

Keep insurance work in motion

Why rebuilding the front door of insurance is the fastest way to increase throughput, eliminate operational drag, and unlock enterprise capacity



Introduction

Commercial insurers have spent the last decade modernizing everything except the one thing that matters most: how work enters the enterprise. Billions have been invested in core system replacements, cloud migrations, data lake builds, digital portals, underwriting workbenches, RPA programs, and most recently, generative AI pilots. Carriers upgraded policy admin systems, rebuilt claims platforms, moved infrastructure to the cloud, and stood up advanced analytics teams.

Yet more than 90% of inbound work still arrives as inconsistent, incomplete, unstructured submissions, claims packets, emails, spreadsheets, bordereaux, and loss runs.

That upstream breakdown forces humans to act as the integration layer. Underwriting assistants reconcile submissions. Claims examiners re-key data. Operations teams triage inboxes manually. The result: constrained throughput, brittle automation, AI initiatives starved of clean inputs, and underwriting and claims capacity that never scales the way modernization promised.

The front door of insurance is the operational layer that governs how unstructured work enters the enterprise – before it touches people, workflows, or core systems. It determines whether downstream investments accelerate performance or inherit friction.

Indico is the insurance-native Intake & Orchestration Platform that rebuilds that front door. It governs how unstructured work is ingested, enriched, validated, routed, and orchestrated before it hits core systems and workbenches. By modernizing the point where work enters and moves, Indico unlocks the throughput, accuracy, and capacity carriers expected from every downstream investment.



A structural upstream breakdown

Insurance has reached a breaking point. Operational demand has outpaced enterprise capacity, and the gap widens every year.

Submission volumes are exploding. Claims files contain more documents, more formats, and more nuance. Broker packets are larger, less standardized, and more variable. At the same time, expectations for speed, accuracy, compliance, and transparency continue to rise.

Carriers have invested heavily in policy administration and claims systems, underwriting workbenches, data platforms, and now GenAI. Yet cycle times remain stubbornly slow. Capacity is constrained. Automation initiatives fail. AI pilots stall. The root cause is not downstream systems, it is the upstream flow of work.

Across underwriting, claims, and servicing, the majority of operational work arrives as messy, unstructured inputs that downstream systems were never designed to handle. Instead of systems governing work, people do.

This is not a workflow problem. Workflows assume clean inputs. This is a flow-of-work problem and it sits before every workflow, every system, and every decision.



A system-level productivity breakdown

The failure to modernize upstream operations has created a system-level productivity breakdown across the insurance industry, one that modernization spend has not been able to touch.

Despite billions invested over the last decade in policy systems, claims cores, analytics platforms, workflow tooling, and automation, most commercial carriers continue to operate with expense ratios in the 30–40% range, largely unchanged from a decade ago. Technology improved. The economics did not.

The reason is structural. Across underwriting, claims, and servicing, 30–60% of operational labor is still consumed by intake, document preparation, validation, and routing— all work required simply to make submissions and claims usable before any downstream system can act. For a large commercial carrier with a \$500M–\$1B annual operations cost base, this represents hundreds of millions of dollars per year spent on manual upstream work.

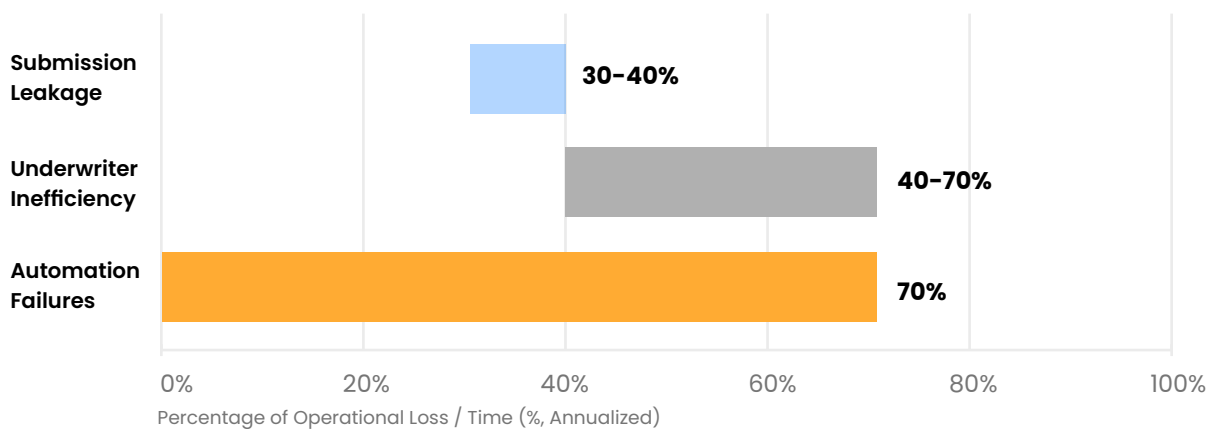
The operational losses compound quickly. Intake failure drives submission leakage, rework, and cycle-time drag across the enterprise. Industry benchmarks show that 30–40% of submissions are never touched due to intake breakdown, underwriters spend 40–70% of their time reconstructing submissions, and up to 70% of automation failures originate upstream before work ever reaches downstream systems.

The industry’s default workaround has been labor, particularly offshore BPO, but this is a recurring tax, not a solution. Costs reset every year, quality and accuracy suffer, and throughput still fails to scale.

This is why, despite a decade of modernization, many carriers have seen limited improvement in underwriting and claims throughput. Industry research from firms like McKinsey, Deloitte, and Accenture consistently shows that while insurers invested heavily in core system upgrades, cloud migration, and digital transformation, productivity gains have lagged expectations — with expense ratios and processing cycle times remaining stubbornly flat across much of the market.

Carriers modernized downstream systems, but left the most expensive and variable part of the operation untouched: how work enters the enterprise.

Chart 1. Industry benchmarks: operational drag across the submission lifecycle





Why modernization has yet to deliver impact

Insurers did not modernize the wrong things. They modernized **around** the problem instead of **through** it.

Over the last decade, carriers rebuilt nearly every downstream capability: systems of record (PAS, claims cores), systems of engagement (workbenches, portals), analytics and data platforms, automation tooling, and successive waves of AI and GenAI pilots.

What they never rebuilt is the system of operation that governs how work enters and moves through the enterprise. As a result, workbenches fill with incomplete submission data, automation breaks on variability, AI starves for reliable inputs and downstream investments inherit brittle foundations.

No amount of downstream sophistication can compensate for upstream chaos. Indico unlocks the value from the well-intentioned investments in digital modernization.



A front door that was never modernized

The core enemy is architectural.

Insurance lacks a unified operational capability that governs the ingestion, enrichment, validation, routing, and orchestration of unstructured work across the enterprise. In its absence, carriers rely on a fragile patchwork of shared inboxes, manual intake teams, email-driven workflows, brittle OCR pipelines, RPA scripts, and offshore BPO labor to keep work moving.

These are not systems. They are workarounds.

They embed tribal knowledge, create inconsistency, and guarantee that every downstream initiative operates on sand. This is why IDP, RPA, workflow tools, PAS extensions, and raw GenAI all fail to deliver end-to-end impact. Each solves a fragment of the problem. None govern the flow of work itself.





The forces making this unavoidable

Several market forces have converged to make upstream modernization no longer optional, but mandatory:

Labor constraints: Talent shortages, retirement waves, and wage inflation — onshore and offshore — are breaking labor-based operating models and eliminating the ability to scale through headcount.

Submission variability: Broker consolidation and proprietary templates are driving extreme inconsistency, attachment explosion, and rework at the front door of the enterprise.

Rising complexity: Regulatory, compliance, and documentation requirements continue to expand across regions and lines of business, increasing intake burden without increasing capacity.

AI expectations outpacing readiness: Boards expect measurable AI impact, but most GenAI pilots will fail, not because the models aren't capable, but because they're operating on broken inputs. You can't prompt-engineer your way out of upstream chaos. AI is a multiplier of quality, not a substitute for structure. If inputs are inconsistent, AI just amplifies the mess faster.

Margin pressure: Expense-ratio scrutiny, reinsurance costs, CAT volatility, and social inflation leave no room for inefficiency or rework-heavy processes.

Softening market dynamics: As markets soften, competition for high-quality risks intensifies. Speed, discipline, and submission capture become decisive advantages. Carriers that leak submissions, move slowly, or rely on manual reconstruction lose the best risks before underwriting ever begins.

Taken together, these forces expose a hard truth: carriers didn't fail to modernize — they modernized the wrong layer first.

As long as unstructured work continues to enter the enterprise inconsistently and manually, no core system, no analytics platform, and no AI model can deliver its promised return.

The next competitive advantage will not come from another downstream system. It will come from rebuilding the front door.

> 90%

of intake work still arrives as inconsistent, incomplete, unstructured submissions, claims packets, emails, spreadsheets, and documents.



Modernization must start upstream

The next decade of insurance modernization will be defined not by where work gets done, but by how it enters and moves through the enterprise.

When inbound work is standardized, enriched, validated, and intelligently routed before it reaches downstream systems, every other investment in the insurance stack finally performs as intended.

Policy administration rules execute correctly, workbenches receive complete, usable submissions, and automation no longer breaks under real-world variability. AI becomes reliable because it operates on clean, structured inputs. Cycle times compress, expert capacity expands, and operational throughput finally scales.

Fixing the upstream flow of work is the unlock for every other transformation initiative.



The capabilities required to modernize insurance operations upstream

Modern insurance operations must be able to ingest any form of inbound work across lines of business and regions, interpret that content with deep insurance domain context, and normalize highly inconsistent structures.

It must derive missing values, validate completeness and correctness, and intelligently route work based on content, priority, and business rules.

Finally, it must orchestrate multi-step flows across systems and teams so work moves through the enterprise accurately, consistently, and at scale.

This capability has never existed as a unified system in insurance.



The intake and orchestration platform for insurance operations

Indico is purpose-built to deliver what insurance operations have never had: a unified system that governs how unstructured work enters the enterprise, is prepared, and moves cleanly into downstream systems.

Here's how Indico succeeds where IDP, RPA, workflow tools, and GenAI experiments fall short.

Insurance-native intelligence from day one

Indico understands insurance content – submissions, ACORDs, loss runs, SOVs, policy jackets, broker attachments, and claims packets – using purpose-built models trained on millions of real-world insurance documents. It knows what should be present, what's missing, what's inconsistent, and what actually matters for underwriting and claims. This isn't OCR with better accuracy; it's insurance comprehension.

Enrichment, validation, and preparation – not just extraction

Indico derives missing values, validates completeness against business rules, flags inconsistencies, and cross-references data across attachments. The output isn't raw extracted text, but structured, validated, system-ready data downstream platforms can trust without manual review.

Orchestration that governs how work flows

Indico routes work based on content, complexity, priority, and capacity, manages exceptions and triggers downstream actions across systems and teams. Work moves through the enterprise with consistency and control – not inbox-by-inbox improvisation.

Built for production insurance operations

Unlike GenAI pilots or brittle RPA scripts, Indico is designed for regulated, high-stakes environments. Every output is traceable, auditable, and explainable, and Indico runs at enterprise scale processing millions of submissions, renewals, endorsements and claims annually.

THE RESULT

Indico prepares work before it reaches downstream systems. Core platforms perform as intended, underwriters focus on underwriting, and automation finally scales.

You can't fix insurance operations downstream. You have to govern how work flows upstream and Indico is built to do exactly that.



Enterprise-scale results across the industry

Indico is running in production at some of the world’s largest commercial insurers, processing millions of submissions and claims annually with measurable, enterprise-wide impact.

At AXA XL, a top-10 global carrier, Indico reduced submission processing time by 80% (from 35 minutes to 7 minutes) while successfully scaling across 16 lines of business spanning the UK, North America, and Asia Pacific.

At Convex, a \$4B+ global specialty insurer, Indico reduced processing times for complex documents like SOVs and loss runs from two hours to under 30 seconds, achieving 95% accuracy with zero human intervention, and went live in eight weeks after a previous vendor failed to exceed 60% accuracy over three years.

Across large U.S. commercial carriers, Indico has reduced document intake processing time by 85%, cleared persistent backlogs, and expanded operational throughput across dozens of insurance businesses without adding headcount.

The pattern is consistent: carriers deploy Indico, achieve production-grade results in weeks, scale rapidly across lines and geographies, and unlock measurable ROI through faster cycle times, expanded capacity, and reduced reliance on manual workarounds. Downstream systems finally perform as intended because they receive clean, structured, system-ready inputs.

This is not experimental. Indico is operating at enterprise scale, delivering the results carriers expected from modernization all along.

↓ 80%	< 30sec	+30M
REDUCTION IN SUBMISSION PROCESSING TIME	SOV & LOSS RUN SUBMISSION PROCESSING TIME	NET INCREASE IN UNDERWRITING PREMIUMS PER QUARTER



XL Insurance Reinsurance



Allstate



Why the front door now determines the outcome

The future of insurance will not be won by who deploys the flashiest downstream tools. It will be won by those who control how work enters the enterprise. Operations is no longer back-office plumbing. It is the engine of capacity, accuracy, and speed.

Carriers who modernize the front door will unlock disproportionate value. Those who don't will continue to modernize on top of sand. The next decade belongs to insurers who rebuild the upstream flow of work and make operations a competitive advantage.

The question is no longer whether to modernize upstream operations, it's how fast you can move before your competitors do.

[Schedule a demo today](#)