CONTACTBABEL

AI in US Contact Center Verticals

Insurance

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AI in US Contact Center Verticals: Insurance

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AI IN US CONTACT CENTER VERTICALS: INSURANCE

Each business sector has its own specific commercial and operational issues that affect its contact centers.

The "**AI in Contact Center Verticals**" series of reports quantifies the main pressures and issues that affect major US business sectors and their contact centers, and identifies the AI-enabled solutions that can best address them.

This report looks at how insurance contact centers can use AI to address operational and commercial pressures specific to that industry.

Through detailed analysis of surveys with hundreds of US contact centers, ContactBabel has identified three significant concerns and issues which are found in many insurance customer contact operations:

- Excessive call lengths create unnecessary cost
- Increasing low uptake of self-service and digital interactions
- Competing successfully with other insurance companies.

The report shows how and why these issues arise, and looks at ways in which AI-enabled solutions can alleviate them, improving performance and customer experience while helping profitability.

BUSINESS ISSUE #1: EXCESSIVE CALL LENGTHS

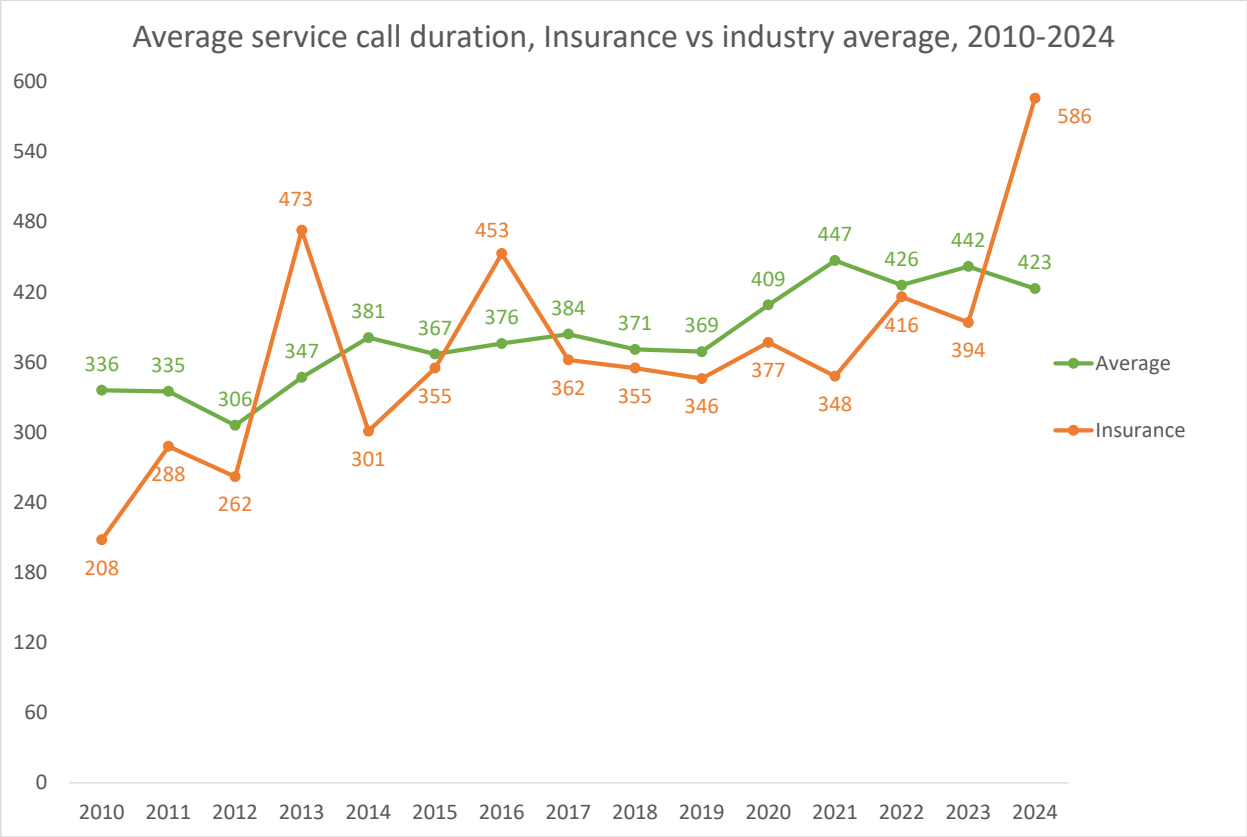
Average inbound call length has traditionally been a metric which most contact centers have tracked, as it is directly related to cost and is also easy to quantify.

Some years ago, enlightened operations began to regard this metric with wariness, as a call which is cut short too quickly can often mean a worse experience for the customer (with lower revenues over time), lower first-call resolution rates (which increase costs in the long-term) and fewer cross-selling or upselling attempts being made.

However, increased call lengths can also mean increased costs and reduced agent availability, and keeping a control on call duration also manages other metrics that are vitally important to their customers, such as queue times and call abandonment rates.

As the chart shows, average call duration across the whole contact center industry has risen, mostly due to easier and shorter calls being handled by self-service. The insurance sector's call durations have also risen substantially in recent years, and have for many years been around the 6 minute mark or even higher, with 2024's figure being close to 10 minutes.

Figure 1: Average service call duration, Insurance vs industry average, 2010-2024



Agents that are on calls obviously cannot also be answering new calls, therefore queue lengths tend to rise as call duration increases. Average queue times in insurance contact centers have risen from 24 seconds in 2015 to 48 seconds currently. Of course, many individual call lengths will be much higher.

While insurers tend to have average speed to answer lower than the contact center industry as a whole, opportunities exist to reduce this even further.

Quite apart from the additional costs being borne by companies with longer calls, the effect on customer experience is pronounced: our annual surveys with thousands of US customers consistently report that the key drivers for positive customer experience are short queue times and high first-contact resolution rates.

Speed to answer plays a vital part in improving the customer experience, and also feeds into other performance measures such as call abandonment rate: obviously, the longer the queue, the more people will abandon the call.

However, this is much less the case for insurance contact centers: call abandonment rates are very low compared to the contact center industry as a whole, at only 4.8% compared to 8.9%.

This is probably caused by the nature of the calls received by insurance companies: existing customers are by their nature tied to the business, and may be in a state of increased emotion, just wanting to speak with someone there and then to get the issue resolved. As such, they are likely to wait for longer in the queue if necessary.

As an aside, it is also worth noting that customers' **perceptions** of how long they have been queueing are far higher than reality: past ContactBabel research asked customers to estimate their typical wait time, which was reported to be 23 times higher than the actual industry average.

This further shows that the effect of queue times on customer experience is exceptional: even a reasonable queue time is a burden to most customers. When the queue time is actually long in reality, it makes a major difference to how those customers then feel about the business they are contacting.

Focus on What Matters to Insurance Customers

DELIVER EXCEPTIONAL CUSTOMER EXPERIENCE (CX) BY UNDERSTANDING THE CUSTOMER'S PERSPECTIVE

Their Perception is Your Reality

Most organizations presume what customers need, want, and expect, only to realize at some point "**We don't know what we don't know!**". While customers are actually very specific about what they engage with your organization, at every step along the customer journey.

The Customer Will Tell You What Works, and What Doesn't

An omni-channel contact center, that offers the choice of voice, chat, email, social media, and video channels, provides the best approach for gathering the intelligence you need to deliver the customer experience your customers expect. **The Upside?** The richness of the data you gather grows every day.

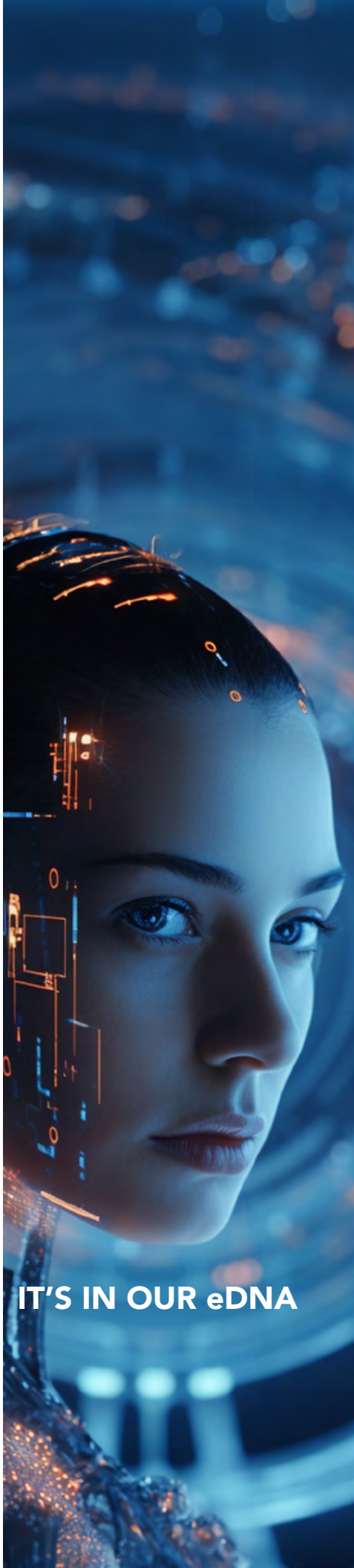
Just Listen

But, this data is only useful if analyzed the right way - objectively. Insight comes from looking at every touchpoint along the customer journey. By aggregating and assessing all interactions, your organization can develop a more complete view of what your customers think.

Leverage Actionable Insights Extracted Using AI

By analyzing customer verbatims, and their context, along with intonation and inferences, insights can be extracted that will clearly tell you how best to engage with your customers, helping you to exceed your customer's expectations.

Click Here to use AI to Deliver the Customer Experience YOUR customers expect.



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HOW CAN AI REDUCE CALL LENGTHS?

AI-enabled solutions can be applied not only to reduce any wasted or low-value time within the call, but also to provide richer content to customers and assist agents to do their job more efficiently.

There are numerous reasons why a call can be long, and insurance companies should consider which parts of a call are necessary and which are not.

The following elements of a typical call are considered:

- Call routing
- Customer identification and authentication
- Talk time
- Post-call wrap-up.

INTELLIGENT CALL ROUTING

While screen popping is useful for cutting time from the early part of a call, the insight that this functionality provides is often limited.

AI enables an instantaneous gathering and assessment of data from multiple sources to occur even before the call has been routed, which allows accurate prioritization and delivery of the call, helping agents by matching skills and requirements, and providing them with information before the call.

For example, an AI working in an airline contact center may judge a call to be urgent if the caller:

- Has booked a flight for this day
- Rarely calls the contact center, preferring to use self-service
- Is a frequent flier
- Is calling from a mobile phone rather than a landline
- Shares a similar profile with other customers who only tend to call for very urgent reasons.

In such a case, the AI may consider that there is a likelihood that the call is directly related to the flight that is happening today (e.g. there's a danger of missing the flight and the customer may need to rebook), and is able to move the call to the front of the queue and route it to an agent experienced in changing flights, and whose communication style suits the situation and customer profile.

Taking this a step further, the AI is able to augment the conversation with suggestions based upon what the agent is doing on the screen and also, through listening to the details of the conversation, is able to provide relevant information without the need for the agent to search for it, such as the next flight to the customer's proposed destination or the refund / transfer options.

At the end of the call, the AI can then email or text the agreed solution to the customer without the agent having to do this manually.

Insurance contact centers will have their own views on the types of customer and scenario where priority routing is of importance to them.

AUTOMATED CUSTOMER AUTHENTICATION

Until a few years ago many businesses relied on trust that the caller was who they claimed to be, asking only for a name and address.

Today, identity verification processes are now seen as critically important and most calls that are not initial enquiries will need to verify a caller's claimed identity by asking for additional information that only the real customer should know (knowledge-based authentication, or KBA).

However, fraudsters have often gained access to personal information such as mother's maiden name and date of birth, along with payment card details that have been stolen from websites, and research has shown that knowledge-based questions are answered correctly by fraudsters the large majority of the time.

Automated customer authentication not only reduces the threat from fraud, but also frees up significant time within a call which can be used to decrease call queues.

Customer security processes are about two factors: are you who you say you are, and are you allowed to do what you are trying to do?

A mean average of 96% of inbound calls to US insurance contact centers require caller identity verification. This takes an average of 60 seconds per call, which is over 10% of a typical call's length: far more than the industry average.

80% of insurance calls are authenticated by agents, with 25% carried out by touchtone IVR, 3% through speech recognition and around 1% by voice biometrics (the total is greater than 100% as some interactions require more than one method to be used).

The cost to the insurance industry runs into hundreds of millions of dollars each year, and adds nothing to the customer experience. It also impacts negatively on agent engagement: an agent may spend half an hour or more of their shift doing the mundane and repetitive task of taking customers through security.

Dedicated authentication solutions such as voice biometrics and call signaling analysis are not yet widely used in the insurance industry, and may be expensive and less suitable for smaller businesses.

Having a voicebot rather than an agent take customers through security will reduce costs while providing a similar level of customer identification to live agent authentication, and has real potential to cut costs and improve agent morale.

The security process remains the same as if it were a live agent taking these details, with the voicebot simply taking their place. If the voicebot detects undue levels of stress or anxiety, it can flag the call to the agent as potentially fraudulent and further security checks can then take place.

AI can improve knowledge-based authentication by learning from previous interactions and dynamically generating questions that are harder for fraudsters to predict or research, but easier for the real customer to answer. For example, instead of static questions, AI generates real-time questions based on recent information that only the legitimate customer would know.

For more information about customer authentication solutions, please download "The Inner Circle Guide to Fraud Reduction and PCI Compliance".

OPTIMISING TALK TIME

AI offers great opportunities for a reduction in talk time, without negatively impacting customer experience or outcomes.

Within calls, time can be wasted by:

- searching for the right information
- accessing multiple applications and screens
- repetition due to mishearing
- pauses for agents to type
- reading long terms and conditions to customers.

AI offers an opportunity to provide timely and effective support to every agent as necessary, actually within the call.

Finding the right information

AI can provide the agent with suggestions about next best action, pull up relevant information from the knowledge base, make suggestions based on customer history and sentiment about optimal cross-selling and upselling opportunities, and even the style of conversation that this customer may prefer.

This has a positive impact on first-contact resolution as well as customer experience, and is of particular use to less experienced agents and for unfamiliar subject areas.

AI monitors the real-time desktop and voice data, triggering processes such as information provision and back-office processes.

It can also provide coaching or alerts if there's a lengthy pause in the conversation or anything has been done wrong. Agents can also use specific phrases, such as "I'll just look that up for you", triggering the AI assistant to take action and putting the information on a single agent desktop application.

AI can work alongside agents to provide relevant knowledge that may be otherwise take a long time to find, and update the knowledge bases available to humans and AI self-service systems using an automated feedback loop that is constantly improving based on actual outcomes.

Accessing a single screen

Many of today's contact centers use complicated, multiple applications, often only loosely linked, which require skilled and experienced agents to navigate, let alone to manage interaction with customers successfully at the same time.

In most cases where complex, multiple applications are used, they are necessary for the agents to do their job, so the question is not "How can we reduce the number of applications?", but rather "How can we improve how the agent uses the applications?".

At the moment, due to complexity, expense and the sheer weight of constant change, applications are either integrated very loosely, or not at all. Agents are trained (or more likely, learn on the job) to switch rapidly between applications, relying on their experience to make sure they don't forget to do what's required

Many contact centers in the insurance sector still rely on information held in legacy systems, and insurance agents use an average of 4.6 applications within a call, and 2.9 post-call, which leads to considerable time being spent – especially by inexperienced agents – trying to find the right information or input data on the correct screen.

There are significant issues around not asking or forgetting to key in information, failing to initiate the correct follow-on processes or type in consistent data. The use of multiple applications will have a negative effect on training times and accuracy rates for new agents as well.

AI-enabled desktop automation solutions can remove the need for agents to log into multiple applications, assist them with the navigation between applications within the call, and make sure that customer data is gathered from the correct places and written back to any relevant databases without the need to navigate through multiple systems.

Within the call, AI-enabled agent assistance can help the agent to provide the right information at the right time, seamlessly linking with multiple back-office applications and databases, providing only what is relevant onto the agent's screen.

Depending on the experience or profile of the agent, what the customer is trying to do and any regulatory inhibitors, on-screen buttons can be enabled or disabled, or access to fields limited according to business rules.

Furthermore, adherence to business processes can be assured by making the agent complete all of the required steps in the transaction (for example, adding call notes, reading disclaimers, etc.).

Reducing repetition due to mishearing

In our survey of 1,000 US customers, 53% reported that they "very or fairly often" had problems hearing the agent, or that the agent asked them to repeat something. This is not just an issue for older customers, as 56% of the youngest cohort reported experiencing this either "very often" or "fairly often".

Lack of audio clarity is not restricted to the contact center's side of the conversation, where high-quality noise-cancelling headsets can improve matters for the agent in terms of removing background noise at their workplace. With more people than ever using mobile telephony to speak with organizations, both agents and customers have to concentrate very hard on the conversation, with the attendant stress and frustration that this can cause, particularly for the agent who may handle 80-100 calls each day.

AI-enabled voice isolation can intelligently remove background noise from both sides of the conversation, both in real-time to assist the smooth and accurate flow of the conversation, and also in recordings to improve post-call analytics and voice-to-text transcription. This also means that businesses have to spend significantly less on upgrading and replacing top-of-the-line headsets.

Reducing the number of times an agent or customer has to repeat themselves can make a huge difference to cost, with the attendant positive effect of reducing call times (and thus queue lengths) and improving customer experience.

Reducing time taken for agents to type

AI can be integrated with CRM systems to populate forms with relevant customer information retrieved from databases or previous interactions, reducing the need for manual entry by the agent.

AI can also listen to the conversation between the agent and the customer using natural language processing to identify key information and automatically enter this data into the correct fields.

Furthermore, if a customer calls about a common issue, AI can predict and pre-fill the form, offering contextual assistance such as automatically populating the relevant fields in the form.

AI can also draw from a customer's history and preferences to personalize the form completion process. It can pre-populate fields with known preferences or previous selections, making the process quicker and more personalized.

AI can also detect errors in real-time as the form is being filled out, such as incorrect formatting or mismatched data (e.g., an invalid address), suggesting corrections or automatically adjusting the information.

Using AI to read terms and conditions

Many insurance organizations have long terms and conditions that they have to read to customers within the call, in order to remain compliant with regulatory requirements.

If the customer is made aware and agrees that an AI is reading out these statements, and that they have the right to speak to a human at any time, businesses may wish to consider using AI to do this.

The agent can then carry out an extra work connected to the call while the terms are being read out, which could save time overall.

Get more from your AI investment
— and faster results

How to build your business case for AI

It's no longer a question of whether to add artificial intelligence (AI) to your technology mix, but when and where. As customer experience (CX) takes center stage, stakeholders are increasingly open to AI apps and appreciate the potential value. And executives might be actively pushing your teams to incorporate AI because they're hearing how other businesses are implementing AI and winning at CX.

What makes AI different than other business cases

The power of AI is how it enables genuine transformation of workflows, processes and organizational structure. These can fuel many long-term benefits, such as improved employee satisfaction and retention, skills acquisition, brand enhancement and a higher valuation of the company.

Developing a business case for AI is a journey of discovery that requires a mindset of continual optimization. The more you and your teams work with AI technology, the more innovative uses you'll find for it. And laying the groundwork for long-term success in a business case is the first milestone.

There's no single roadmap for AI because there are many ways to harness its transformative power. Start with the results you and other stakeholders want to achieve and tell that story. Make sure that you fully understand — and can substantiate — the metrics that support the story of your business case.

As a champion for AI, you'll be challenged to visualize innovation — and validate results — in a way you might not be prepared for.

See our methodology for an AI business case and where to focus your efforts.

Put your focus on how AI will deliver results and what your organization needs to do to make those results possible.

Four steps to construct a business case for AI

1. Strategy: Build consensus and alignment among stakeholders
2. Prioritization: Determine which use cases make sense now and which to save for later
3. Impact: Use metrics to show how changes will impact people, processes and workflows
4. Value: Quantify the business value and tell a compelling story

Get your guide

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REDUCING POST-CALL WRAP-UP

On average, over 14% of insurance agents' time is spent on post-call work, higher than the US contact center industry as a whole.

The post-call wrap-up stage wastes a lot of time and effort through sub-optimal manual processing of data. For example, a change of address request could take many minutes in a non-unified environment, with several separate databases having to be altered, which is itself a process prone to error, risking at least one extra unnecessary future phone call from the customer trying to put things right.

Reducing wrap-up time through AI-enabling the agent desktop is not simply a matter of writing consistently to the correct databases, although this is a key element.

The contact center also initiates a number of processes elsewhere in the enterprise: it is the prime mover for sending out documents, arranging next steps, taking payment and many other key elements to a successful customer-business transaction. Automation solutions (including robotic process automation - RPA) can handle these processes in a consistent, accurate and rapid manner.

AI can also make a major difference to post-call efficiency through helping with call summaries and dispositions. Many agents spend a significant amount of time making notes within calls, and then writing them up afterwards, meaning not only that the agent is not available to take other calls, but also that they are perhaps not giving the customer their full attention during the call.

Using natural language processing and generative AI, call summaries detailing all of the relevant information can be created in real-time which can then be checked and amended by the agent, speeding up the process. Individual agents will have varying writing and summarizing capabilities, so this ensures consistency of quality. The next agent to speak with that customer will also benefit from having a concise and accurate note of what has been discussed previously, meaning that it is not only the original call which is shortened.

If appropriate, the call summary can also be emailed to the customer, which shows them that the business has understood their query and is acting upon it. Having an accurate call record at hand could also remind the customer of key points and action items, preventing some unnecessary repeat calls.

This use case should be seriously considered for implementation, as it has the benefit of being internally focused (thus reducing risk) and can also be applied to almost every call received. Post-call notes do not have a particularly high profile outside the contact center as they are a hidden part of the interaction, but this use case has huge potential for spectacular ROI, especially in insurance contact centers where post-call work is usually very significant.

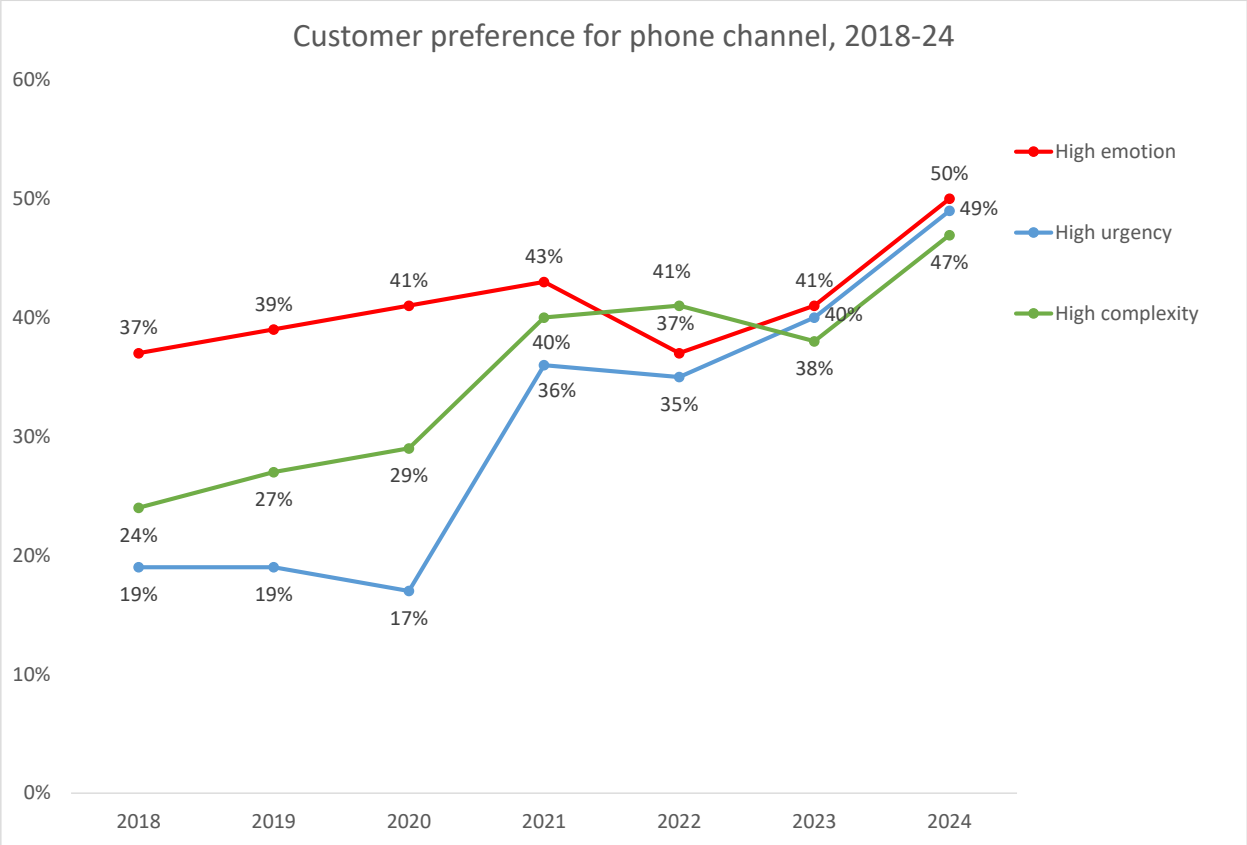
BUSINESS ISSUE #2: IMPROVE UPTAKE OF SELF-SERVICE AND DIGITAL CHANNELS

On average, 24% of calls received to US insurance contact centers are from customers who have tried and failed to solve their issues online through self-service, a figure higher than the contact center industry average of 21%.

Not only is web self-service underperforming, but the insurance industry has one of the highest levels of telephony usage, with the channel accounting for 84% of insurance's inbound customer interactions (this figure includes live agents and voice self-service).

Insurance contact centers – especially claims departments – tend to handle customers who are stressed, have complex enquiries or need urgent answers, and as the chart below shows, these types of interaction are increasingly moving to telephony.

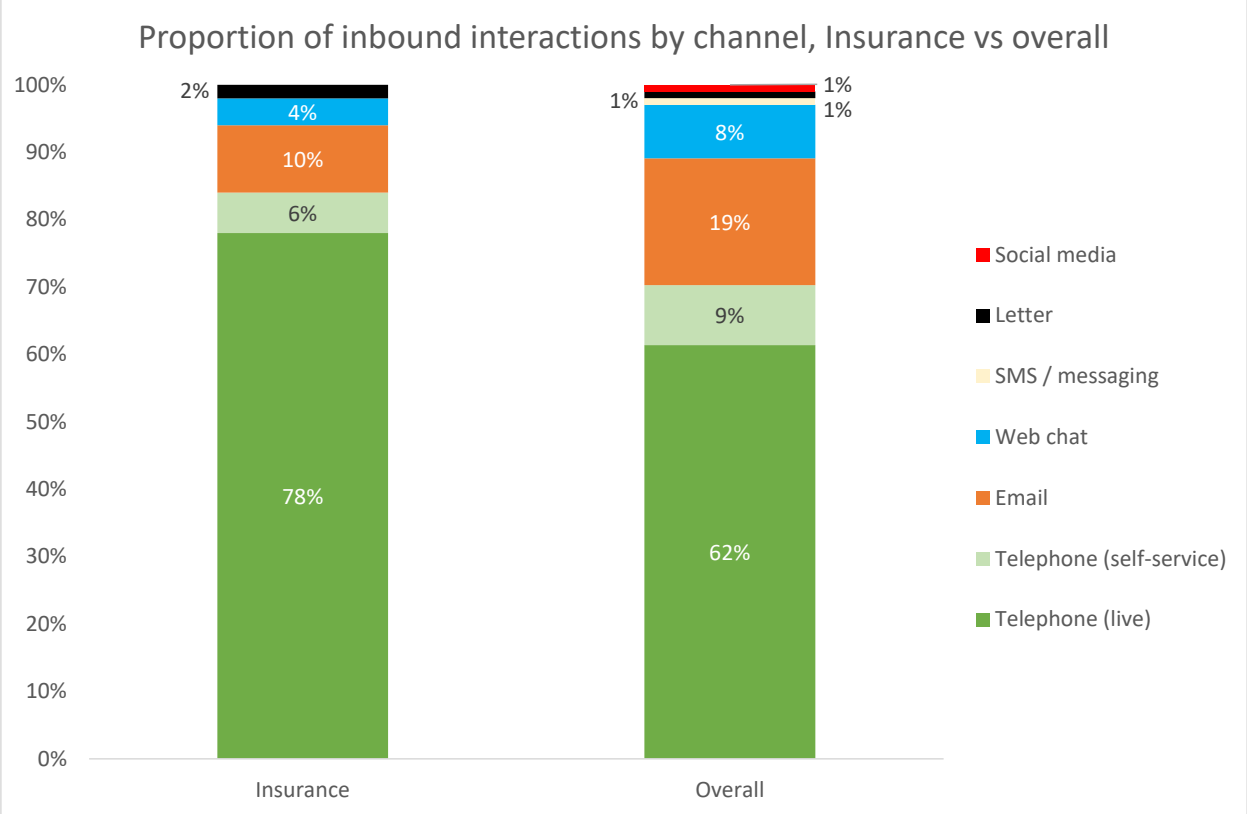
Figure 2: Customer preference for phone channel, 2018-24



While the insurance industry is unlikely to move entirely away from the telephony channel any time soon, it could certainly support digital and automated queries more effectively.

The insurance industry has one of the highest levels of telephony usage, with the channel accounting for 84% of insurance's inbound customer interactions (the large majority being live calls rather than voice self-service).

Figure 3: Proportion of inbound interactions by channel, Insurance vs overall



Weaning customers away from live telephony to other channels is a difficult task, but there are various ways in which insurance companies could approach this.

For self-service, AI can analyze the types of issues that are commonly resolved first time, and suggest enhancements to self-service tools to empower customers to resolve similar issues without contacting an agent.

Based on analysis of past interactions, AI can direct customers to specific self-service resources that have successfully resolved similar issues, reducing the need for agent intervention.

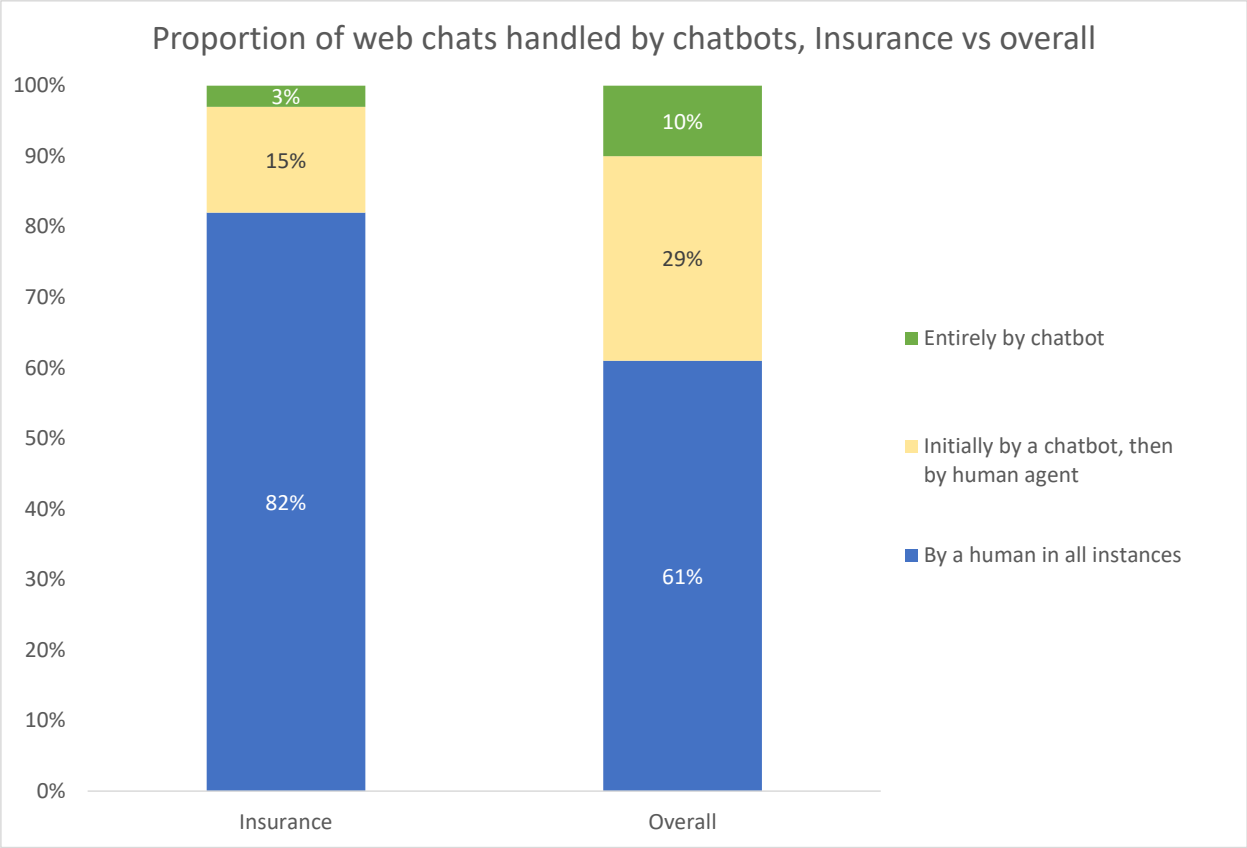
It is not only self-service that is sub-optimal. Despite the efforts of many insurers to engage customers through digital channels, the sector lags behind the contact center industry as a whole. Issues around security and account-specific information often come into play, especially where customers are trying to contact an organization outside a dedicated app or secure website.

The insurance sector has not yet fully embraced web chat, with only 4% of inbound activity coming through this channel, compared to 8% for the contact center industry as a whole.

The chart below shows the proportion of web chats handled by chatbots. The insurance sector is somewhat behind the average contact center, handling 82% of web chats without any use of automation.

Not only is the proportion of web chats handled **entirely** by AI also lower than the industry as a whole, insurance organizations have also had less success in triaging initial web chats, then passing them to agents if the issue is complex or requires high levels of security.

Figure 4: Proportion of web chats handled by chatbots, Insurance vs overall



The sector should look to implement more sophisticated applications that can handle more difficult issues, as well as recognizing earlier in the interaction that it will require a live agent to reach a successful outcome.

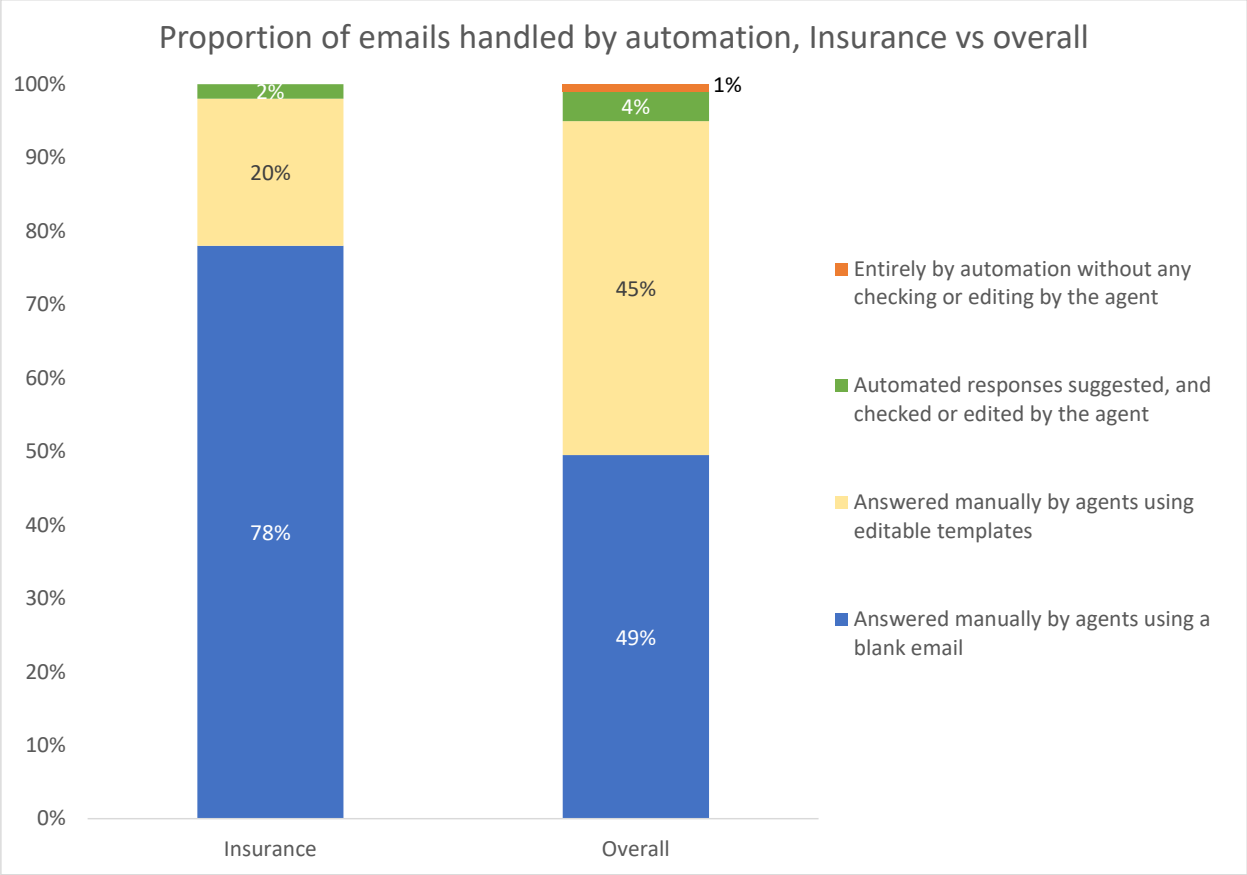
Insurers should also consider a greater automation of email, as 1 in 10 of its interactions come through this channel.

Only 20% of the insurance sector's emails are even written with editable templates, which speed up the response time and maintain accuracy.

Great opportunities exist to use AI to answer emails: AI does not require data to be structured or closed, and natural language processing can understand a customer's email in context of who they are and what they have contacted the business about previously.

Insurers could certainly look at moving more of their emails away from responses handled by live agents, increasing the proportion of emails handled by AI and then checked by agents before they are sent out.

Figure 5: Proportion of emails handled by automation, Insurance vs overall



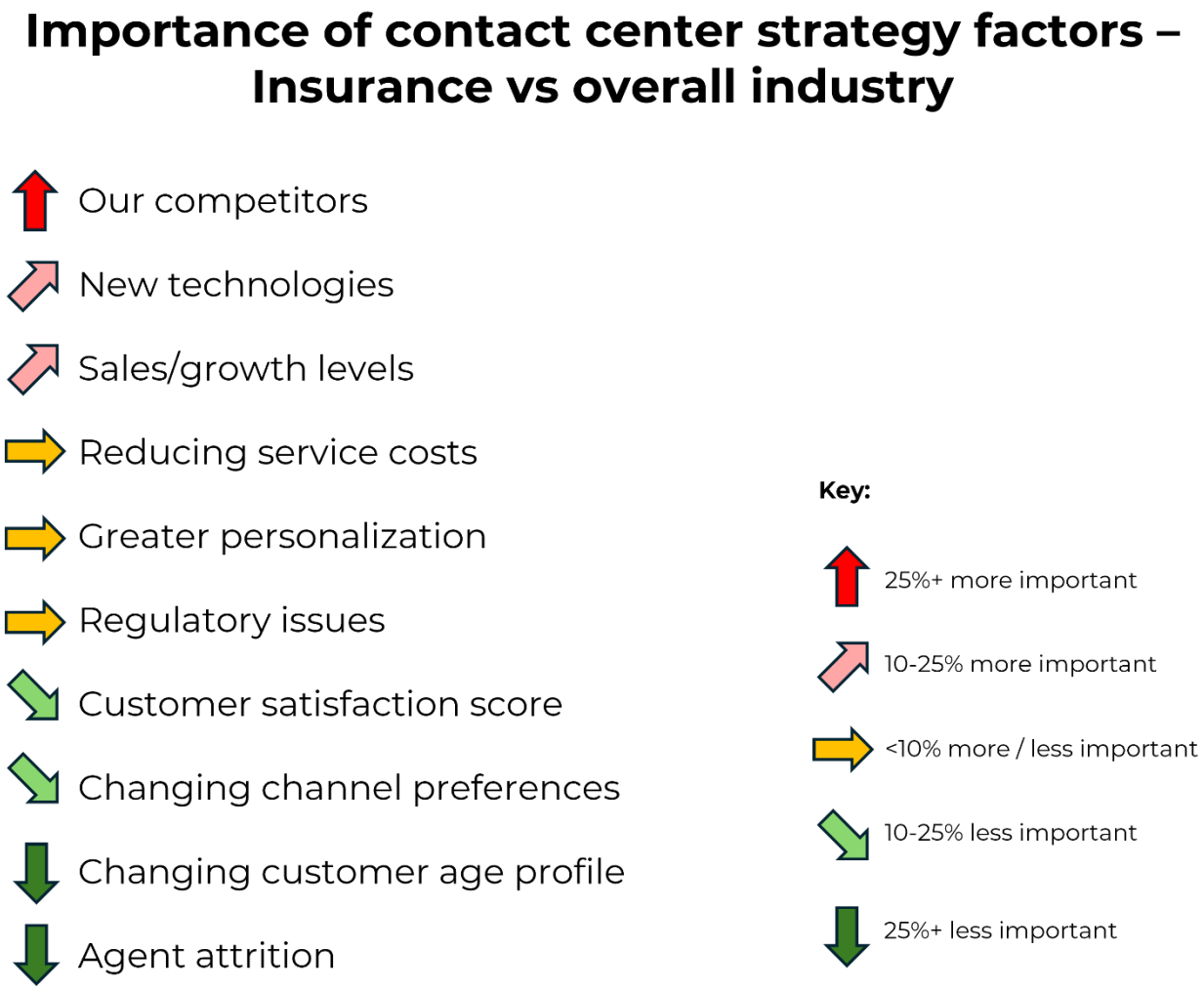
BUSINESS ISSUE #3: COMPETE SUCCESSFULLY WITH OTHER INSURERS

The importance that insurance companies place on various contact center strategy factors can be seen in the chart below.

Businesses from all sectors were presented with 10 factors, and asked the question: "How important are these drivers for strategic contact center change, where 0 is very unimportant, and 100 is vitally important?".

To show the factors that particularly stand out for each sector, the insurance vertical market's score was compared to the contact center industry as a whole, and the chart below shows the areas which differ most from the average.

Figure 6: Importance of contact centre strategy factors – Insurance vs overall industry



Clearly, the insurance sector places far more importance on their competition than the contact center industry as a whole.

Insurance is a very competitive business, with correct pricing and benefits vital to winning new business and keeping existing customers.

AI can provide competitive and actionable information for insurance contact centers through:

Real-Time Call Analysis: AI analyses conversations in real time, identifying when competitors are mentioned. Natural Language Processing (NLP) tools detect references to competing products, services, or companies, and flag these for further review.

Sentiment Analysis: AI gauges customer sentiment when they mention competitors, determining if the customer is discussing the competition positively or negatively. This insight helps understand how the market perceives the competition.

Competitor Product Comparisons: AI detects when customers compare the insurance company's offerings with those of competitors, and recognizes patterns to identify key areas where the competition may be perceived as stronger or weaker.

Trend Identification: aggregating data across multiple calls can identify long-term trends, such as noting which competitors are mentioned most frequently or which aspects of a competitor's offering are most often discussed.

Actionable Insights: AI report generation summarizes competitive mentions, including frequency, sentiment, and any specific products or services discussed. These insights can be shared with marketing, sales, and product development teams to inform strategy.

Training and Response Optimization: Based on the competitive insights gathered, AI can help train agents by providing them with talking points or rebuttals when competitors are mentioned.

Proactive Suggestions: During a call, AI agent assistance provides suggestions or scripts to steer the conversation in a way that highlights the insurer's strengths over the competition. For example, if a customer mentions a competitor's lower price, the agent can be prompted to discuss unique value propositions.

Knowledge Base Enhancement: AI updates and expands the contact center's knowledge base with information about competitors, ensuring that agents have the most current data to hand during calls.

SUMMARY

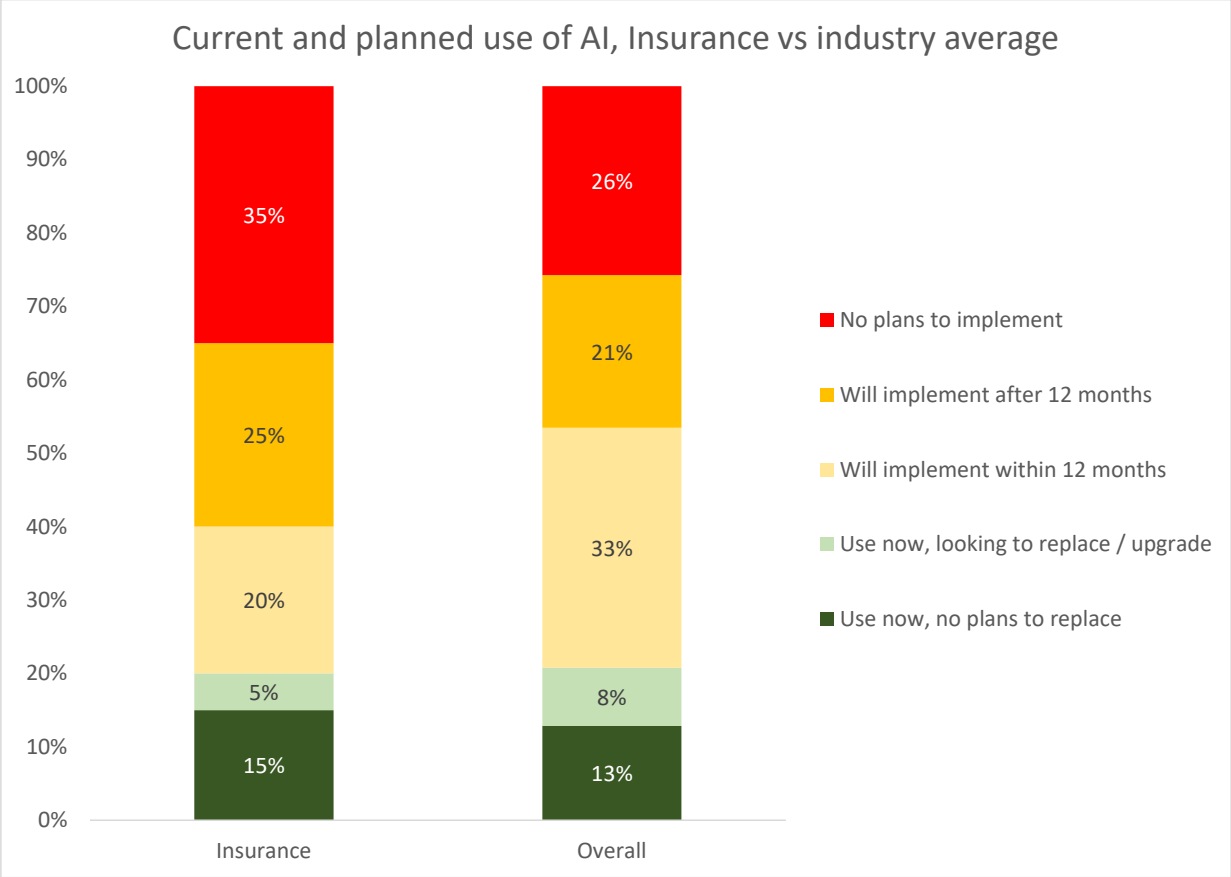
As a whole, the US insurance industry has seen lengthening call durations. While this is not having as much of an impact on customer experience that some other vertical markets are seeing, there is a major opportunity to use AI to trim unnecessary elements of the call, impacting positively on cost per contact while maintain or even improving CX.

The level of self-service and digital contact is lower than would be expected from an industry that generally invests heavily in technology, and although customers have been encouraged to use web chat, the telephony channel is still used far more often than is the case in many other vertical markets.

This is in part caused by the need for security in the insurance sector, as well as customers' strong preference for this channel in times of high emotion, urgency and complexity.

As the chart below shows, the insurance sector as a whole has been no faster than the industry as a whole to implement AI-enabled solutions such as chatbots, analytics and agent assistance, and planned implementations lag a little way behind.

Figure 7: Current and planned use of AI, Insurance vs industry average



Many businesses in the insurance sector would benefit by focusing efforts on reducing the parts of phone calls which are unnecessary to customer experience, and as the report has shown, there are great opportunities to do so without impacting security, regulatory compliance or effectiveness.

The use of chatbots is low compared to the contact center industry as a whole, and there are also major opportunities to improve email communications: a channel which is currently far more important to insurers.

Furthermore, widespread adoption of AI-enabled interaction analytics can identify competitive advantages that insurers can use to develop their offerings and prompt agents within calls with relevant information that can help to win new business or keep existing customers.

As a channel, telephony offers the unique opportunity to create long-term loyalty and even advocacy in an industry where product differentiation can often be difficult to demonstrate to new and potential customers.

The insurance sector has the opportunity to use AI not only to rectify the significant operational issues identified in the report, but also to create lasting business value from each call.

SUPPLIER DIRECTORY

About Enghouse Interactive

Enghouse Interactive (EI), a subsidiary of Enghouse Systems Limited (TSX: ENGH), is a leading global provider of contact center software, services and video solutions, serving thousands of customers for over 40 years. EI solutions enable customers to deliver winning customer experiences by transforming the contact center from a cost center into a powerful growth engine.

Enghouse Interactive's core values – Reliability and Choice – are key differentiators in the global marketplace. Reliability speaks to EI's reputation for consistently honoring its commitments to its customers, staff, partners and investors. Choice is reflected in the unparalleled breadth of its CX portfolio, which enables customers to choose from a wide array of solutions, whether deployed on premise, in the cloud or on a hybrid platform. By leveraging a broad range of technologies and capabilities based on open standards, Enghouse Interactive simplifies the advanced integrations customers require.

Respecting local regulatory requirements, and supporting any telephony technology, Enghouse Interactive ensures that its customers can be reached by their customers – anytime, anywhere, and via any channel.

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ABOUT CONTACTBABEL

ContactBabel is the contact center industry expert. If you have a question about how the industry works, or where it's heading, the chances are we have the answer.

We help US and UK contact centers compare themselves to their closest competitors so they can understand what they are doing well, what needs to improve and how they can do this.

The coverage provided by our massive and ongoing primary research projects is matched by our experience analyzing the contact center industry. We understand how technology, people and process best fit together, and how they will work collectively in the future.

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Free research reports available from www.contactbabel.com (UK and US versions):

- The Inner Circle Guides to:
  - Agent Engagement & Empowerment
  - AI-Enabled Agent Assistance
  - Chatbots, Voicebots & Conversational AI
  - Cloud-based Contact Center Solutions
  - Customer Engagement & Personalization
  - Customer Interaction Analytics
  - First-Contact Resolution
  - Fraud Reduction & PCI Compliance
  - Omnichannel Workforce Optimization
  - Remote & Hybrid Working Contact Center Solutions
  - Self-Service
  - Voice of the Customer
- The UK Contact Centre Decision-Makers' Guide
- The US Contact Center Decision-Makers' Guide
- The UK Customer Experience Decision-Makers' Guide
- The US Customer Experience Decision-Makers' Guide
- Exceeding UK Customer Expectations
- Exceeding US Customer Expectations
- UK Contact Centre Verticals: Communications; Finance; Insurance; Outsourcing; Retail & Distribution; Utilities
- US Contact Center Verticals: Finance; Insurance; Outsourcing; Retail & Distribution
- AI in UK Contact Centre Verticals: Finance, Healthcare, Insurance, Public Sector, Retail & Distribution, Utilities
- AI in US Contact Center Verticals: Finance, Healthcare, Insurance, Public Sector, Retail & Distribution.
- The AI Series: how can AI can help contact centers' operational and commercial issues? Research reports: First-Contact Resolution; Revenue Maximization; Workforce Engagement; Business Insights: Customer Insights; Agent Productivity; Digital Customer Contact; Contact Center Cost Reduction; Customer Satisfaction.