



# Don't Sell Policies, Build Journeys

Transforming the insurance lifecycle from fragmented  
touchpoints to a unified relationship

# Why Insurance Must Become an Experience, Not a Product

Ask someone about their life insurance, and you won't hear them brag about the paperwork. Nobody remembers the fine print on page 14 of their policy. What sticks is the **experience**. How easy it was to apply, how transparent underwriting felt, and how quickly a claim was settled when it really mattered.

And yet, most insurers still operate like they're in the business of transactions. **Quote. Underwrite. Issue. Claim. Renew.** Each is often treated like a standalone process. The problem here is that customers don't live their financial lives in silos. They experience them as connected experiences. And, when insurers don't see it that way, friction builds, delays creep in, and customers slip away.

The digital-first era mandates insurers **move from transactional fixes to journey-first models that unify the entire lifecycle**. AI-powered automation makes this possible, orchestrating interactions to feel faster, fairer, and hyper-personal. Crucially, it enables bending to customer preference, i.e., fully digital for some, human-assisted for others, or hybrid for others.

The case for change is clear. However, delivering under the pressure of forces reshaping the industry is more challenging.





# The Real Forces Pushing Insurers to Transform

As an insurer, you've probably digitized a few steps. A sleek app, an E-KYC, or maybe a chatbot. But, if those upgrades haven't reshaped the whole experience, they're just cosmetic. It's because your customers don't experience their policy as '**quote → underwriting → claim → renewal.**' When touchpoints trip through handoffs, re-keyed forms, or unexplained delays, customers walk away. And, the pressure to transform is only getting heavier. All the forces are pulling in the same direction, '**CHANGE OR FALL BEHIND.**'



- **Customers want speed.** In an age where dinner arrives in three taps, waiting 48 hours for a quote feels prehistoric
- **Regulators want transparency.** AI can cut cycle times, but if customers and regulators can't see 'how' a decision was made, it creates mistrust and legal risk
- **Legacy systems block progress.** Core policy platforms were built for record-keeping. Each new add-on, like a chatbot, digital form, or portal, attaches friction instead of removing it
- **Churn kills faster than competition.** Acquiring a new customer cost up to seven times more than keeping one, yet term life persistency often slips below significantly after year two. Customers aren't just leaving over price. They're leaving because renewal feels as painful as day one

**Speed without  
explainability is a  
short-lived win!**

# Speed Alone Won't Get You There

At this point, it's tempting to think, 'fine, if customers want speed, let's just make everything faster.' And yes, slashing time off underwriting or claims feels like progress. But faster transactions don't fix the broken journey.

They make the cracks appear sooner.

- Insta-issuance collapses if risk evaluation, document validation, or medical appointments are not integrated
- Generic age-based discounts do not match the power of using lifestyle-, financial-, and health-based data for tailored recommendations
- Customers are more likely to walk away when they do not understand why they are being denied or charged as a certain premium

**Insurers must shift from quick transactions to an integrated end-to-end process powered by AI, data, and true orchestration.**



## Speed Gets Attention. Journeys Earn Loyalty

If speed alone isn't enough, what is? The answer is simple.

Stop treating insurance as a series of transactions and treat it as one continuous relationship with the insurer. When those moments feel stitched together, trust develops. When they feel disconnected, attrition follows.

Connecting the dots is where AI-powered orchestration comes in. And, AI-first platforms, like Newgen**ONE**, ties the entire process together.



## Here's how the platform changes the experience at each stage.

### Onboarding and Policy Issuance

Applicants can be assessed quickly when health data, wearables, and financial information are connected through AI profiling. Quotes become instant, with benefits explained in plain language. Identity checks happen over digital KYC, through video, so compliance isn't extra friction. Simple cases are issued instantly, moderate cases are nudged toward quick medicals, and complex ones are escalated for expert review with clear updates.

### Underwriting

Intelligent underwriting workbenches orchestrate workflows across reinsurers, medical providers, and document systems. Risk scores are transparent, so applicants can see why additional steps are needed. Exceptions are escalated smoothly, and reviewers have complete visibility into the case with dynamic routing.

### Claims Management

Customers get visibility into where their claim stands and why, reducing uncertainty during stressful moments. Duplicate claims or errors are flagged automatically. Embedded fraud detection prevents fraud, while approved claims flow directly to payout.

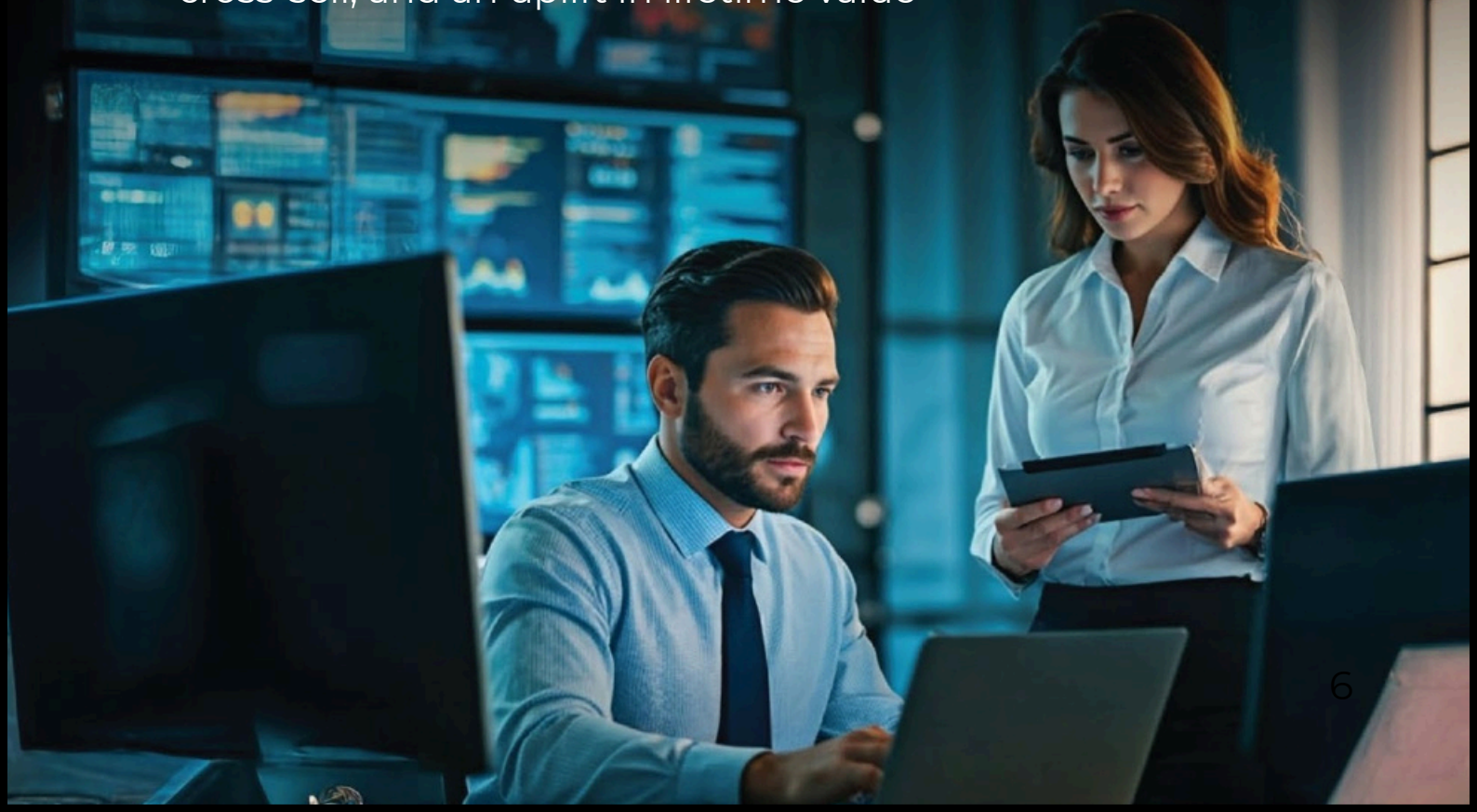
### Policy Servicing and Retention

Signals of potential churn through predictive models trigger timely, relevant outreach before policies lapse. Contextual upsell and cross-sell recommendations are matched to life stage, health, or financial needs. Communication shifts from one-way outreach to ongoing, personalized conversations.

# Results You Can Measure

Insurers, relying on orchestration platforms like **NewgenONE**, are already witnessing measurable results, including speed, trust, and retention.

- **Speed to Issuance:** Low-risk policies can be issued in minutes when AI connects health data, disclosures, and risk models up front, cutting application drop-offs dramatically. The payoff is faster onboarding, which accelerates premium collection and cuts time-to-issuance
- **Trust and Compliance:** Explainable AI in underwriting helps customers see why a document is needed or why a premium is higher, reducing disputes before they happen. Clear audit trails make decisions easier to justify. Customers also gain confidence when they can track progress, understand outcomes, and know they're being treated consistently
- **Retention and Growth:** Retention improves when renewals are seamless. Intelligent servicing also makes recommendations feel relevant, whether higher coverage, a wellness add-on, or financial guidance. The result is better persistence, stronger cross-sell, and an uplift in lifetime value





# Beyond the Policy: Winning on Trust, Not Paper

The debate is over. The market has moved. Customers expect an intuitive experience, regulators demand transparency, and competitors are already proving it can be done. For insurers, differentiation now comes from value beyond the policy, such as wellness initiatives, financial guidance, and trusted communication that build lasting trust.

What will separate the winners from the rest will be their ability to move beyond patch fixes and orchestrate entire policyholder touchpoints end to end. Platforms like NewgenONE show that it's possible to unify content, communication, and process automation without breaking core systems. Policies or premiums won't define the next era of life insurance. It will be defined by trust built in the journey.





## 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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