SUMMARY
This authorized excerpt contains content from a Novarica Market Navigator report that provides an overview of the available policy administration systems and suites for US property/casualty insurers. The report contains profiles of 43 solutions, summarize the vendor organization, technology, differentiators, client base, lines of business supported, deployment options, implementation, upgrades/enhancements, and key functionality.

This excerpt includes the profiles of Insurity. The full report includes profiles of all providers listed in the graphic above.

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INTRODUCTION

About This Report

This report provides an overview of the current solution provider marketplace for policy administration system (PAS) solutions for property/casualty (P/C) insurers. Novarica designed it to assist insurers in drawing up shortlists of potential providers based on vendor market position and offering details.

Novarica Market Navigator™ reports do not provide subjective analyses of vendor solutions. They are based on direct responses to a universal RFI that Novarica distributed, technical discussions with each vendor to verify the RFI responses, and subsequent follow-ups with the vendors to validate and confirm responses.

The RFI covers details of organization, technology stack, client base, and key functionality. Profiles also include a summary of key differentiators, lines of business supported, deployment options, implementation approaches, and how vendors handle upgrades and enhancements. Vendors provided screenshots of the products when available.

These reports do not render judgment since the specific situation and needs of insurers will determine the fit between potential providers and insurers. Novarica provides these types of advisory consultations to more than 100 insurer clients through its retained advisory services.
NOVARICA MARKET NAVIGATOR GRAPHIC

The new Novarica Market Navigator Graphic provides an at-a-glance overview of major providers in a specific segment. It is intended to help insurers quickly understand who is active in the space and their approximately relative market positions. Each provider is shown in one of the following four categories:

- **Dominant Players** have strong market positions and momentum. Their solutions in the segment are well-known.
- **Contenders** have substantial customer experience and momentum.
- **Established Providers** have generally been in the market longer and have substantial customer experience.
- **New Entrants** are emerging providers in this segment. This category includes new companies and established companies with newer solutions. They typically have limited existing customer bases.

Note that the categories refer specifically to this solution area. A company may be a Dominant Player in one segment, but a New Entrant in another based on the maturity of the solution and depth of market experience. Positioning on the graphic within each segment is alphabetical.

Also note that a provider's category does not imply a subjective judgment on solution quality, delivery, or fitness for any specific company's needs. Companies should carefully evaluate individual solutions relative to their specific needs, as well as consider the company's delivery capabilities and organizational bandwidth in addition to recent customer experience.

*Figure 1: Market Position PAS P/C 2020*
MARKET OVERVIEW

Novarica’s studies of property/casualty insurer CIOs, conversations with insurers and vendors, and third-party research indicate that new core system replacements rates are still widespread in the industry. However, they have fallen off from their peak in the early 2010s in specific market segments. Many midsize insurers have already selected and begun new system implementations, but this is balanced by more small insurers considering a replacement. These smaller companies bring even more demand for cloud-based options and low-cost implementations.

The property/casualty policy administration market continues to flourish for those vendors with in-demand systems and reflects several trends:

• The need to improve product development speed and enhance product capability to pursue new opportunities (e.g., excess/surplus lines, workers’ comp), or accommodate market demands (e.g., micro-rating, direct-to-consumer), especially as insurers engage in M&A.

• The need to improve product development flexibility to enter profitable new niches as the commercial market continues to harden, the economy continues to improve, and the personal auto market looks to enter other areas in preparation for external disruption.

• A desire to reduce the sizeable costs of maintaining legacy systems running on aging platforms. Many insurers report that more than 75% of their IT budgets go toward "keeping the lights on" in these environments, leaving little capacity for new product innovation or improving the capabilities of existing products.

• A desire to find cost-effective ways to support the operation and management of core systems. In some cases, this may require insurers to move away from systems that necessitate customization for enhanced functionality and toward systems that use configuration tools to achieve such enhancements. The objective in all instances is to reduce the long-term total cost of ownership.

• Increased data accessibility demands as BI and data analytics become a significant part of insurers’ strategic objectives. Core system data must be available for analysis, whether within the system or via export and transformation, to set rates/pricing, reduce fraudulent claims, and generate other predictive models.

• The ability to integrate with third-party applications seamlessly as part of the underwriting workflow, including analytics for underwriting risk scoring/fraud detection, becomes more critical as insurers move toward more digital processing of submissions and approvals.

• The industry’s gradual acceptance of cloud and SaaS for core systems has evolved into a preference for hosted options. Almost all vendors now provide a hosted subscription model, though the majority of existing clients still use an on-prem installation.
A critical factor in the rise of system replacements is the desire to attract and retain top producers and the new generation of producers who won't stand for the challenges that legacy solutions present. New systems are critical for attracting captive agents as well as increasing wallet share with independent agents.

Another factor for some insurers is the ability to offer policies (or at least quotes) to consumers directly, including the ability to provide sales and service via mobile devices. Attracting and retaining IT staff and front-/back-office employees are also important. Today's job seekers lack the skills and desire to work on systems that are over 30 years old.

Direct sellers—and other industries—have set a high bar for customer expectations of online self-service for quotes, policy changes, claims management, mobile self-service, and more. These expectations have led to a cost-of-doing-business push for customer-facing technology in personal lines, i.e., better customer and agent experience via usability improvements and 24/7 accessibility.

On the commercial side, the rise of online self-service across many consumer industries has raised users' expectations, forcing insurers to provide certain online capabilities, even for lines of business that seemed safe from such requirements just a few years ago. Inflexible legacy PAS can prevent insurers from taking advantage of new opportunities meeting customer and agent expectations.

**M&A and Restructuring Activity**

One market trend to be aware of when selecting a policy administration system is M&A activity. M&A activity has seen a significant decline from its peak several years ago, but acquisitions still happen for a variety of reasons. They can be beneficial or detrimental to insurers depending on the circumstances.

There have been two types of merger activity of note to insurers. The first is that larger vendors have historically acquired additional core systems for their portfolios (e.g., Guidewire acquiring ISCS, Insurity acquiring Oceanwide and Tropics, Majesco acquiring Cover-All, Sapiens acquiring Maximum Processing, StoneRiver, and Adaptik). Vendors added acquired products to portfolios as new product lines, integrated them into core offerings, or simply retired. Acquisitions of this type have declined in the last few years.

The second M&A and restructuring trend is the expansion of what the industry considers part of the core suite—most notably, acquisitions to round out offerings (e.g., Duck Creek acquiring Outline Systems, Guidewire acquiring Cyence, Insurity acquiring SpacialKey). Most insurers know that vendors, even those with broad sets of components in their portfolios, don't always offer a truly integrated suite. However, the promise of working with a single vendor with a stable financial backing is still a benefit to many.
EMERGING TECHNOLOGY AND CORE SYSTEMS

Cloud and Software-as-a-Service

Cloud and SaaS are no longer emerging. A majority of insurers are now considering core PAS systems in the cloud via a Software-as-a-Service (SaaS) model. A growing number of insurers that have adopted a cloud-first policy; cloud is a requirement for all new vendor partners. Vendors have responded accordingly, moving systems to the cloud and adjusting licensing models to allow ongoing subscription approaches.

Novarica expects this shift towards cloud and SaaS models to continue as insurers, concerned about the cost of core system upgrades, investigate the benefits of SaaS models to help mitigate these costs.

Novarica predicted several years ago that by 2020, 50% of insurers licensing a PAS for new books of business would choose a cloud-based or hybrid-cloud-based approach. Novarica’s prediction has proved to be conservative: Leading vendors are reporting demand for cloud solutions in the 80-90% range as of Q1 2020.

Cloud-Optimized Products

A more recent trend is the emergence of derivative product offerings optimized for the cloud. In this model, vendors utilize cloud technology and services that offer unique capabilities that are not available in non-cloud versions. Enhancements include better performance, improved scalability via serverless computing and cloud databases, environment automation, and fault-tolerance with DevOps platforms like Kubernetes, as well as tighter integration with cloud-only services for analytics and AI.

Some vendors have indicated these cloud-optimized versions will be their strategic focus, though none have discontinued support for on-prem products as yet. However, customers choosing non-cloud product versions should accept that the product roadmap will be compromised. Some features will take longer to arrive; others may never become available on-prem.

Novarica expects this shift toward cloud to continue. Choosing on-prem versions will become less attractive as the gap between cloud and non-cloud capabilities grows; vendors will feel commercial pressure to rationalize offerings as demand decreases.

Multi-Tenancy

Another emerging application trend in core systems is multi-tenancy. A multi-tenant system is one where a shared application server infrastructure supports multiple clients. Multiple clients may also share databases in some cases. Insurers have become comfortable with this model by working with vendors like Salesforce and Workday, and new core systems have emerged that are built from the ground up to support multi-tenancy.

Two factors will make multi-tenant core systems more common in the future. First, this approach supports a single codebase for all customers, allowing for more efficient use of cloud hardware requirements and better scalability. A single codebase also simplifies the support and upgrade process and allows for more frequent deployments of improvements.
Second, investors are placing pressure on public enterprise technology companies (across all industries) to adopt a multi-tenant approach because the business model supports more scalable, profitable growth. It allows the vendor to maximize investment in software and minimize investment in services, which positively impacts valuation multiples.

Novarica expects that vendors will continue to support single-tenant deployment in the short term. However, multi-tenancy in core systems will likely become the norm over time.

**InsureTech**

Most insurers are aware of or participating in the InsureTech investment boom out of Silicon Valley (with outposts in insurance hubs like Des Moines and New York). These startups include technology offerings that insurers might want to license and leverage as well as new industry entrants that could become competitors or partners to incumbents.

Despite these InsureTech developments, insurer IT budgets are still dedicated mainly to the maintenance, modernization, and replacement of core systems. The reality is that this is how it should be. CIOs should not expect a core system to encompass all available emerging technology within its borders. Rather, they should consider how a new system's architecture will provide the flexibility and agility necessary to take advantage of future technology and allow integration with future partners. They should know the plan for upgrades and modernization upfront to keep any core system up to date.

**Startup Core Systems**

Some startups in the InsureTech space are developing and selling core systems. Some of these focus on traditional and specialty P/C lines; others focus on emerging, novel products like episodic/on-demand and gig insurance.

The long sales cycles for insurers purchasing and implementing core systems are not a good fit for the short financial runway of Silicon Valley startups, but some pilot programs are in place.

Some startup insurers who have built platforms from scratch are looking into the option of licensing these custom-made platforms to other insurers. It remains to be seen whether these platforms are a viable option for incumbent insurers, or if they reflect that startups are looking for any additional revenue stream.

Novarica does not include vendors in this report unless they have production clients, meaning that some startups that are hoping to enter the field were not eligible. Insurers interested in discussing startup core system vendors should reach out to Novarica directly.
Headless Core Systems, DXPs, and APIs

A "headless" implementation is one where the user interface of the core system is not used or is not the primary means of access the system. Instead, the processing functionality of the core system is accessed via a custom user interface. These implementations reduce the core system to a set of services and business logic, rather than relying on it for the end-user environment.

Insurers looking to provide a differentiated user experience are realizing that customized "head" implementations on top of modern core systems can give them speed to market and reduce the work necessary to implement self-service portals. Some insurers have leveraged low-code or digital experience platforms (DXPs) to build multi-channel experiences on top of service-enabled core systems. Most DXPs and low-code platforms are horizontal systems; they require insurers to rethink how a configurable core system will map to a dynamic user interface.

Headless operation requires comprehensive, granular APIs or services that expose the core functionality to other applications. Some solution providers are building out APIs and microservices to enable flexibility, improve reuse within their solution sets, and address concerns that insurers have voiced regarding the difficulty of accessing functions with legacy systems. Few solution providers have a full set of APIs, but the granularity and availability of services are increasing rapidly. This modern architectural approach will bring a future generation of core system implementations flexibility and longevity as platforms.

As with most architecture innovations, the insurance industry will take some time to see this as a necessity rather than a nice-to-have when making core system selections. Most insurers judge core systems based on capabilities and look for the underlying technology to meet a minimum bar of acceptability. It will take a while before APIs, microservices, and support for headless become part of that "minimum bar" for the bulk of insurers.
KEY COMPONENTS

A well-developed PAS should integrate downstream and back-office systems to provide effective support for the management of contracts and financial results. It should, at the same time, offer interface points for all involved stakeholders (e.g., home office employees, sales partners, premium paying customers) to participate in the management of the policy lifecycle. The system is the foundation for all other processing and is central to the practical and controlled management of a book of business for an insurer. The platform may support single or multiple lines of business. It may also support single or multiple distribution channels.

The PAS itself may offer a suite of capabilities or may interface with a variety of solutions providing other capabilities that unrelated vendors deliver. For example, if the PAS does not include robust modules to handle contact and document management, it should easily integrate with other applications that provide the requisite functionality. Tools providing easy access and navigation to the traditional functions of sales organizations and home office associates are standard elements for PAS solutions.

What the industry considers to be a complete PAS has expanded over the years to include much of what they used to license or build as ancillary functions. Few vendors in this report license a stand-alone policy administration component, though whether the additional components are integral pieces of the suite or stand-alone offerings that they sell and integrate separately varies by vendor. Novarica publishes separate Market Navigator reports to focus on the details of these individual components, while this report covers the entire suite that falls under the PAS umbrella.

Key PAS features and components surveyed by Novarica include the following:

Core Policy Administration
This function handles all core aspects of policy management: account clearance, new business, policy change, renewals, non-renewal, cancellations, cancel/rewrite, reinstate, and premium audit. Core policy admin often handles customer or account management as well as automated rule application and workflow management.

Rating Functions
Rating engines are rule- and table-based components that assess submission risk variables and coverage selections to determine policy premiums. Most policy administration offerings contain some level of rating engine, though the level of complexity varies. Alternatively, PAS can typically integrate with stand-alone rating engines, and some vendors will have pre-existing integrations available with partners.

Underwriter Workbench Functions
Solutions typically provide some form of underwriter workbench that may allow for the management of work objects and integrated workflow that provides transparency into work items and any need(s) for additional information.

Document Functions
Many PAS solutions include the ability to generate documents using custom templates that administrators manage and that merge with policy or customer data at run-time. Organizations
handle document generation in an ad hoc capacity for specific customer communications or a batch fashion for mass printing of statements. Solutions without such features will integrate into third-party document generation/customer communication management (CCM) tools or provide interfaces to do so.

Agent Portal Functions
An agent portal provides agent self-service capabilities and should integrate with PAS and often with third-party data services and enterprise document management solutions. A robust agent portal allows agents to get quotes, submit new business, track status, manage changes, communicate/collaborate with underwriters, and view reports about commissions and transaction histories. Some vendors offer agent-facing capabilities through independent modules they developed for agent users; others expose core system screens to their agents and limit access with role-based security.

Consumer Portal Functions
Some vendors include consumer/policyholder portals as part of a core system suite, though they are not as common as agent portal functions. Consumer portals are typically the same platform as those for agent portals, making use of role-based views to present limited navigation and restrict the use of many of the transactional functions. The most common features of a consumer portal are electronic bill payment/presentation (EBPP) digital ID cards, and the ability to download policy terms.

Reinsurance Functions
Reinsurance functions allow insurers to manage internal retention limits on particular types or sizes of risks and then allocate specified risks appropriately between the primary insurer and others for which appropriate reinsurance treaties are in place.

Business Intelligence Functions
Insurers are increasing investments into BI and data analytics toolsets; a subset of this functionality is making its way into PAS solutions, either embedded or included as a modular or stand-alone component. Vendors without this functionality built-in still need to support an integration approach for moving data to a warehouse or other third-party analytics tool; many insurers choose to use their BI environments instead of internal vendor offerings.

Billing Functions
Billing platforms allow insurers to calculate, prepare, and present billing information to policy- or contract-holders, ensuring that the correct payment options and timeframes are available to them. They also offer a touchpoint between insurers and policyholders, potentially representing a significant communication channel for retention and other customer management activities.

Claims Functions
Claims platforms allow organizations to manage various payment types during the insurance contract lifecycle. These platforms ensure that insurers meet contract provisions and provide critical information that insurers can use to manage fraud detection and the loss profiles of a book of business. It can also be essential for managing compliance-related issues (e.g., unclaimed property regulations).
At-a-Glance

This version of our Novarica Core Systems Map provides a color-coded view for each solution. The coloration indicates whether the vendors include the functions as components integral to the system, integral components that they also offer stand-alone products, components pre-integrated to a third-party partner, or components that are not pre-integrated to the solution.

The specific features this report analyzes fall under the PAS umbrella, including core policy features, rating, underwriter workbench, document creation, agent portal, reinsurance, business intelligence, billing, and claims components. Other components that may be part of solution suites (e.g., document management, CRM) have been dotted in outline on the core systems map and are not considered in this analysis. Please note that several vendors in this report also offer components in these areas as part of their suites.

Please read the full profiles for more details about any of the solutions, which include additional information and explanation on functionality.
INSURITY - INSURANCE DECISIONS SUITE

Executive Summary

- Insurity, Inc. asserts that its driving mission is to simplify and streamline insurance processes for its clients. The company reports that it uses a standardized requirements process that focuses on deviations from established standards and upgrade processes that leverage automated regression testing to achieve this mission.
- Insurity has headquarters in Hartford, CT, and employs 750 people. The company’s annual revenue is in the range of $100M-$250M.
- Insurance Decisions is a suite of solutions that includes core policy features, rating, underwriting features, document creation, agent portal (role-based views), reinsurance, business intelligence, billing, and claims components.
- It currently has over 70 live US/Canadian insurer clients using the suite, most of which are insurers with between $250M and $1B in written premium using the solution to support commercial lines with some personal.
- Publicly announced clients include Zurich, Allstate, Travelers, Hanover, and Arch.
- The solution is browser-based for all user interface functions. It is written primarily in .NET/VB.NET, with some .NET/C#.
- Configuration for insurance products, screens, and workflows is via tools for IT analysts. Configuration for rules, integration to third-party service calls, and document authoring is via tools for BAs and non-IT staff.
- Insurity has an internal implementation staff that typically works with an SI partner or a client’s internal team. Insurity deploys the suite on-prem, hosted at a private data center, and hosted on MS Azure or AWS. The company offers a SaaS delivery model that includes hosting, license, maintenance and support, and implementation of the upgrades. The SaaS delivery model does not currently include perpetual access to the latest version.
- The company reports that the average time to initial go-live is 12 months or less and that the average implementation cost is $2M-$5M.
### Lines of Business Supported

<table>
<thead>
<tr>
<th>Lines of Business Supported</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal auto</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Homeowners</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Personal umbrella</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Dwelling fire</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Boatowners</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Personal package</td>
<td>Solution is designed to support, but no clients live or implementing</td>
</tr>
<tr>
<td>Commercial property</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>General liability</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>BOP</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Commercial crime</td>
<td>Live clients offering this product in all 50 US states</td>
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<tr>
<td>Commercial auto</td>
<td>Live clients offering this product in all 50 US states</td>
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<tr>
<td>E&amp;O/D&amp;O</td>
<td>Live clients offering this product in all 50 US states</td>
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<tr>
<td>Inland marine</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Professional liability (including medical malpractice)</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
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<td>Surety</td>
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<tr>
<td>Other personal lines*</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Other commercial lines†</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
</tbody>
</table>

* Other personal lines include mobile homeowners*.
† Other commercial lines include umbrella, AAIS COP, cyber-liability, and ocean marine.

### Client Base

Globally, Insurity has 74 clients live on Insurance Decisions, 70 of which are insurer clients (i.e., not MGAs, self-insureds) in the US and Canada. Most of these are insurers are between $250M and $1B in written premium and use the solution to support commercial lines with some personal. Most clients use the solution as a stand-alone system (rather than as part of a suite).

Publicly announced clients include Zurich, Allstate, Travelers, Hanover, and Arch.
**Key Functions and Differentiators**

Insurity cites the key functions of Insurance Decisions Suite as:

- All lines/states for commercial, workers' compensation, and specialty
- Full bureau-based content and maintenance
- Full product configurability
- Unique, role-based user experiences across all functional areas
- Ability to call features and functions from a configurable API layer

The company cites as key differentiators its domain expertise and customer base; regulatory support service, hosting, and cloud services; flexible support model, from full to self-service; data and analytics integrated with predictive modeling and analytics; and its flexible, role-based UX support from native UI/external UI using system APIs and microservices from the same instance.

**Solution Architecture and History**

Insurance Decisions Suite launched in 1985 and was re-architected in 2014. The latest release was in February 2020. The company reports that it releases product updates monthly, including regulatory content updates. Insurity reports that 80% of the solution's customers are on the latest version and that 20% are on a version less than three years old. The company reports that 40% of customers have been through at least one upgrade.

The solution requires Microsoft SQL Server databases and Windows server platforms. The solution is written in .NET/VB.NET with some .NET/C#.

**Configurability and User Interface**

Insurance Decisions Suite is browser-based for all user interface functions. The solution offers mobile capabilities via an HTML5 user interface optimized for mobile use. Clients are not allowed to touch core code.

Configuration for insurance products, screens, and workflows is via tools for IT analysts. Configuration for rules, integration to third-party service calls, and document authoring is via tools for BAs and non-IT staff.

**Deployment Options**

Insurity deploys the suite on-prem, hosted at a private data center, and hosted on MS Azure or AWS. The company offers a SaaS delivery model that includes hosting, license, maintenance and support, and implementation of the upgrades. The hosted solution is a multi-tenant app server and a single-tenant database.

**Average Implementation Length and Cost**

Insurity has an internal implementation staff that typically works with an SI partner or a client's internal team. It reports that Insurance Decisions Suite can be ready for initial go-live in 12 months or less and fully rolled out in an additional 90 days or less. The company reports that the average implementation cost is $2M-$5M.
Support

Of the 750 people employed at Insurity, there are under 100 on the product design and engineering team, under 100 on the implementation (not counting partnerships) team, and under 250 on the support team.

Insurity's headquarters are in Hartford, CT, with additional US offices in Dallas, TX; Nashua, NH; Hartland, WI; Sarasota, FL; and Denver, CO. The company also has offices in London and Montreal. Staff supporting Policy Decisions are primarily in Hartford, CT, with additional employees throughout the US and Montreal.

Insurity offers customer engagement initiatives such as an online community, online training, a customer advisory committee, user events, and training seminars.

Partnerships

Publicly announced partnerships include ISO, L&T, IVANS, West Monroe, and Appulate.

Functionality

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![Insurity - Insurance Decisions At-a-Glance](image-url)
Policy Administration Functions
The solution includes policy issue, premium accounting, out-of-sequence endorsement, roster management, bordereaux import, forms management, and manuscripted policies out of the box.

The company asserts that Policy Decisions is a full-featured policy administration system that supports the full policy lifecycle, including submission entry/upload, eligibility/appetite rules, integration with third-party data providers, predictive analytics, rating, quote proposal generation, policy form selection/generation, and policy issuance. It also supports subsequent transactions, including out-of-sequence endorsements, as well as automatic renewals and many other transactions.

Rating Functions
Rating is an integral part of the suite and can be sold as a stand-alone rating engine.

A quick quote option; support for after-inception policy rating for endorsements, cancellations and reinstatements, and renewal processing; out-of-sequence, cross-term endorsements; rating multiple coverage/quote alternatives; and multi-line, multi-state, multi-location rating on a single policy are standard functions. The company reports that the system also has a library of automatic functions that allow unattended processing.

Versioning and update management, change control functions, and auditability of rate versioning are standard functions. An application and forms library with standard and customizable applications and forms is available out of the box. Download to agency management systems and pre-integration to third-party data providers are standard functions.

ISO rates/rules/forms support, NCCI/Bureau of Workers' Comp rates/rules support, ISO-formatted statistical data, and ISO ERC integration are standard functions.

Product design and development tools are standard. Setting insurer-specific defaults is available with configuration via tools for IT analysts or BAs. The solution does not currently include multi-carrier comparison.

Maintaining rating algorithm definition and management separately from rate tables, rate table design and update management tools, the import/export of rating tables to/from spreadsheets (e.g., Excel), rating and rule definition and management (e.g., automatic driver assignment), and date management capabilities are standard.

Displacement testing (i.e., the ability to run existing book of business through proposed rate/product changes to determine impact) and testing, modeling, and product analysis are available with configuration via developer tools, XML manipulation, or a scripting language.

Underwriter Workbench Functions
Underwriting features are integral to the suite and are not marketed as a stand-alone solution.

Uploading/importing the submission data from a structured data feed is a standard function.
Uploading/importing the submission information from documents (OCR-like functionality) is available via out-of-the-box integration to its third-party partner, Appulate.
Support for new business transactions/underwriting, policy change transactions/underwriting, renewal transactions/underwriting, non-renewal transactions, cancellation transactions, and underwriting multiple submissions as one work portfolio are standard.

Capturing underwriting analysis, capturing underwriter loss analysis, underwriter checklists that can validate information and process completeness, submission rating, and providing single current and historical views of insured accounts across the enterprise, lines of business, and policy systems are standard. The solution does not currently include the ability to combine individual quotes for different lines into a single proposal.

Document creation (e.g., proposals, applications, correspondence) and document storage are standard functions. Pricing analysis and scheduled rating information and underwriter checklists that can document information completeness and process completeness are standard functions.

Workflow/task capabilities (e.g., inbox, predefined workflows by transaction or line of business, automatic task assignment, diaries), a rules engine that interfaces to order specific data conditionally, inline reports/dashboards on task/work/work status, inline reports/dashboards to support underwriting analysis, displaying aggregate risk accumulations for the existing book at granular location level (i.e., geo-mashup of existing book and proposed risk), and rules engines that automatically apply underwriting, workflow, and general business rules are standard functions.

Agent-facing capabilities, proposal co-authoring with other underwriters, and screen sharing with other underwriters are standard. IM collaboration with other underwriters is available via out-of-the-box integration to a third-party system or service.

Preconfigured interfaces with policy admin systems, external predictive scoring models, and third-party data services are standard. Preconfigured interfaces with agent portals are available with configuration via developer tools, XML manipulation, or a scripting language. Preconfigured integration with business intelligence environments and preconfigured interfaces with external predictive scoring models are available via out-of-the-box integration to a third-party system or service.

Support for variable binding/approval authority by role and support for email notification/communication with agents and underwriters within the system are available out of the box.

**Document Functions**

Document functions are integral to the suite and are not marketed as a stand-alone solution.

The solution supports mass-produced documents (e.g., statements) and ad hoc documents (e.g., correspondence, manuscripted policies). The suite includes pre-packaged, pre-built forms, libraries, and templates from ISO, NCCI, and AAIS. The primary authoring environment is MS Word. Content, business rules, schema mapping, and data sources are designed to be managed by business analysts.

The solution supports print, e-delivery, and mobile output channels. Managing preferences for print vs. electronic delivery is a standard function. Clients primarily use the solution's built-in
toolset for document authoring and content management workflow, but they have the option to use external workflow/BPM tools.

Content repository and content management tools are available with configuration via tools for IT analysts or BAs. Archival capabilities for all generated documents are standard. The solution supports industry-standard schemas (e.g., ACORD XML) out of the box.

**Agent Portal Functions**
Role-based functionality is integral to the suite and is not sold as a stand-alone agent portal.

New business entry/submission, account clearance, uploading/importing data from Excel (e.g., locations, cars, drivers), quick quote, integration and pre-fill with data services, policy change entry/submission, online payment, renewal quote entry/submission, policy inquiry, policy transaction history inquiry, billing inquiry, claims inquiry, proposal creation, side-by-side quote comparison, agency management system upload, account or client view (in addition to a policy view), underwriter view and tools, agent/underwriter collaboration, and a rating engine are available out of the box. The solution does not currently include ACORD application creation.

Document creation, file attachment support, workflow and task management capabilities, business intelligence and reporting, a consumer portal, and scheduling, diary, and calendar functions are available out of the box. E-signature is available via out-of-the-box integration to a third-party system or service.

**Reinsurance Functions**
Insurity supports integration with third-party reinsurance solutions.

**Business Intelligence Functions**
DataHouse is part of the suite and is also sold as a stand-alone business intelligence component.

DataHouse supports data from any policy, billing, claims, reinsurance, MGA, or TPA application. It provides reporting and analytics via any reporting or analytics tool that can feed data to other downstream applications, e.g., general ledger, reinsurance. DataHouse supports these capabilities with three integrated components: a data integration layer, a data repositories layer, and tools.

The data integration layer interfaces to DataHouse via industry standard and non-proprietary ACORD XML model, or users can configure custom integration layouts with Insurity’s structured data integration option. The data repositories layer provides integrated repositories that store, secure, track, and manage data. The tools allow Insurity and its customers to configure the product, manage data and flow, validate and transform rules, and create custom reports and dashboards.

The solution includes tools to support data governance, dictionaries, quality, and validation; an insurance data model and databases that insurers are intended to use to replace existing EDW, ODS, and/or OLAP cubes; a presentation/reporting component; standard predefined reports and predefined insurance dashboards; an ad hoc reporting tool; and data mining and analytics tools.

The solution supports data movement via batch ETL.
Billing Functions

Billing Decisions is part of the suite and is sold as a stand-alone billing component. Payment and billing plan configurability is standard. The table below shows the availability of other billing functions.

<table>
<thead>
<tr>
<th>Function</th>
<th>Availability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct bill</td>
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<tr>
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<td>Available out of the box with no configuration necessary</td>
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<tr>
<td>Account or list bill</td>
<td>Available out of the box with no configuration necessary</td>
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<td>Third-party (i.e., mortgagee) bill</td>
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<td>Split or multi-payer bill</td>
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<td>Flexible and configurable payment plans</td>
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<tr>
<td>Support for flexible payment types (e.g., payment card, check, EFT, payroll deduction)</td>
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<td>Commission calculation and payment</td>
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</tr>
<tr>
<td>Collections activities and interfaces</td>
<td>Available via out-of-the-box integration to a third-party system or service</td>
</tr>
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<td>Equity billing support</td>
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<tr>
<td>Automated workflow and task management</td>
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</tr>
<tr>
<td>Electronic bill presentment</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Agent portal</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Consumer portal</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Online payment</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Out-of-the-box integration with banks/credit card companies for token-based processing</td>
<td>Yes</td>
</tr>
<tr>
<td>Payroll deduction</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Billing dashboard/reporting</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Workers’ compensation monthly self-reporting</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Pay-as-you-report for workers’ comp</td>
<td>Available via out-of-the-box integration to a third-party system or service</td>
</tr>
<tr>
<td>Invoice and correspondence</td>
<td>Available with configuration using simple tools targeted for IT analysts or BAs</td>
</tr>
<tr>
<td>Check generation/production</td>
<td>Available via out-of-the-box integration to a third-party system or service</td>
</tr>
<tr>
<td>Billing for non-premium receivables (such as claims deductibles paid)</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Payment of non-refund payables (such as policy dividends or mutual dividends)</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Multi-currency support in a single instance of the application</td>
<td>No</td>
</tr>
</tbody>
</table>
Claims Functions
Claims Decisions is part of the suite and is also sold as a stand-alone claims component.

Adjudication
Medical case management, injury detail maintenance (coding), disability management, automated coverage verification, aggregate tracking (erosion of policy limits), and deductible tracking are standard functions.

Catastrophe
Catastrophe definition, automatic identification of catastrophe claims, and attaching multiple LOBs and causes of loss to a single catastrophe are standard functions. Mapping tools are available with configuration via tools for IT analysts or BAs.

Disbursements
Check processing, calculating and scheduling recurring payments, calculating partial or one-off payments, accommodating multiple pay parties (e.g., garnishments), and handling multiple offsets and deductions against benefits (e.g., wage garnishments, child support) are standard functions. Combining multiple pending payments for a single client into one disbursement and OFAC checking are available via out-of-the-box integration to a third-party system or service.

Documents
Image and media management, document rendering, a content repository, content management tools, and multi-channel delivery and output of documents (e.g., PDF, email, web, print) are standard. A correspondence or forms library is available with configuration via tools for IT analysts or BAs. State-specific claims reporting templates are available via out-of-the-box integration with Wolters Kluwer.

FNOL
Recording and storage of new loss notices (including FROI/FNOL) from a web portal, email, fax, or manual entry; mobile and smart device input; scripting for claims intake with reflexive questioning; custom question sets to prompt additional, mandatory questions depending on given answers (branch scripting); claim characteristics scoring (to calculate alerts, trigger workflow, assign a claims handler, or otherwise segment the claim); claimant contact management data capture; and checking for duplicate claims are standard functions. The solution also includes FROI/SROI EDI reporting and integration with external vendors and services (e.g., car rental companies, car/equipment repair shops) via out-of-the-box integration to a third-party system or service.

Fraud
Configurable business rules and tasks (specific to fraud and special investigations) are available with configuration via tools for IT analysts or BAs. The provision of multiple search and reporting criteria for fraud detection (via the ability to track common clients across multiple claims) is available via third-party integration (e.g., ISO Claims Search).

Litigation
Litigation process tracking, including negotiation details and litigation costs, is standard. Creating separate tasks, workflow, diaries, and business rules for litigated cases to allow legal case
management is available with configuration via tools for IT analysts or BAs. The company reports that the system integrates with third-party legal case management systems.

**Multi-Channel**
An agent portal with self-service and a policyholder portal with self-service are standard. E-signature is available with configuration via tools for IT analysts or BAs. Call center integration for FNOL via telephony and call center integration for claims status check via telephony are available with configuration via developer tools, XML manipulation, or a scripting language.

**Reinsurance**
Identifying claims subject to reinsurance through multiple dimensions (e.g., type of claim, limit, location), assignment to reinsurance treaties, and assignment to facultative arrangements are standard functions.

**Reporting**
The standard reporting of claims performance monitoring (including claims handling and high-risk indicators, e.g., fatality, large losses, fraud), standard reporting of configurable metrics for claims reporting, ad hoc reports, dashboards, and reporting that includes jurisdiction-specific reports and forms are standard functions. Electronic reporting or automated state filings are available via out-of-the-box integration to a third-party system or service.

**Reserves, Recoveries, Subrogation**
The granular tracking of reserves and payments, automatic reserve calculations using business rules and risk characteristics, and direct, case, average, factor, and expense reserve types are standard functions. Automatic subrogation identification, jurisdictional wage and rate calculations integrated for workers’ comp, and creating separate tasks, workflow, diaries, and business rules for subrogated cases are available with configuration via tools for IT analysts or BAs. Subrogation billing and the production of correct GL entries are available with configuration via developer tools, XML manipulation, or a scripting language.

**Vendor Management**
Vendor management functions are standard. The processing of required forms (including 1099s) is available via out-of-the-box integration to a DataHouse, which the company notes provides a 1099 extract that can be fed to third-party solutions for producing 1099 forms.

**Workflow**
Automated workflow/task generation, overriding automated processes and triggering workflow processes manually, automatic work assignment based on configurable rules, the inclusion of external documents (e.g., letters, pictures) in file notes, assigning multiple adjusters to a single claim, and generating notes, diaries, and reminders are standard functions. Processing claim workflow trigger (CWT) files at insurer-defined intervals is available with configuration via tools for IT analysts or BAs. Compliance with the Document Repository Interface (DRI) standards is available via out-of-the-box integration to a third-party system or service. The solution does not currently include OCR-triggered workflow or full integration with electronic court filings (ECF2).
Screengrabs
Agent Quotes and Policies

UW Worklist
INSURITY - WORKERS COMPXPRESS

Executive Summary

- Insurity, Inc. asserts that its driving mission is to simplify and streamline insurance processes for its clients. The company reports that it uses a standardized requirements process that focuses on deviations from established standards and upgrade processes that leverage automated regression testing to achieve this mission.

- Insurity has headquarters in Hartford, CT, and employs 750 people. The company's annual revenue is in the range of $100M-$250M.

- The suite includes core policy features, rating, underwriter workbench, document creation, agent portal, business intelligence, reinsurance, billing, claims, and loss prevention.

- It currently has 15 live insurer clients using the suite in the US, all of which are smaller insurers (under $1B) using the solution to support commercial lines.

- Publicly announced clients include Midwest Builders' Casualty, James River, Risk Administration Services, The Builders' Group, and AlaCOMP Self-Insurance Fund.

- The solution is browser-based for all user interface functions. It is written in .NET/C# with some JavaScript, Bootstrap, and Angular.

- Configuration for insurance products, rules, integration to third-party service calls, and document authoring is via tools for BAs and non-IT staff. Workflow is configurable via tools for IT analysts. Screen configuration is available via developer tools, XML manipulation, or a scripting language.

- Implementation is available through Insurity's resources or a partner. Insurity deploys the solution on-prem, hosted at a private data center, and hosted on AWS or MS Azure. The company offers a SaaS delivery model that includes hosting, license, maintenance and support, and implementation of the upgrades. The SaaS delivery model does not currently include perpetual access to the latest version.

- The company reports that the average time to initial go-live is 180 days or less and that the average implementation cost is $750K-$2.5M.
**Lines of Business Supported**

<table>
<thead>
<tr>
<th>Line of Business</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal auto</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Homeowners</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Personal umbrella</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Dwelling fire</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Boatowners</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Personal package</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Commercial property</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>General liability</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>BOP</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Commercial crime</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Commercial auto</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>E&amp;O/D&amp;O</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Inland marine</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Professional liability (including medical malpractice)</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Commercial package</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Specialty</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Workers' comp</td>
<td>Live clients offering this product in 10-49 US states</td>
</tr>
<tr>
<td>Surety</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Other personal lines</td>
<td>Not currently supported</td>
</tr>
<tr>
<td>Other commercial lines</td>
<td>Not currently supported</td>
</tr>
</tbody>
</table>

**Client Base**

Globally, Insurity has 25 clients live on Workers CompXpress, 15 of which are insurer clients (i.e., not MGAs, self-insureds) in the US. These clients are smaller (under $1B) insurers using the solution to support commercial lines. Some of the clients use the solution as a stand-alone system (rather than as part of a suite).

Publicly announced clients include Midwest Builders' Casualty, James River (Falls Lake and Stonewood Insurance), Risk Administration Services, The Builders’ Group, and AlaCOMP Self-Insurance Fund.
**Key Functions and Differentiators**

Insurity cites the key functions of Workers CompXpress as:

- Out-of-the-box policy, billing, claims, portal, reports, dashboards, and loss prevention as well as visual workflow designer for mono-line workers' comp markets
- SaaS cloud hosting and a 100-day implementation plan
- Native integration and automated decision-making capabilities leveraging predictive analytics
- Bureau-based content, maintenance, and support leveraging Insurity's compliance services

The company cites as its key differentiators out-of-the-box SaaS with a purpose-built workers' comp core platform; Visual Workflow Designer to enable automation, manage custom business rules, and control user workflow without custom programming; out-of-the-box document and check printing, document creation and management, including imaging, and workers' comp-specific compliance reporting tools; predictive analytics, visualization dashboards, electronic communication, diary/task management; out-of-the-box external user portal for agencies and insureds, including bill payments, policy info, new business and renewal management, certificate holders, reported payroll management, dashboards, and report generation.

**Solution Architecture and History**

Workers CompXpress launched in 1994 and was re-architected in 2012. The latest release was in March 2020. Insurity reports that 60% of the solution's customers are on the latest version, and 40% are on a version less than three years old. Approximately 100% of customers have been through at least one upgrade.

The solution supports Microsoft SQL Server databases and Windows server platforms. The solution is written in .NET/C# with some JavaScript, Bootstrap, and Angular.

**Configurability and User Interface**

Workers CompXpress is browser-based for all user interface functions. The solution offers mobile capabilities via an HTML5 user interface optimized for mobile use. Clients are not allowed to touch core code, but hooks are provided to call external custom code.

Configuration for insurance products, rules, integration to third-party service calls, and document authoring is via tools for BAs and non-IT staff. Workflow is configurable via tools for IT analysts. Screen configuration is available via developer tools, XML manipulation, or a scripting language.

**Deployment Options**

Insurity offers on-premise, hosted at a private data center, and hosted on AWS or MS Azure deployment options for Workers CompXpress.

Insurity deploys the solution on-prem, hosted at a private data center, and hosted on AWS or MS Azure. The company offers a SaaS delivery model that includes hosting, license, maintenance and support, and implementation of the upgrades. The SaaS delivery model does not currently include perpetual access to the latest version. The hosted solution is a multi-tenant app server and a single-tenant database.
Average Implementation Length and Cost

Insurity implements the solution through the company's resources or its implementation partner, RCG Global Partners. It reports that Workers CompXpress can be ready for initial go-live in 180 days or less and fully rolled out in an additional 180 days or less. The company reports that the average implementation cost is $750K-$2.5M.

Support

Of the 750 people employed at Insurity, there are between ten and 50 on the product design and engineering team, the implementation team (not counting partnerships), and the support team, respectively.

Insurity has headquarters in Hartford, CT, and has additional US offices in Dallas, TX; Nashua, NH; Red Wing, MN; Sarasota, FL; and Denver, CO, as well as international offices in Montreal, Canada, and London, England. Staff positions supporting WCXP are primarily in Sarasota, FL, with additional employees throughout Insurity offices.

Insurity offers customer engagement initiatives such as an online community, online training, a customer advisory committee, a user event, and training seminars.

Partnerships

Publicly announced partnerships include Microsoft, Mitchell, Franco Signor, and Appulate.

Functionality
**Policy Administration Functions**

Policy issue, premium accounting, and out-of-sequence endorsement are available out of the box. Forms management and manuscripted policies are available with configuration via tools for IT analysts or BAs. The solution does not currently include roster management or bordereaux import.

The following are independent objects in the solution's data model: policy, product, policyholder, individual, distributor, and insured.

**Rating Functions**

Rating functionality is part of the suite and is not sold as a stand-alone rating engine.

Quick quote; support for after-inception policy rating for endorsements, cancellations, reinstatements, and renewal processing; out-of-sequence endorsements; rating multiple coverage/quote alternatives; and multi-state, multi-location rating on a single policy are standard functions.

Versioning and update management and the auditability of rate versioning are standard functions. The solution does not currently include change control functions. An application and forms library with standard and customizable applications and forms is available with configuration via tools for IT analysts or BAs.

NCCI/Bureau of Workers’ Comp rates/rules support is available out of the box. The company reports that the solution also includes support for all independent state bureaus out of the box.

Multi-carrier comparison and setting insurer-specific defaults are standard functions. Product design and development tools are available with configuration via tools for IT analysts or BAs.

Import/export rating tables to/from spreadsheets (e.g., Excel) and date management capabilities are standard functions. Maintaining rating algorithm definition management separately from rate tables and rating and rule definition and management (e.g., automatic driver assignment) are available with configuration via tools for IT analysts or BAs. The solution does not currently include rate table design and update management tools.

Displacement testing (i.e., the ability to run existing book of business through proposed rate/product changes to determine impact) and testing, modeling, and product analysis are available with configuration via tools for IT analysts or BAs.

**Underwriter Workbench Functions**

Underwriting functions are integral to the suite and are not marketed as a stand-alone solution.

Uploading/importing the submission data from a structured data feed is a standard function. Uploading/importing the submission information from documents (OCR-like functionality) is available via out-of-the-box integration to a third-party system or service.

Support for new business transactions/underwriting, policy change transactions/underwriting, renewal transactions/underwriting, non-renewal transactions, and cancellation transactions are standard functions.
Capturing underwriting analysis, capturing underwriter loss analysis, submission rating, and pricing analysis and scheduled rating information are standard functions. Underwriter checklists that can validate information and process completeness are available with configuration via tools for IT analysts or BAs.

Providing single current and historical views of insured accounts across the enterprise, lines of business, and policy systems are available out of the box. Document creation (proposals, applications, correspondence) and document storage are standard functions.

A rules engine that automatically applies underwriting, workflow, and general business rules is available with configuration via tools for IT analysts or BAs. The solution does not currently include a rules engine that interfaces to order specific data conditionally.

Workflow/task capabilities (e.g., inbox, predefined workflows by transaction or line of business, automatic task assignment, diaries), inline reports/dashboards on tasks/work/work status, and inline reports/dashboards to support underwriting analysis are available out of the box. The solution does not currently include displaying aggregate risk accumulations for the existing book at a granular location level (i.e., geo-mashup of existing book and proposed risk).

The solution does not currently include IM collaboration with other underwriters, proposal co-authoring with other underwriters, screen sharing with other underwriters, preconfigured interfaces with policy admin systems, preconfigured interfaces with agent portals, or preconfigured integration with business intelligence environments.

Support for email notification/communication with agents and underwriters within the system (retaining a record of all emails) is standard. Support for variable binding/approval authority by role is available via tools for IT analysts or BAs.

Preconfigured interfaces with third-party data services are available with configuration via developer tools, XML manipulation, or a scripting language. Natively calculated predictive scores and preconfigured interfaces with external predictive scoring models are available via out-of-the-box integration to a third-party system or service.

**Document Functions**

Document functions are integral to the suite and are not marketed as a stand-alone solution.

The solution supports mass-produced documents (e.g., statements) and ad hoc documents (e.g., correspondence, manuscripted policies).

The suite includes pre-packaged, pre-built forms, libraries, and templates from ACORD for clients who are ACORD members. The primary authoring environment is MS Word or Adobe Creative Suite. Content is typically maintained by business analysts; business rules, schema mapping, and data sources are all designed to be managed by technical resources.

The solution is designed to support print, e-delivery, and mobile output channels. Managing preferences for print vs. electronic delivery is a standard function. Clients must use the solution’s built-in toolset for document authoring and content management workflow.
A content repository and content management tools are available with configuration via tools for IT analysts or BAs. Archival capabilities for all generated documents are standard. The solution supports industry-standard schemas (e.g., ACORD XML) out of the box.

**Agent Portal Functions**

Agent portal functionality is part of the suite and is not sold as a stand-alone agent portal.

New business entry/submission, account clearance, quick quote, policy change entry/submission, online payment, renewal quote entry/submission, policy inquiry, policy transaction history inquiry, billing inquiry, claims inquiry, proposal creation, ACORD application creation, account or client view in addition to a policy view, and rating engine are all standard.

Integration and pre-fill with data services and agency management system upload are available via out-of-the-box integration to a third-party system or service. The solution does not currently include uploading/importing data from Excel (e.g., locations, cars, drivers), side-by-side quote comparison, underwriter view and/or tools, or agent/underwriter collaboration.

Document creation, file attachment support, business intelligence and reporting, and a consumer portal are standard functions. The solution does not currently include support for e-signature, workflow and task management capabilities, or schedule, diary, and calendar functions.

**Reinsurance Functions**

Reinsurance is integral to the suite and is not marketed as a stand-alone solution.

Manual entry and tracking of cessions, reserves, and limits; automated notification if a reserve reaches a specific amount or treaties approach set limits; and automated identification/calculation of accounts with applicable reinsurance are standard functions.

The solution does not currently include manual entry and tracking of assumed reinsurance contracts, automated assumed reinsurance calculations based on reinsured data feeds/connections, or retrocession reinsurance management.

Treaty management and non-proportional/excess of loss are available out of the box. Facultative management, retroactively processing late placements or mid-term contract changes, and configuration of contract rules, formulas, and types are available with configuration via tools for IT analysts or BAs. The solution does not currently include proportional support or multiple basis types (e.g., risks attaching, losses occurring, claims made).

End-user interfaces for manual entry of contracts and manual flagging of premiums and claims subject to reinsurance are standard. The solution does not currently include an end-user interface for review and approval of assumed policies as part of facultative contracts.

Real-time data intake from core systems (e.g., PAS, claims) via API or another mechanism and real-time integration to an underwriting system (e.g., to display limits/reserves) are standard. The solution does not currently include batch file import/export for integration to other systems or integration between other insurer/reinsurer systems.

Statutory and regulatory reporting, a standard library of canned reports, automated bordereau reporting, and ad hoc reporting are available with configuration via tools for IT analysts or BAs.
Integrated analytics for profitability analysis, exposure, "what-if" analysis, risk profile, etc., are available with configuration via developer tools, XML manipulation, or a scripting language. The solution does not currently include automated Schedule F reporting.

Automated recoverable claims identification and viewing the full history and status of a claim and claim recovery are standard functions.

Tracking reinsurance payables and receivables, entity management (CRM), document management and storage of the actual contracts, and an audit trail for all transactions are standard. The solution does not currently include multi-currency or multi-language support.

**Business Intelligence Functions**

Business intelligence functionality is part of the suite and is not sold as a stand-alone solution.

Insurity Workers CompXPress BI solution comes pre-integrated with the WCXP database and offers dashboards, ad hoc report building, canned reports, and drill-down data analysis.

The solution includes a presentation/reporting component, standard predefined reports and dashboards, ad hoc reporting tools, and data mining and analytics tools. The solution also includes an insurance data model and databases that insurers are intended to use to replace existing EDW, ODS, and/or OLAP cubes as a secondary part of the offering.

The solution supports data movement via batch ETL.
### Billing Functions

Billing functions are part of the suite and are not sold as a stand-alone billing component. Payment and billing plan configurability are standard functions. The table below shows the availability of other billing functions.

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</tr>
<tr>
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<tr>
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</tr>
<tr>
<td>Automated rules for payment application and disbursements:</td>
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<tr>
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<td>Commission calculation and payment:</td>
<td>Available out of the box with no configuration necessary</td>
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<td>Collections activities and interfaces:</td>
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<td>Billing dashboarding/reporting:</td>
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<td>Billing for non-premium receivables (such as claims deductibles paid):</td>
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<td>Payment of non-refund payables (such as policy dividends or mutual dividends):</td>
<td>Available out of the box with no configuration necessary</td>
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<tr>
<td>Multi-currency support in a single instance of the application:</td>
<td>No</td>
</tr>
</tbody>
</table>
Claims Functions
Claims functionality is integral to the suite and is not sold as a stand-alone component.

Adjudication
Medical case management, injury detail maintenance (coding), automated coverage verification, and deductible tracking are standard functions. The solution does not currently include disability management or aggregate tracking (erosion of policy limits).

Catastrophe
Catastrophe definition is a standard function. Automatic identification of catastrophe claims is available with configuration via tools for IT analysts or BAs. The solution does not currently include mapping tools or attaching multiple causes of loss to a single catastrophe.

Disbursements
Check processing, calculating and scheduling recurring payments, calculating partial or one-off payments, accommodating multiple pay parties (e.g., garnishments), combining multiple pending payments for a single client into one disbursement, OFAC checking, and handling multiple offsets and deductions against benefits (e.g., wage garnishments, child support) are standard functions.

Documents
Image and media management, a correspondence or forms library, state-specific claims reporting templates, document rendering, and multi-channel delivery and output of documents (e.g., PDF, email, web, and print) are standard functions. A content repository and content management tools are available with configuration via tools for IT analysts or BAs.

FNOL
Recording and storage of new loss notices (including FROI/SROI) from a web portal, email, fax, or manual entry; mobile and smart device input; claimant contact management data capture; and checking for duplicate claims are standard. Claim characteristics scoring (to calculate alerts, trigger workflow, assign claims handler, or otherwise segment the claim) is available with configuration via tools for IT analysts or BAs. FROI/SROI EDI reporting is available via out-of-the-box integration to a third-party system or service. The solution does not currently include scripting for claims intake with reflexive questioning; custom question sets to prompt additional, mandatory additional questions depending on given answers (branch scripting), or integration with external vendors and services (e.g., car rental companies, car/equipment repair shops).

Fraud
Configurable business rules and tasks (specific to fraud and special investigations) are available out of the box. Provision of multiple search and reporting criteria for fraud detection (via the ability to track common clients across multiple claims) is available with configuration via tools for IT analysts or BAs.

Litigation
Creating separate tasks, workflow, diaries, and business rules for litigated cases to allow legal case management is available out of the box. Litigation process tracking, including negotiation details and litigation costs, is available with configuration via tools for IT analysts or BAs.
Multi-Channel
An agent portal with self-service and a policyholder portal with self-service are standard functions. The solution does not currently include e-signature or call center integration for FNOL/claim status check via telephony.

Reinsurance
Identifying claims subject to reinsurance through multiple dimensions (e.g., type of claim, limit, location), assignment to reinsurance treaties, and assignment to facultative arrangements are standard functions.

Reporting
Standard reporting of configurable metrics for claims reporting, ad hoc reports, dashboards, reporting that includes jurisdiction-specific reports and forms, electronic reporting or automated state filings, and the standard reporting of claims performance monitoring (including claims handling and high-risk indicators, e.g., fatality, large losses, fraud) are standard functions.

Reserves, Recoveries, Subrogation
Subrogation billing and the production of correct GL entries, the granular tracking of reserves and payments, automatic reserve calculations using business rules and risk characteristics, jurisdictional wage and rate calculations integrated for workers' comp, and creating separate tasks, workflow, diaries, and business rules for subrogated cases are standard functions. Automatic subrogation identification is available with configuration via tools for IT analysts or BAs. The solution does not currently include direct, case, average, factor, or expense reserve types.

Vendor Management
Vendor management functions are standard. Processing required forms (including 1099s) is available via out-of-the-box integration to a third-party system or service.

Workflow
Automated workflow/task generation, automatic work assignment based on configurable rules, the inclusion of external documents (e.g., letters, pictures) in file notes, assigning multiple adjusters to a single claim, and generating notes, diaries, and reminders are standard functions. The solution does not currently include OCR-triggered workflow, overriding automated processes and triggering workflow processes manually, compliance with the Document Repository Interface (DRI), processing claim workflow trigger (CWT) files at insurer-defined intervals, or full integration with electronic court filings (ECF2).
Screenshots
Claim Summary Landing Page

Activity Center Tasks, Emails, and Notes
### Quick Search and Advanced Search

<table>
<thead>
<tr>
<th>Application Name</th>
<th>Policy Type</th>
<th>Provider</th>
<th>Customer Service</th>
<th>Billing Options</th>
<th>Implementation Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Welding</td>
<td>General Welding</td>
<td>Novarica, Inc.</td>
<td>24/7 Support</td>
<td>Email, Phone</td>
<td>Implemented 2019</td>
</tr>
<tr>
<td>Oregon Welding</td>
<td>General Welding</td>
<td>Novarica, Inc.</td>
<td>24/7 Support</td>
<td>Email, Phone</td>
<td>Implemented 2019</td>
</tr>
</tbody>
</table>

**Search Criteria**

- **Search Term**: General Welding
- **Policy Type**: General Welding
- **Provider**: Novarica, Inc.
- **Customer Service**: 24/7 Support
- **Billing Options**: Email, Phone
- **Implementation Status**: Implemented 2019

**More Options**

- **Search Term**: General Welding
- **Policy Type**: General Welding
- **Provider**: Novarica, Inc.
- **Customer Service**: 24/7 Support
- **Billing Options**: Email, Phone
- **Implementation Status**: Implemented 2019

**Search Results**

- **Application Name**: General Welding
- **Policy Type**: General Welding
- **Provider**: Novarica, Inc.
- **Customer Service**: 24/7 Support
- **Billing Options**: Email, Phone
- **Implementation Status**: Implemented 2019

**More Options**

- **Search Term**: General Welding
- **Policy Type**: General Welding
- **Provider**: Novarica, Inc.
- **Customer Service**: 24/7 Support
- **Billing Options**: Email, Phone
- **Implementation Status**: Implemented 2019

**More Options**

- **Search Term**: General Welding
- **Policy Type**: General Welding
- **Provider**: Novarica, Inc.
- **Customer Service**: 24/7 Support
- **Billing Options**: Email, Phone
- **Implementation Status**: Implemented 2019

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**INSURITY - BRIDGE SPECIALTY SUITE**

**Executive Summary**

- Insurity, Inc. asserts that its driving mission is to simplify and streamline insurance processes for its clients. The company reports that it uses a standardized requirements process that focuses on deviations from established standards and upgrade processes that leverage automated regression testing to achieve this mission.
- Insurity is headquartered in Hartford, CT, and employs 750 people. The company's annual revenue is in the range of $100M-$250M.
- Bridge Specialty Suite (Bridge) includes core policy features, rating, underwriter workbench, document creation, agent portal, reinsurance, business intelligence, billing, and claims components. The company notes that the suite also includes built-in dashboard and data visualization technology as well as a digital platform.
- It currently has 21 live US/Canadian insurer clients using the suite, which are a mix of smaller (under $1B) and larger (over $1B) insurers. Most clients use the solution to support specialty lines with some commercial and personal.
- Publicly announced clients include AIG, Chubb, Everest, HCC, and Sirius.
- The solution is browser-based for all user interface functions. It is written primarily in .NET/C#, with some Java.
- Configuration for insurance products, screens, workflows, rules, integration to third-party service calls, and document authoring is via tools for BAs and non-IT staff.
- Implementation is available through the company's resources or a partner. Insurity deploys Bridge on-prem, hosted at a private data center, and hosted on MS Azure. The company offers a SaaS delivery model that includes hosting, license, maintenance and support, and implementation of the upgrades. The SaaS delivery model does not include perpetual access to the latest version.
- The company reports that the average time to initial go-live is 180 days or less and that the average implementation cost is $800K-$1.2M.
### Lines of Business Supported

<table>
<thead>
<tr>
<th>Line of Business</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal auto:</td>
<td>Solution is designed to support, but no clients live or implementing</td>
</tr>
<tr>
<td>Homeowners:</td>
<td>Live clients offering this product in 10-49 US states</td>
</tr>
<tr>
<td>Personal umbrella:</td>
<td>Solution is designed to support, but no clients live or implementing</td>
</tr>
<tr>
<td>Dwelling fire:</td>
<td>Solution is designed to support, but no clients live or implementing</td>
</tr>
<tr>
<td>Boatowners:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Personal package:</td>
<td>Solution is designed to support, but no clients live or implementing</td>
</tr>
<tr>
<td>Commercial property:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>General liability:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>BOP:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Commercial crime:</td>
<td>Solution is designed to support, but no clients live or implementing</td>
</tr>
<tr>
<td>Commercial auto:</td>
<td>Live clients offering this product in Canada</td>
</tr>
<tr>
<td>E&amp;O/D&amp;O:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Inland marine:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Professional liability (including medical malpractice):</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Commercial package:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Specialty:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Workers' comp:</td>
<td>Live clients offering this product in one US state</td>
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<tr>
<td>Surety:</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
<tr>
<td>Other personal lines*</td>
<td>Live clients offering this product in 10-49 US states</td>
</tr>
<tr>
<td>Other commercial lines†</td>
<td>Live clients offering this product in all 50 US states</td>
</tr>
</tbody>
</table>

* Other personal lines include yacht/pleasure craft, hurricane, wind, and hail.
† Other commercial lines include film and entertainment, sports and leisure, special events, restaurant recovery, cyber risk, lawyer’s professional liability, educator’s professional liability, trade credit insurance, products contamination, marine cargo, marine hull, marine liabilities, management liability, builders risk, homebuilders, environmental, energy, kidnap and ransom, and terrorism.

### Client Base

Globally, Insurity has 34 clients live on Bridge, 29 of which are insurer clients (i.e., not MGAs, self-insureds). There are twenty insurer clients live in the US/Canada, a mix of smaller (under $1B) and larger (over $1B) insurers using the solution to support specialty lines with some commercial and personal. Most clients use the solution as a stand-alone system (rather than as part of a suite).

Publicly announced clients include AIG, Chubb, Everest, HCC, and Sirius.
Key Functions and Differentiators
Insurity cites the key functions of Bridge as:

- Automated- and exception-based underwriting capabilities
- Fully integrated suite, including portal, underwriter workstation, analytics, and visualization dashboards
- Accommodates organizational hierarchies of multi-national insurance companies, brokers, and policyholders, as well as those of smaller companies
- UX optimized for all user types and interactions
- Out-of-the-box interfaces with third-party data and service providers for address validation, compliance scanning, risk assessment and underwriting, payment processing, e-signature, SSO, and rating

The company cites as its key differentiators DigitalXPerience Studio, an enhanced Bridge UI that allows clients to shape their UI to fit their needs, leveraging Insurity’s digital API platform; end-user configuration with no coding/scripting necessary to speed up implementation; a flexible solution to meet client needs as a portal, underwriter workbench, and/or end-to-end PAS; leadership in SaaS delivery with multi-tenant architecture; as well as that it supports many currencies and languages.

Solution Architecture and History
Bridge launched in 2012 and was re-architected in 2018. The latest release was in December 2019. Insurity reports that 90% of the solution's customers are on the latest version, and 10% are on a version less than three years old. All customers have been through at least one upgrade.

The solution supports Microsoft SQL Server databases and Windows server platforms. The solution is written primarily in .NET/C#, with some Java.

Configurability and User Interface
Bridge is browser-based for all user interface functions. The solution offers mobile capabilities via an HTML5 user interface optimized for mobile use. Clients are not allowed to touch core code.

Configuration for insurance products, screens, workflows, rules, integration to third-party service calls, and document authoring is via tools for BAs and non-IT staff. The company notes that mapping the API XML to a new third-party would require a developer, but once it's in there, the tools to utilize that API are for BAs. Insurity also reports that it offers a digital platform of APIs for all of its applications that offers clients documentation, sample code, and direct access to all Insurity APIs and third-party APIs using a standard RESTful structure.

Deployment Options
Insurity deploys Bridge on-prem, hosted at a private data center, and hosted on MS Azure. The company offers a SaaS delivery model that includes hosting, license, maintenance and support, and implementation of the upgrades. The SaaS delivery model does not include perpetual access to the latest version. The hosted solution is a multi-tenant app server and a single-tenant database.
Average Implementation Length and Cost
Insurity implements the solution through the company’s resources or a partner. It reports that Bridge can be ready for initial go-live in 180 days or less and fully rolled out in an additional 12 months or less. The company reports that average implementation cost is $800K-$1.2M.

Support
Of the 750 people employed at Insurity, there are between 50 and 100 on the product design and engineering team, between 50 and 100 on the implementation team (not counting partnerships), and between ten and 50 on the support team for this suite.

Insurity has headquarters in Hartford, CT, and has additional US offices in Dallas, TX; Nashua, NH; Red Wing, MN; Sarasota, FL; and Denver, CO, as well as international offices in Montreal, Canada, and London, England. Staff positions supporting Bridge are primarily in Montreal, with additional employees throughout the US and in London, as well as support personnel in Asia.

Insurity offers customer engagement initiatives such as an online community, online training, a customer advisory committee, a user event, and training seminars.

Partnerships
Publicly announced partnerships include LexisNexis, Google, Cybersource, VMWare, and Appulate.

Functionality
Policy Administration Functions
The solution includes out-of-sequence endorsement, forms management, and manuscripted policies out of the box. Policy issue, premium accounting, roster management, and bordereaux import are available with configuration via tools for IT analysts or BAs.

The following are independent objects in the solution's data model: policy, product, policyholder, individual, distributor, and insured.

Rating Functions
Rating functions are integral to the suite and are not marketed as a stand-alone rating engine.

Out-of-sequence endorsements and rating multiple coverage/quote alternatives are standard. Quick quote; support for after-inception policy rating for endorsements, cancellations and reinstatements, and renewal processing; and multi-line, multi-state, multi-location rating on a single policy are available with configuration via tools for IT analysts or BAs.

Versioning and update management, change control functions, and auditability of rate versioning are standard functions. An application and forms library with standard and customizable applications and forms is available with configuration via tools for IT analysts or BAs.

Saving/storing an in-process or completed policy change transaction to allow issuance at a later date and product design and development tools are standard functions. Download to agency management systems and pre-integration to third-party data providers are also available with configuration via tools for IT analysts or BAs.

Multi-carrier comparison and setting insurer-specific defaults are available with configuration via tools for IT analysts or BAs.

Maintaining rating algorithm definition and management separately from rate tables, rate table design and update management tools, the import/export of rating tables to/from spreadsheets (e.g., Excel), and date management capabilities are standard functions. Rating and rule definition and management (e.g., automatic driver assignment) are available with configuration via tools for IT analysts or BAs.

Displacement testing (i.e., the ability to run existing books of business through proposed rate/product changes to determine impact) and testing, modeling, and product analysis are available out of the box.

Underwriter Workbench Functions
Underwriter workbench functions are integral to the suite and are not marketed as a stand-alone solution.

Support for new business transactions/underwriting, policy change transactions/underwriting, renewal transactions/underwriting, non-renewal transactions, cancellation transactions, and underwriting multiple submissions as one work portfolio is standard.

Uploading/importing the submission data from a structured data feed is available with configuration via developer tools, XML manipulation, or a scripting language. Uploading/
importing the submission information from documents (i.e., OCR-like functionality) is available via out-of-the-box integration to a third-party system or service.

Capturing underwriter analysis, capturing underwriter loss analysis, underwriter checklists that can validate information and process completeness, submission rating, pricing analysis and scheduled rating information, and providing single current and historical views of insured accounts across the enterprise, lines of business, and policy systems are available with configuration via tools for IT analysts or BAs. The ability to combine individual quotes for different lines into a single proposal is available with configuration via developer tools, XML manipulation, or a scripting language.

Document storage is a standard function. Document creation (proposals, applications, correspondence) is available with configuration via tools for IT analysts or BAs.

A rules engine that applies underwriting, workflow, and general business rules automatically; workflow/task capabilities, e.g., inbox, predefined workflows by transaction/line of business, automatic task assignment, diaries; a rules engine that interfaces to order specific data conditionally; inline reports/dashboards on task/work/work status; and inline reports/dashboards to support underwriting analysis are available out of the box.

Screen sharing with other underwriters and preconfigured integration with business intelligence environments are standard functions. IM collaboration with other underwriters, proposal co-authoring with other underwriters, agent-facing capabilities, preconfigured interfaces with agent portals, preconfigured interfaces with external predictive scoring models, support for variable binding/approval authority by role, and support for email notification/communication with agents and underwriters within the system (retaining a record of all emails) are available with configuration via tools for IT analysts or BAs.

Preconfigured interfaces with policy admin systems, preconfigured interfaces with third-party data services, and natively calculated predictive scores are available via out-of-the-box integration to a third-party system or service.

**Document Functions**

Document functions are integral to the suite and are not marketed as a stand-alone solution.

The solution supports mass-produced documents, e.g., statements (less common use case) and ad hoc documents, e.g., correspondence, manuscripted policies (most common use case).

The suite does not include forms from ACORD/ISO. The primary authoring environment is MS Word. Content and business rules are managed by average business users; schema mapping and data sources are managed by business analysts.

The solution supports print, e-delivery, and mobile output channels. Managing preferences for print vs. electronic delivery is available with configuration via tools for IT analysts or BAs. Clients primarily use the solution's built-in toolset for document authoring and content management workflow, but they have the option to use external workflow/BPM tools.
A content repository, content management tools, and archival capabilities for all generated documents are standard. The solution supports industry-standard schemas (e.g., ACORD XML) out of the box.

**Agent Portal Functions**

Bridge Specialty Suite is part of the suite and is also sold as a stand-alone agent portal.

New business entry/submission, uploading/importing data from Excel (e.g., locations, cars, drivers), policy change entry/submission, policy inquiry, policy transaction history inquiry, billing inquiry, claims inquiry, side-by-side quote comparison, account or client view (in addition to a policy view), underwriter view and/or tools, and agent/underwriter collaboration are standard.

Account clearance, quick quote, online payment, renewal quote entry/submission, proposal creation, ACORD application creation, and a rating engine are available with configuration via tools for IT analysts or BAs. Integration and pre-fill with data services and agency management system upload are available with configuration via developer tools, XML manipulation, or a scripting language.

File attachment support, workflow and task management capabilities, business intelligence and reporting, and scheduling, diary, and calendar functions are available out of the box. Document creation and a customer portal are available with configuration via tools for IT analysts or BAs. Support for e-signature is available via out-of-the-box integration to a third-party system or service.

**Reinsurance Functions**

Insurity supports integration with third-party reinsurance solutions.

**Business Intelligence Functions**

Business intelligence functionality is part of the suite and is not sold as a stand-alone component.

The solution includes tools to support data governance, dictionaries, quality, and validation; a presentation/reporting component; predefined reports and predefined insurance dashboards; an ad hoc reporting tool; and data mining and analytics tools. The solution also provides a third-party tool to support an insurance data model and databases that insurers are intended to use to replace existing EDW, ODS, and/or OLAP cubes.

The solution supports data movement via batch ETL.

**Billing Functions**

Billing functionality is part of the suite and is not sold as a stand-alone billing component. Payment and billing plan configurability is standard. The table below shows the availability of other billing functions.
<table>
<thead>
<tr>
<th>Feature</th>
<th>Availability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct bill:</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Agency bill:</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Account or list bill:</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Third-party (i.e., mortgagee) bill:</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Split or multi-payer bill:</td>
<td>Available out of the box with no configuration necessary</td>
</tr>
<tr>
<td>Flexible and configurable payment plans:</td>
<td>Available with configuration using simple tools targeted for IT analysts or BAs</td>
</tr>
<tr>
<td>Support for flexible payment types (e.g., payment card, check, EFT, payroll deduction):</td>
<td>Available via out-of-the-box integration to a third-party system or service</td>
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<tr>
<td>Automated rules for payment application and disbursements:</td>
<td>Available out of the box with no configuration necessary</td>
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<tr>
<td>Real-time account and payment calculation, scheduling, recalculating, and rescheduling:</td>
<td>Currently not available, but could be available with a system enhancement</td>
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<tr>
<td>Commission calculation and payment:</td>
<td>Available with configuration using simple tools targeted for IT analysts or BAs</td>
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<tr>
<td>Collections activities and interfaces:</td>
<td>Available out of the box with no configuration necessary</td>
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<tr>
<td>Equity billing support:</td>
<td>Currently not available, but could be available with a system enhancement</td>
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<td>Automated workflow and task management:</td>
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<td>Electronic bill presentation:</td>
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Claims Functions
Claims functionality is part of the suite and is not sold as a stand-alone claims component.

Adjudication
The solution does not currently include adjudication functionality. The company reports that data capture and workflow to support adjudication is configurable via UI tools as part of the implementation of the claims workflow.

Catastrophe
Catastrophe definition, automatic identification of catastrophe claims, and attaching multiple LOBs and causes of loss to a single catastrophe are available with configuration via tools for IT analysts or BAs. The solution does not currently include mapping tools.

Disbursements
OFAC checking is standard. Calculating partial or one-off payments and accommodating multiple pay parties (e.g., garnishments) are available with configuration via tools for IT analysts or BAs. Check processing is available via out-of-the-box integration to a third-party system or service. The solution does not currently include calculating partial or one-off payments, combining multiple pending payments for a single client into one disbursement, or handling multiple offsets and deductions against benefits (e.g., wage garnishments, child support).

Documents
Image and media management, a content repository, content management tools, and multi-channel delivery and output of documents (e.g., PDF, email, web, and print) are standard. Document rendering, a correspondence or forms library, and state-specific claims reporting templates are available with configuration via tools for IT analysts or BAs.

FNOL
Mobile and smart device input and claimant contact management data capture are standard. FROI/SROI EDI reporting, scripting for claims intake with reflexive questioning, custom question sets to prompt additional mandatory questions depending on given answers (branch scripting), claim characteristic scoring (to calculate alerts, trigger workflow, assign claims handler, or otherwise segment the claim), and recording and storage of new loss notices (including FROI/SROI) from a web portal, email, fax, or manual entry are available with configuration via tools for IT analysts or BAs. The solution does not currently include claim checking duplication or integration with external vendors and services (e.g., car rental companies, car/equipment repair shops).

Fraud
Configurable business rules and tasks (specific to fraud and special investigations) and the provision of multiple search and reporting criteria for fraud detection (via the ability to track common clients across multiple claims) are available with configuration via tools for IT analysts or BAs.

Litigation
The solution does not currently include litigation management capabilities. The company reports that data capture and workflow to support litigation is configurable via UI tools as part of the implementation of the claims workflow.
**Multi-Channel**
An agent portal with self-service and a policyholder portal with self-service are standard. The solution does not currently include e-signature or call center integration for FNOL/claim status checks via telephony.

**Reinsurance**
The solution does not currently include reinsurance capabilities. The company reports that data capture and rules relating to re-insurance (e.g., calculating amounts to recover from reinsurers, sending letters/notices to reinsurers) are configurable via UI-based tools.

**Reporting**
Ad hoc reports and dashboards are standard. The standard reporting of configurable metrics for claims reporting, reporting that includes jurisdiction-specific reports and forms, and the standard reporting of claims performance monitoring (including claims handling and high-risk indicators, e.g., fatality, large losses, fraud) are available with configuration via tools for IT analysts or BAs. Electronic reporting or automated state filings are available with configuration via developer tools, XML manipulation, or a scripting language. The company asserts that claims data is also available in the Cognos data warehouse and BI environment provided with the suite.

**Reserves, Recoveries, Subrogation**
Subrogation billing and the production of correct GL entries, granular tracking reserves and payments, and creating separate tasks, workflow, diaries, and business rules for subrogated cases are standard functions. Automatic subrogation identification is available with configuration via tools for IT analysts or BAs. The solution does not currently include automatic reserve calculations using business rules and risk characteristics, jurisdictional wage and rate calculations integrated for workers' comp, or direct, case, average, factor, or expense reserve types.

**Vendor Management**
Vendor management functions are standard. The solution does not include the processing of required forms (e.g., 1099s).

**Workflow**
Overriding automated processes and triggering workflow processes manually, automatic work assignment based on configurable rules, the inclusion of external documents (e.g., letters, pictures) in file notes, and generating notes, diaries, and reminders are standard functions. Automated workflow/task generation is available with configuration via tools for IT analysts or BAs. The solution does not currently include OCR-triggered workflow, assigning multiple adjusters to a single claim, compliance with the Document Repository Interface (DRI) standards, processing claim workflow trigger (CWT) files at insurer-defined intervals, or full integration with electronic court filings (ECF2).
DX Policy Workflow

**General**

- **Company name**: [Enter company name]
- **Desired start date**: 4/10/2019
- **Entity**
  - Individual
  - Trust
  - LLC, Inc
- **Address**
  - [Enter address]
- **Currently insured by Insurity?**
  - Yes
  - No
- **Policy type**
- **Target premium**
- **Coverages**: A, B, C, D... [Select coverages] 

**DX Studio Edit**

[Image of DX Studio Edit interface]
CONCLUSIONS

P/C Insurers have a rich vendor market to select from when considering providers of policy administration solutions. Modern property/casualty solutions are maturing, giving insurers better options than ever before. Novarica recommends a rapid selection process, including a market scan, an RFI phase, and directed demonstrations over 12-16 weeks. A cross-functional team of business and IT participants will ensure that all stakeholders are invested in the decision.

While core transformation projects are challenging, they are typically successful. Outright failures are thankfully much rarer than they used to be. Timeframes vary significantly, but Novarica research shows that the typical time to deliver the first release is about two years, while full implementation can take up to five years. The benefits are clear: improved time to market, increased business and IT agility, improved flexibility, reduced technical risk, and more. These benefits then improve employee, agent, and customer satisfaction. However, these projects require significant financial investment and organizational attention—and unfortunately, they typically run over budget and schedule.

There are several steps insurers can take before a transformation project begins to ensure that their project runs as smoothly as possible. These steps fall into three areas: business readiness, IT/technical readiness, and program readiness. These preparatory activities are listed below.

<table>
<thead>
<tr>
<th>Business Readiness</th>
<th>IT/Technical Readiness</th>
<th>Program Readiness</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Product Rationalization</td>
<td>✓ Architectural Blueprint</td>
<td>✓ Overall Project Plan</td>
</tr>
<tr>
<td>✓ Business Process Vision</td>
<td>✓ Technical Guiding Principles</td>
<td>✓ Project Governance, Organization, and Communications</td>
</tr>
<tr>
<td>✓ Program Implementation Plan/Order</td>
<td>✓ Architecture and Design Governance</td>
<td>✓ Templates Around Requirements, Development, and Testing</td>
</tr>
<tr>
<td>✓ Configuration/Customization Decision Framework</td>
<td>✓ Interface Inventory</td>
<td>✓ Vendor Management Approach</td>
</tr>
</tbody>
</table>

Lack of planning upfront can result in disagreement, analysis paralysis, and general project "swirl," all of which ultimately lead to delays and cost overruns. It is impossible to foresee every difficulty that organizations may encounter during a core system implementation, but having a clear idea of the project’s business vision and scope, technical approach, and project/development processes and tools can significantly reduce the risk. Insurers that prepare for these activities will position themselves for transformation project success.
NEXT STEPS AND RELATED RESEARCH

- Contact Novarica at client-support@novarica.com to discuss this topic.
- Read related reports:
  - **Snapshot: Policy Admin Suite Pricing Models and Levels**
  - **Insurer IT Budgets and Projects 2020**
  - **Novarica New Normal 100: Digital, Data, and Core Capabilities for Property/Casualty Insurers**
  - **Policy Administration Systems Project Metrics**
  - **Core Systems Project Readiness**
  - **13 Things Not to Do When Replacing Policy Administration Systems**

ABOUT NOVARICA

Novarica helps more than 100 insurers make better decisions about technology projects and strategy through research, retained advisory services, consulting, and special programs.

We serve clients in life/annuity/retirement, property/casualty, workers’ compensation, and reinsurance. Our clients range from Fortune 100 insurers to small regionals and specialty companies. Although most of our clients prefer we keep their names confidential, a partial client roster includes Amica, AXA XL, GenRe, Grange, Hanover, Penn Mutual, Principal, ProSight, SECURA, SunLife, and more than 100 others.

Our senior team has direct experience as senior IT executives at firms, including AIG, Arbella, AXA, Guardian, Liberty Mutual, MetLife, Marsh, Progressive, Prudential, Travelers, and others.

We publish frequent, independent, in-depth research on trends, best practices, and vendors. Our research projects are directed by our senior team and leverage our relationships with the more than 300 insurer CIO members of our Research Council. We conduct more than 2,000 conversations with insurer executives every year.

Our retained advisory services provide enterprise access to our research, unlimited phone and email consultations with our team, facilitated 1-on-1 conversations with other CIOs in our network, an annual trends and best practices workshop, and an optional annual IT strategy review.

Our consulting services include assessments, strategic blueprints and roadmaps, benchmarking, business process visioning, and vendor evaluation across digital, data/analytics, core systems, operating model, and innovation.

Our special programs include our Silicon Valley Innovation Tour, InsureTech Summits, Executive Leadership Development with Brown University, an online learning course in *Foundations of Insurance Technology Strategy*, and more.

More information at [https://novarica.com](https://novarica.com)
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