases and to establish a competitive edge. The specialty insurance industry focuses on niche markets that present specific risks. The resulting markets are often very small in premium, and individual professionals in such markets expect access to their insurer and a deep specialization in risk underwriting. Specialty insurance markets can be characterized as a projection of a more general data scape in which risk awareness by monopolizing data leads to a new gnostic forecasting. Within this scape, incumbents are established insurance companies known for decades. These companies employ data scientists for specialized knowledge about data management and analytics. Data-rich companies have either partnered with or acquired established insurance companies, leveraging their data credibility and data usage expertise. Domiciling recent start-ups are usually former established insurance company employees or are rooted in academia. Some of these venture capitalists expect to spend considerable time educating clients about how the respective models should be understood before the business model can even be tested.

3. Importance of Analytics in Insurance

While the use of machine-learning techniques in insurance is increasingly widespread, few studies explore its viability in specialty insurance contexts, where the prediction challenge is more difficult. Here, the techniques of financial modelling are combined with artificial intelligence to predict specialties' market evolution, enabling insurers to cope with upcoming cycles and find the optimal rate slope, thereby enhancing their market position. The profitability of specialty insurance lines depends on a more detailed analysis and smart management of new ratings and existing portfolios in line with market movements. This paper assesses potential broad parameters of Specialty Insurance leading indicators and uses AI techniques to build basic algorithms to predict their performance: a specially structured Neural Network model trained to predict ahead premium changes. The paper's scope may serve as a foundation for ongoing research to provide meaningful output for the operational criteria of underwriters.

The insurance industry is changing rapidly, and analytics will play a crucial role in determining how the market responds. All insurers have access to similar data, but few can interpret that data and put it to appropriate use.

Similarly in specialty lines, where the ability to gather and analyze data can lead to speedier, more accurate, and smarter underwriting decisions. More than one-third of all insurers currently use cloud-based data storage options but few insurers have begun to change how they evaluate, quote, and bind risks. The insurance market is shifting rapidly, and analytics will play a vital role in determining the market's next moves. All insurers have similar information at their disposal, but not all are able to interpret that information and make it actionable. Data interpretation will become crucial in determining market swings and subsequently coverage availability and pricing. Though translation from data to decision is a process all insurers undertake, the difference between leading and non-leading companies lies in the quality and type of data used, the methods used to analyze that data, and finally the decision-making parameters informed by the performance metrics derived from analytics.

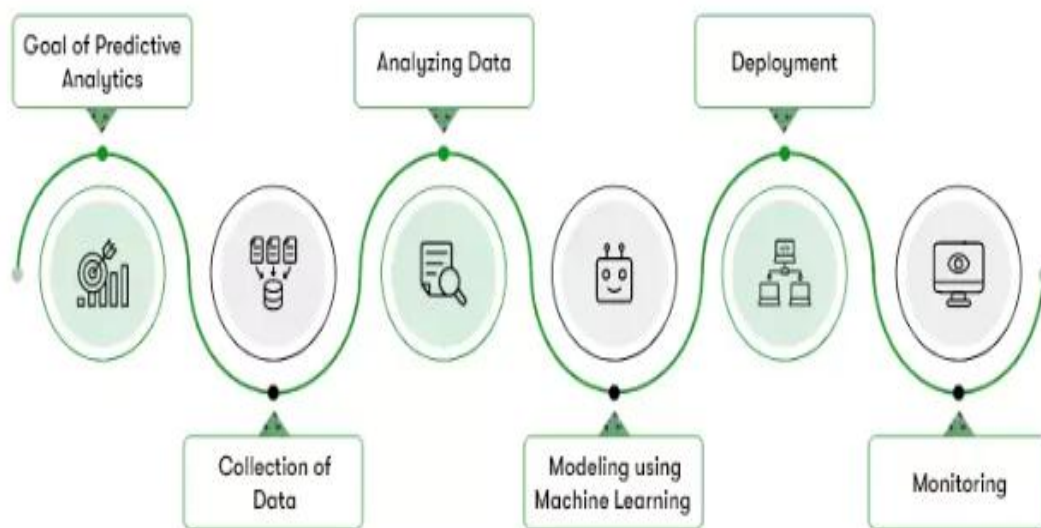


Fig 3: Analytics in Insurance

3.1. Role of Data in Decision Making

Data is arguably the most important contributor to the act of decision making across finance. Reactions to new data concerning interest rates, earnings announcements, inflation numbers, even weather forecasts ripple throughout capital markets in real time. The profession of finance has always been tied closely to the use of data and will undoubtedly continue to evolve with innovation in data [1]. The investment process requires numerical forecasts of prices, demand, supply, etc. These forecasts are obtained from the data and primarily depend on subjective judgment and quantitative analysis; hence, forecasting is mainly a data-driven process. Data collection and innovation of machine learning techniques have grown out of synchrony with the data explosion in recent decades. Advanced econometric models incorporating complex data display a potential for determining large numbers of parameters. Machine learning is an alternative approach for forecasting, which deals with large amounts of data in non-parametric methods to depict relationships among many variables flexibly.

The multilingual professionalism in insurance forecasting is expected to be as challenging as in the investment domain. With the boom of the internet, mobile communication and sensor technologies, the explosion of data in many forms has opened up rich opportunities for modeling, quantitative risk assessment, and inspections. Large amounts of online data continue to be collected and used as first-hand information to gauge assets' perceived risk and recovery ratios. Textual narratives of news articles, corporate filings and financial reports, quantitative metrics from annual and quarterly disclosures, management statements, and bulletins also help construct asset fundamentals. Social media such as microblogging websites disseminate public sentiment and reveal communities' collective reaction to large scale stock price changes. Insurance companies are the stewards of market-adjusted data and protect its value from moral hazards while disclosing generalized price changes and predictives, which might gradually emerge to become complex products across time. Actuaries are expected to stay on track with a long list of data concerning the market and expedient techniques to turn data into information on managing risk.

3.2. Predictive Analytics in Insurance

Insurance is a data-driven industry; therefore analysis of historical data is a key function in the insurance context. Historical data are used to create predictive models that provide the first estimate of the premium adjusted for a specific case. Engineered premiums are then used to either

accept or decline an insurance offer. A clear understanding of customers' behaviours requires comprehensive data analysis. Statistical models can provide predictions with proper interpretability, but they are not always capable of capturing complex non-linear structures in data. AI techniques offer a variety of methods to create adjustable premium models. However, most of them lack interpretability. Furthermore, the capability could be trusted only if models are carefully designed, tested and cross-validated. Each insurance company has a different set of available data that can be explained by the specific insurance market characteristics. It is proposed a paradigm in which an insurance offer would contain an adjustable premium (starting price), an insurance limit (which would have the role of threshold for claims), and the claim estimation model that can properly adjust the ultimate claim prediction.

Actuarial pricing of insurance limits and predictive analytics of future claims for niche (specialty) insurance markets are considered. It is focused on a powder meteorite insurance market – an example of an unconventional specialty insurance niche. For this market segment, data on contract history and claims information are made available. Several predictive models are created based on the knowledge of the subject matter and a thorough exploratory analysis oriented towards model construction. The models are successfully validated by assessing their explanatory capability on a separate test sample. Additionally, an implementation of a web application that would facilitate actuaries' and analysts' work is presented.

Equ 2: Fraud Detection

$$\text{Anomaly Score} = \|x - \hat{x}\|^2$$

Where:

- x = original input feature vector
- \hat{x} = reconstructed input from the autoencoder
- Large scores indicate potential fraud

4. Artificial Intelligence in Insurance

The ongoing merger of AI with insurance transcends digital transformation or even more zealous strategies of data-centricity. AI is affecting the traditional insurance underwriting paradigm and business model by affecting its core, i.e., predictive underwriting, understanding risk. Consequently, AI has the potential to affect the specialty markets, their nature, behavior, and attractiveness in the eyes of the market. Interest and strategic activities in AI in insurance are, therefore, relevant, timely, and urgent. However, insurance is a large and complex domain. The scientific literature and practitioners' discourse are scattered, and AI is a buzzword that lacks an unambiguous definition and frameworks. An operational definition and an overview of the contour of AI as a concept and practical techniques will enable academics and practitioners to better understand this emergent and transformational field and facilitate theory building and cases on AI in insurance. Research in this field is, therefore, as latent and crucial as challenging. It strongly affects the kind, nature, and attractiveness specialty insurance can take in the future and allows for the identification of gaps in the current understanding - quantitative risks, reputation, development, and regulatory risk systems - and research agenda to better understand the societal safety and moral hazard concerns on fairness issues with possible disproportionate effects on the wider economy.

AI is the new buzzword in the insurance landscape. It has a dramatic impact on the insurance value chain and has the potential to disrupt traditional incumbents. Despite efforts across all components of the value chain to understand AI, it remains a largely latent understanding of what AI is. By providing a conceptual overview of AI, specialty insurance, and mainly applied AI techniques, AI's relevancy, and impact are elaborated, and a case for specialty insurance is made. This paper provides insights for the traditional, although ever-evolving business domain of insurance. AI-enabled data-centricity, competition with actor and tech data dominance, a new paradigmatic focus on functional and operational insurance capabilities rather than issues of insurability, risk assessment, regulation, and pricing, complexity of AI and insurability of its predictions, behavior modeling uncertainty are consequences of AI that tremendously affect the long-term nature, winners, and losers of the insurance domain and the specialty business in particular.



Fig 4: AI in Insurance

4.1. AI Techniques Overview

To find the adequate boundaries of risk, premium, and underwriting policy, insurers are increasingly leveraging machine learning. The availability of a multitude of data sources provides new opportunities for risk assessment. Consequently, boundary conditions for specialists are expanding beyond incumbent business diversions and changing competitive dynamics. Insurance specialists see machine learning as the most promising AI advance with short-term implications for search algorithms and underwriting. Advanced machine learning provides insurers with new infrastructure to cost effectively blend and incorporate alternative data sources. It changes the competitive dynamics of the insurance business by providing alternative means to assess and segment risk. New entrants with advanced machine learning capabilities can compete with incumbents despite a low market share. Technologies to interpret complex models are currently not a focus area. Larger insurers will invest substantially in advanced data platforms, and to a lesser degree in model development and maintenance. Innovative agile channels providing advice to consumers will emerge as new market participants.

Despite the promise of AI liability insurance to mitigate the risks in AI deployment, academic literature has been limited with regard to its analysis. It involves the quantification of risks and uncertainties in the AI-powered system and the provision of insurance premiums based on that analysis. Existing literature on AI liability insurance includes the discussion of succession criteria for insurers, evolving insurance policies, and investigation of specific applications. However, these studies ignore the quantitative analysis of risks in AI systems. A generic

quantitative risk assessment is also hindered by two main challenges: a rich diversity of AI-powered systems and proprietary technologies that prevent public access.

4.2. Machine Learning Applications

A number of sources use ML in insurance to price risk. Price prediction is a vital task in the premium setting process, which enables an insurance company to provide reasonable prices to the insured and helps the insured assess the possible costs that may occur after insurance signing. Claims predictions, which disseminate into 3 sub-categories: claims occurrence, claims severity, claims frequency, and predictions. A major premise behind insurance products is the transfer of risk. Risk is the possible occurrence of loss, which needs to be assessed when estimating coverage compensation. Risk assessment is broadly articulated as risk measurement, determination, calculation, or pricing, to distinguish it from a more qualitative risk evaluation. Risk assessment predictions such as claims occurrence and claims severity, which require analyzing a tremendous amount of diverse user data.

Claims occurrence is the foundation for any insurance business, which can be defined as estimating the number of claims filed in the future time intervals based on the information about the transactions occurred in the past time period. To accurately measure its risk, an insurance company needs to predict both the occurrence and the severity of any claims. Many ML techniques can cope with this task as much data is available.

5. Data Sources for Specialty Insurance Analytics

When tackling the problem of data supply and availability, alternative data sources, including unstructured, non-traditional, and non-linear data sources, can be neglected in the analysis. Also does not consider openly available data like weather and climate data, news media, or Twitter feeds. These publicly accessible data sources could be mandatory for some underwriting LGUs for regionally based specialty insurance analysis due to a lack of usage history. Due to the lack of risk drivers, delta pricing strategies outside the scope of Pure Greedy models and loss development triangle models and their hybrid alternatives could also be disregarded in the analysis. Further research could explore neglected data sources transactions available in the customer NPS or inventory analysis. Also neglected in the description of the model category are pure exponential families, typically applied to discrete data. Pure exponential

families like Poisson and Binomial GLM could be an appropriate input for categorical risk drivers and aging effects in specialty insurance pricing.

The model matrix is a vital part of mining risks from insurance transactions. In the current case study, categorization trees, shaped by expert knowledge, create GLM input matrices. Future innovations could also be pursued in this field, allowing for alternative approaches. By developing standardized categories for customer records, initiatives could create sets of namespace tables for customer portfolios. This, in turn, provides models that allow for competitors of the insurance market to price policies for customer accounts, eliminating the competitive edge of privacy. In this regard, portfolio anomalies, like unexpected price shifts, segmentation basin computability, parameter constancy checks, and influence diagnosis, could become competitive trading bots parallel to the equivalency test of websites about boats and engines.

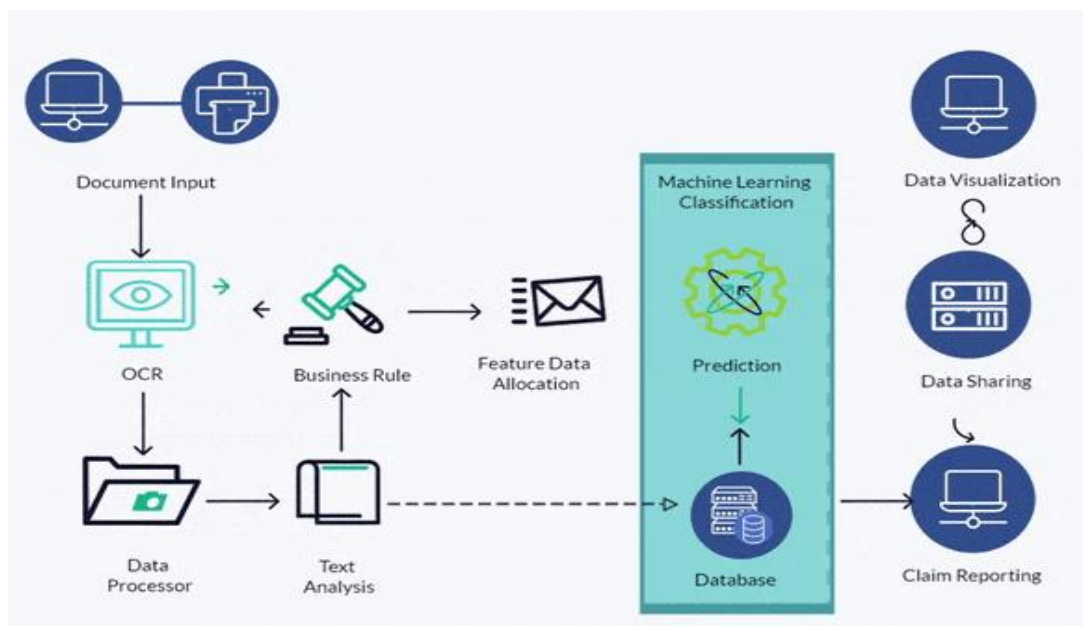


Fig 5: Data Sources for Specialty Insurance Analytics

5.1. Internal Data Sources

AI will help insurers dissect more complex losses that were previously too challenging to quantify. As such, several potentially profitable non-standard risks should receive more attention from the market. This denotes avenues to develop new products for both clients and domestic

economies. In project finance, for example, long-term projects commencing in emerging nations could involve insurance products that guarantee specific outcomes, similar to credit enhancements for municipal bonds. The burgeoning data sources driven by monitoring technologies relate to AI's ability to detect fraud, with implications for errors in continuous monitoring rather than ex-post reporting. For damage-type indemnity product classes, real-time analysis, including imaging analysis, can mitigate losses by catching fires in their infancy or quantifying events before misunderstandings arise.

Monitor all indirect exposure sources, such as climate change. Understanding how client portfolios indirectly expose poor risk diversification will become imperative for a strategic approach to risk aggregation, with implications for capital allocation and investment. The repercussions of climate change could impact specific segments, such as interest ulna or public transport MBSs. Monitoring flows in green bonds or public-private partnerships could additionally enable insurance products to monetize climate change mitigation. Satellite data on weather systems could monitor power generation without resorting to weather stations, and insurers' brands feature in multiple subsectors. Yet, developing new AI-methodologies will require four paradigm shifts for countercyclical funding during volatile cycles, data standardization, AI skill sets proliferation to make efficiency and cost shareable, and transparency around data while enhancing public-private partnerships.

5.2. External Data Sources

The modern predictive landscape provides unprecedented access to large and diverse amounts of information that can affect the likelihood of losses given an insurance contract. However, insurance companies tend to misuse only local data. In contrast to traditional categories of insurance data, namely historical loss, contract, and exposure data, recent trends towards open-source data are leading the way for rapidly growing collections of new, wider-ranging, and softer data sourced from the external domain. These emerging data sources, which are often structured differently than the data used in P&C actuarial science, can complement these legacy data to provide additional insights into the prediction of losses in an insurance contract.

These data gather information from various sources, including satellite observations, internet searches, social media, smart devices, and more. The wide range of arrival and complexity of these data in statistics, machine learning, and P&C insurance raises many

challenges to incorporate them in risk modeling tasks. Nevertheless, proper incorporation of these emerging data sources into existing actuarial loss predictions could produce powerful predictive models that could gain an important edge over competitors in the insurance industry.

The following action items will communicate an innovative treatment framework, termed representation learning, to provide actuaries with practical methods and guidelines to programmatically incorporate new data into pre-existing modeling tasks, and leverage them to improve predictions efficiently. It will be based on the following three-step action items for actuaries: (1) Represent voice with scalable predictive indexes, (2) Represent images with predictive embedding vectors, and (3) Incorporate new representations in modeling to improve predictions. Each consideration will directly examine guidance for actuaries, rather than provide mathematical theories, algorithms, and implementations.

Equ 3: Premium Pricing Optimization

$$\min_{\beta} \left[\frac{1}{2N} \sum_{i=1}^N (y_i - x_i^T \beta)^2 + \lambda_1 \|\beta\|_1 + \lambda_2 \|\beta\|_2^2 \right]$$

Where:

- y_i = optimal premium
- x_i = feature vector (e.g., drone model,
- Combines L1 and L2 regularization

6. AI Techniques for Market Predictions

While specialized insurers and reinsurers often offer bespoke products to clients that are more complex than general insurance products, they also have limited resources with which to support their unique markets. The need to target potential clients as early as possible and offer an appropriate product is critical to achieve a competitive advantage and support firm growth, market share, and financial resilience. This text looks at potential clients for a specialty insurance product in the general aviation sector. There is more information available about aviation safety

events than is used today to predict loss of license. However, the same data sources that could be useful for prediction are also challenging, as they require text analytics, which is not often performed by specialty insurers and reinsurers.

A comprehensive analytics pipeline is outlined to help predict the probability of new business prospecting failure and help the firm trim its pipeline and focus its resources. This analytic pipeline leverages several advanced machine-learning classifiers, some ensemble techniques, and either text or non text features (text being the more accurate). The contribution of this text is to demonstrate how an advanced analytic system can help a niche market insurer find potential clients with extreme loss exposure in terms of incumbent firms or firms that did not apply for a policy. Ensemble classifiers are better approved for text analytics, while any gradient-boosted decision tree-based or random classifier is more beneficial for structured data. Enabling niche market specialty insurers and reinsurers to look beyond the current leading traditional and nontraditional sources of exposure prediction data could help safeguard society from future complex catastrophes.

The events of 9/11 placed a renewed focus on the importance of safety and risk mitigation in the new world. As a response, loss of license insurance markets began to form, providing financial payouts to pilots facing unintended inactivity due to a limited movement due to a medical issue or hull or license damage. There is a somewhat established market for firms that operate large fleets of aircraft in sectors such as passenger transportation for loss of license policies seeking to safeguard pilot income. However, the general aviation insurance market is thickly populated by small-to-medium-sized enterprises that operate 1–15 aircraft. Firms that operate mid-large fleets in sectors such as cargo transportation, charter air transport, and police services also face greater risk than SMEs.

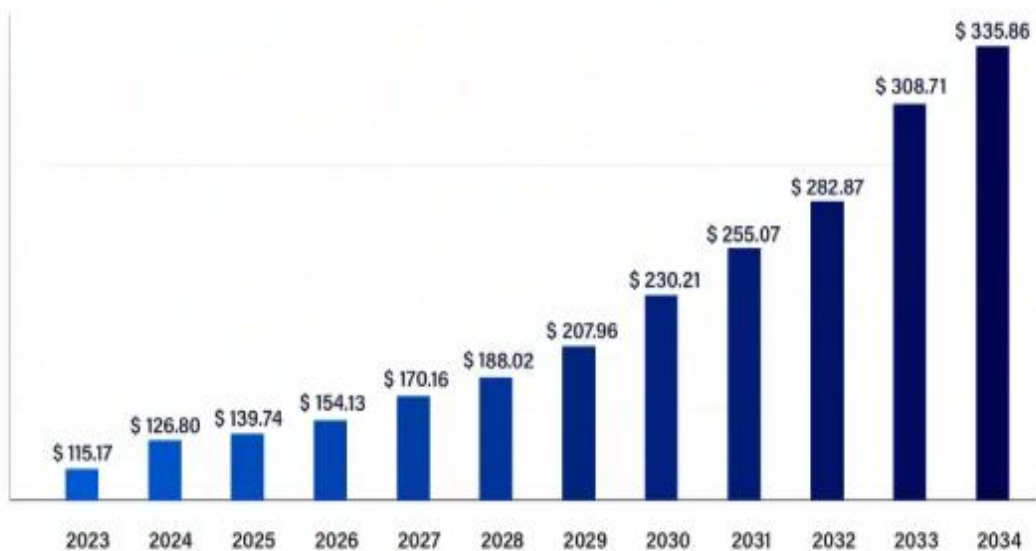


Fig : Specialty Insurance Market Size and Companies

6.1. Regression Analysis

Regression is a popular technique in statistics which predicts a response by giving a set of predictor variables and a link function connecting them using a set of parameters. In insurance prediction problems, Generalized linear models (GLM) are broadly used with two sorts of predictors: continuous and categorical. The main focus is on GLM, which includes the 4 main branches of regression: generalized least squares (GLS), generalized additive models (GAM), generalized additive mixed models (GAMM), and GAMLSS (generalized additive models for location scale and shape). Regression-based methods are comprehended by predicting the aggregation variable directly using a link function to estimate the premium amount.

*Regression-based methods are the most widely used methods in pricing niche insurance products. Noting that variations in premiums are mostly caused by an incorrect model or misestimated model parameters. Research is being conducted into tree-based methods such as boosting generic regression trees and random forest. Also, Bayesian Additive Regression Trees is an analysis tool. It is the preferred candidate due to its ability to automatically perform feature selection. A GLM model is built containing basic interaction effects as a competing baseline model. Multiple approaches can help further.

6.2. Time Series Forecasting

The availability of massive amounts of time-series data opens new opportunities for knowledge extraction and decision-making for companies and practitioners. Time-series data analysis tasks have sparked data science interest in areas such as prediction, classification, and clustering, and tools that find users are also in demand. Time series forecasting (TSF) is tightly coupled with business decisions and is the longest standing part of exploratory temporal pattern discovery and data science. The goal of TSF is doubly defined as predicting the future moments of a time series based on past observations and providing an interpretable model. Linear models for time-series forecasting such as ARIMA have been prominent for a long time and many researchers still rely on such models as they can predict efficiently and provide interpretability. Through the introduction of an exogenous variable such as weather or prices, a linear regression can appropriately predict sales of a store based on the sales of the past week. Furthermore, nonparametric forecasting models, such as seasonal-based predicting methods, would also promise a fair accuracy. On the other hand, advances in machine learning research concluded that data-driven methods, such as deep learning (DL) and neural networks, can be more powerful models, as they can give finer tuning with more configurable functional forms. New approaches bring in end-to-end training of models which makes it easier to implement and deploy a model. Statistical time series analysis has been extensively studied and a wealth of classical time series analysis tasks, models and methods have been proposed. This includes linear models such as ARIMA, exponential smoothing, state space models, or general methods combining ingredients of statistical modeling rooted in different strategies. Most machine learning algorithms require extensive domain knowledge, pre-processing, feature selection, and hyperparameter optimization to solve a forecasting task with satisfying results. Furthermore, analysts with both machine learning and domain expertise are relatively rare, which makes engagement with time series forecasting methods expensive for organizations. This gap fostered a growing demand for frameworks automating the ML pipeline. Automatic Machine Learning (AutoML) provided solutions to build and validate machine learning pipelines minimizing user intervention. Time series forecasting is just one of the areas where AutoML is expected to yield major benefits as analysts typically do not engage with a full implementation of a machine learning method.

7. Conclusion

Predicting the demand for insurance in niche specialty lines has always presented a big challenge to the insurance industry. Natural catastrophes, changing regulations or political environments, and shifting attitudes towards certain businesses have driven up the potential for loss in niche lines and made historical data sparse. Restrictions in the control of traditional input features, such as mandatory purchase actions, limits on indication of intent to buy insurance, and data privacy on certain client attributes or business characteristics, compound the challenge of identification of statistically and heuristically relevant features for prediction of demand. Common approaches to the prediction of demand, such as causal models, technological or signalling methods, or econometric models, often fall short of success in this realm, as are rules of thumb, which have been the long-hailed solution to the problem. Instead, the best results have been achieved through the use of AI models. Existing work has primarily involved textual pre-treatment or feature engineering rules of thumb to derive numeric features to feed into AI models or common feature extractors.

This work builds on this existing understanding and introduces a new way to predict the organic demand for specialty insurance. It is hypothesized that cheap-time-consuming class or regression types of AI-driven models can surpass existing published work, driven by comprehensive and optimized text pre-processing and input concatenation of rich functions to derive relevant features that Shapley analysis shows spuriously hold high relevance relative to the target. The intense-winded class of models can yield predictions that come closest to the demand band suggested by underwriters; the best performing model can yield predictions that closely module up to 80% correct predictions, and yield Shapley importance scores that show comprehensively, robustly and nuanced insightful predictions. This pipeline has potential beyond application on this raw dataset for the prediction of organic demand.

7.1. Future Trends

The global insurance market is facing a crucial crossroad because the established business models of the general insurance industry are increasingly being challenged. The COVID-19 pandemic highlighted the importance of catastrophe insurance and accelerated the social transformation toward a more digital environment. The growing role of big tech firms, the rise of Artificial Intelligence (AI), and changing customer needs call for drastic business model adjustments. The massive data generation in the digital economy delves into new paradigms for

efficient and fair risk pricing. This situation becomes more pressing for specialty lines like cyber, climate, and D&O liability, where rapidly changing technological advancements lead to continuously increasing risk complexity, severity, and systemic interdependencies. The lack of data availability, coupled with the absence of well-established structural models, leads to severe pricing inefficiencies. Therefore, new risk-pricing methods need to leverage the increasing data availability by developing novel data analytics techniques based on AI, neural networks, and agent-based models. Many of these emerging techniques are algorithmically extremely complex and not readily interpretable and may exhibit epistemic uncertainties for newly occurring events such as cyber attacks and pandemic outbreaks.

Despite the rapidly evolving technological landscape, transformation efforts so far have been largely restricted to process optimization to improve cost efficiency and basic applications of AI and ML for underwriting. All these aspects contribute to the vitality of the insurance ecosystem. However, the systemic and competitive implications urge deeper transformation efforts based on smarter risk pricing across the entire risk pricing value chain (from gross and net premium calculation, risk); mitigation, risk transfer, and risk runoff. These new data-driven and technology-enabled methods need to cater to the fundamentally changing customer expectations with respect to availability, affordability, and responsibility of risk mitigation in the digital economy, no matter how novel the risks become, and how imperfect and complex the management and modeling data are.

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