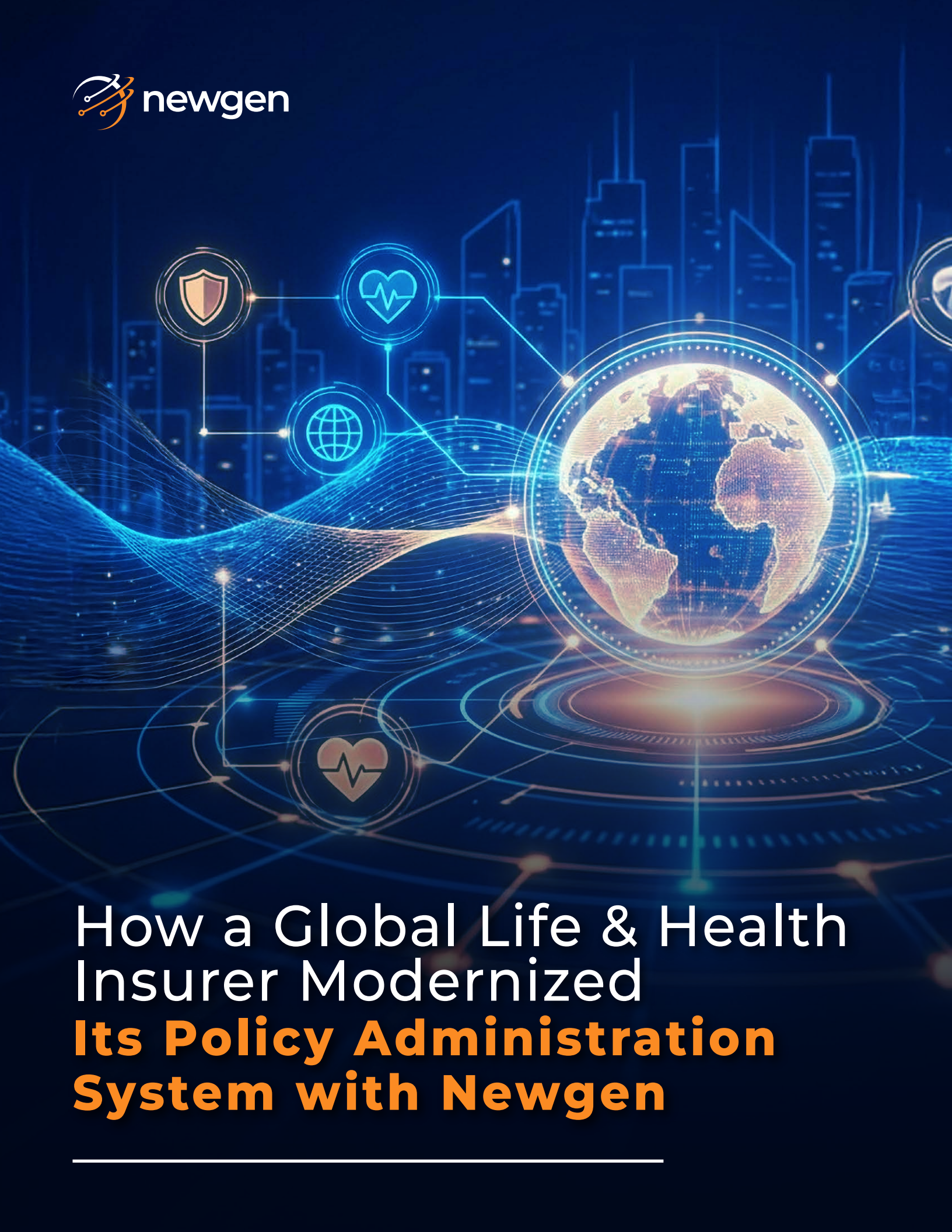


The background of the slide is a dark blue digital-themed graphic. It features a central glowing globe with a grid pattern, surrounded by various icons: a shield, a heart with a pulse line, and a globe with latitude/longitude lines. These icons are connected by glowing blue lines and wave patterns. In the background, there are faint silhouettes of city skyscrapers. The overall aesthetic is high-tech and futuristic.

# How a Global Life & Health Insurer Modernized **Its Policy Administration System with Newgen**

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## At a Glance

Industry: Life & Health Insurance

Focus Areas: Group Health, Individual Life, Healthcare Programs

Operational Model: Multi-channel distribution with large provider ecosystem

Transformation Scope: New Business, Claims, Billing, SLA Governance

A leading global life and health insurer was experiencing accelerated growth across its health insurance portfolio. As policy volumes increased and product offerings expanded, the insurer's legacy policy administration environment began to strain under rising operational complexity.

Manual policy administration workflows, spreadsheet-driven premium calculations, and fragmented systems were limiting scalability. The insurer needed a modernized policy administration foundation to support growing volumes and operational control

## Strategic Goals

- Reduce policy issuance time
- Accelerate claims settlement
- Increase straight-through processing
- Strengthen SLA compliance and audit readiness
- Lower cost per policy and cost per claim



## The Operational Challenges

Manual workflows slowed policy issuance and claims processing

SLA monitoring was reactive, not real time

Spreadsheet-based calculations limited control and auditability

Disconnected systems reduced visibility and coordination

As volumes increased, costs per policy and per claim were rising, threatening efficiency and service quality.

### The Modernization Blueprint

Rather than replacing systems in isolation, the insurer introduced a centralized digital layer to modernize core policy administration processes across the health insurance lifecycle, spanning new business, policy servicing, billing, and claims.

### Core Capabilities Implemented

| Area                                   | Impact                                                                                                                                        |
|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| Intelligent Workflow Orchestration     | Automated new business intake, underwriting support, policy issuance, endorsements, billing, and claims servicing workflows                   |
| Rule-based Decision Framework          | Replaced spreadsheet-based premium and calculation logic with configurable, controlled business rules                                         |
| Straight-through Processing Enablement | Standard risk profiles were automated to minimize manual review dependency                                                                    |
| Real-time Performance Visibility       | Introduced live dashboards tracking SLAs, processing volumes, and operational bottlenecks                                                     |
| Integrated Billing & Reconciliation    | Unified premium billing, reverse billing, claims reconciliation, refund handling, and commission processing within one controlled environment |

## The Structural Shift

### Before

- Manual-intensive policy administration processes
- Spreadsheet-driven premium calculations
- Disconnected systems across policy, billing, and claims

### After

- Orchestrated policy lifecycle across new business, servicing, and claims
- Rule-driven premium and underwriting decisions
- Real-time visibility across policy administration operations

## Business Impact

Policy issuance time reduced by 75%, converting onboarding into a competitive advantage.

Claims processing time dropped by 60%, significantly improving settlement speed.

Straight-through processing increased by 25%, reducing manual dependency.

First-time resolution improved by 30%, minimizing rework and escalation.

SLA compliance rose by 20%, strengthening operational governance.

Customer satisfaction increased by 30%, reflecting faster and more reliable service.

Cost per policy issuance reduced by 15%, while operational cost per claim declined by 20%.



## Now Built for What's Next

Today, new business intake, policy issuance, and servicing move through governed digital workflows. The insurer now operates on a modernized policy administration core capable of supporting scale, compliance, and faster insurance operations.

The insurer has transitioned from operational strain to operational strength, positioned to scale confidently in a competitive global health insurance market.

### About Newgen

Newgen is the leading provider of an AI-first unified digital transformation platform with native **process automation, content services, customer engagement, and AI/ML** capabilities. Globally, successful enterprises rely on Newgen's industry-recognized low-code application platform to develop and deploy complex, content-driven, and customer-engaging business applications on the cloud. From onboarding to service requests, lending to underwriting, and for many more use cases across industries, Newgen unlocks simple with speed and agility.

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