Integration of Explainable Deep Neural Network with Blockchain Technology: Medical Indemnity Insurance

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Abstract. Extracting evidence for processing of medical claims can be time-consuming and complex due to the sharing of sensitive information among multiple organisations. This paper presents a blockchain-based framework for reliable access to sensitive data by utilising a hybrid smart contract running on the Hyperledger blockchain platform. The framework incorporates evidential reasoning for preprocessing ambiguous legal evidence and an explainable deep neural network (DNN) model for transparent decision-making in insurance claims, which continuously learns from lawyers' input. It addresses the laws on the "Right to be Forgotten" by considering the immutability of the blockchain and the "Right to Explanation" by providing transparency despite the non-linear nature DNN. The study evaluates the proposed framework's effectiveness in pre-litigation decisions for the medical negligence of doctors, demonstrating the importance of periodic retraining using low-confidence samples annotated by lawyers to enhance the model's decision-making capability.

Keywords: Explainable AI, Blockchain, Legal, Insurance, GDPR

1 Introduction

Medical indemnity claims safeguard healthcare professionals against costs and compensation due to medical negligence [1]. The processing of claims by insurance lawyers is time-consuming and complex. Artificial Intelligence (AI) could automate parts of this process, but the ambiguous nature of sensitive medical insurance data may result in less than ideal AI decisions [2]. Explainable Artificial Intelligence (XAI) shows promise in insurance decision-making, rendering AI algorithmic decisions understandable for non-technical end-users and stakeholders [3 - 7]. Current research must focus on enabling secure access to sensitive medical records across diverse organisations, including insurance companies, legal firms, hospitals, and clinical labs [8 - 12].

The proposed framework utilises blockchain technology for secure, tamper-proof data transactions among various organisations to guarantee privacy and security for sensitive medical records. It employs a hybrid smart contract to execute both on-chain and off-chain computations, which automates data access policies and records access by authorised parties. The data accessed by blockchain is integrated with Explainable Deep Neural Network (x-DNN) models to increase trust and transparency in medical indemnity claim decisions. Moreover, it meets essential General Data Protection Regulation (GDPR) requirements on the "Right to be Forgotten" [13-16] and "Right to Explanation" [17], despite the immutable nature of blockchain and the black-box aspect of AI models, respectively.

2 Blockchain Architecture for Accessibility of Insurance Data

The blockchain architecture is evaluated and selected using a multi-criteria decisionmaking approach [18]. This research explores alternative solutions for blockchain platforms, cloud data storage services, and cryptographic key storage for each design criterion. Figure 1 demonstrates the crucial aspects of selected architectural design for offchain and on-chain data storage and computation. The web API server supports the interoperability between a web application for data collection, a blockchain platform, secured third-party cloud storage, and cryptographic key-management service providers. The consent to access the medical data is stored in the Blockchain platform for automated auditing of data access by hybrid on-chain and off-chain computation of conditional logic in smart contracts.

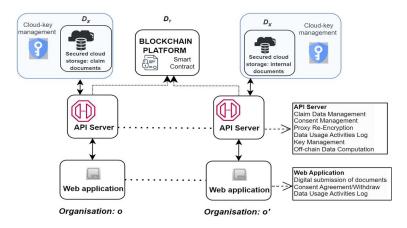


Fig. 1. Framework to Manage Medical Insurance Claims by Blockchain

3 Continuous learning of x-DNN and ER Encoder

Medical data is often ambiguous and incomplete, requiring specialised processing techniques. ER algorithm is utilised to preprocess ambiguous data into explainable numerical features [2]. The features are used as an input sequence in a 1-dimensional deep Convolutional Neural Network (CNN) model. Human expert feedback, such as that from insurance lawyers, allows continuous learning of the CNN, fine-tuning the model for uncertain decisions [19]. The uncertainty in decisions is measured by Entropy [20]. The reasoning behind each decision by CNN can be understood by Layer Wise Relevance Propagation (LRP) [21], Shapley Additive Explanations (SHAP) [22] and Local Interpretable Model-agnostic Explanations (LIME) [23]. Figure 2 demonstrates the methodology.

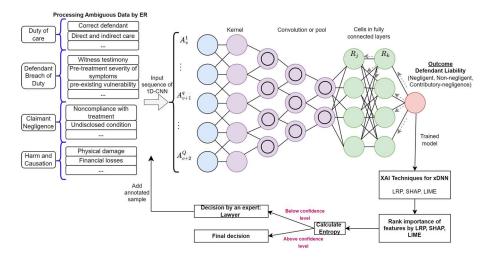


Fig. 2. ER and x-DNN architecture to provide medical indemnity insurance decisions

4 Study on Medical Indemnity Claims

This study demonstrates the results of the proposed framework focusing on medical indemnity insurance for misdiagnosis and delayed cancer diagnosis. It evaluates the medical negligence of clinical oncologists before litigation, as most claims are resolved outside of court through law firms. The dataset had 1888 instances and 23 attributes of medical indemnity claims; 8.52% were negligent, 19.40% were contributory-negligent, and the remaining 72.08% were non-negligent. Bayesian Optimisation trained the hyperparameters of CNN. The input sequence size (height × width) for the 1D-CNN is 84×1 , followed by three convolution and pooling layers with kernel sizes of 50, 100, and 150, and two fully connected layers with 0.20 dropout rate.

Figure 3 shows the performance of Hyperledger Fabric Version 1.4 blockchain by the latency of creating a block and the number of valid transactions in a given time by throughput. A decision by CNN for a defendant (local explainability of an insurance case) can be understood by analysing the importance of features by heatmap of LRP values for four different techniques and the importance of the most relevant features by the SHAP and LIME, shown in Figure 4. Lawyers use these visual explanations as decision support. The ultimate verdict of a pre-litigation case depends on the lawyer's judgment, not the model's. The "negligence" decisions against the defendant were evaluated using the AUC metric through 3-fold cross-validation. The initial AUC score of a validation set by the original dataset is 0.86. The score improved to 0.91 after a second retraining iteration with newly annotated datasets by human lawyers. The accuracy can

be improved after each iteration containing 100 new legal cases. The annotation activity is performed only for the least confident and unknown legal cases.

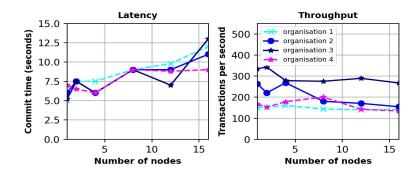


Fig. 3. Latency and throughput of four organisations

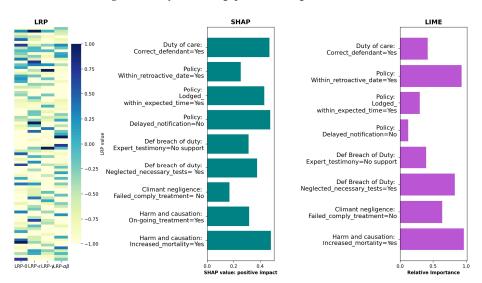


Fig. 4. Local Explainability by LRP, SHAP, and LIME for a negligence medical claim

5 Conclusion

A blockchain-based framework is proposed in this study to ensure secure access to sensitive medical records across multiple organisations. It automates and enforces data access policies while incorporating an x-DNN model for transparent decision-making in medical indemnity claims, complying with GDPR requirements. The methodology is evaluated in pre-litigation decisions regarding clinical negligence by oncologists, emphasizing the significance of periodic retraining with low-confidence samples annotated by lawyers to enhance decision-making capabilities. The results showcase improved transparency, data privacy and security in medical indemnity claims.

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