

August 2025

Life/Annuity/Benefits New Business and Underwriting Systems

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Introduction

This report provides an overview of the current solution provider marketplace for new business and underwriting (NBU) solutions for life/annuity/benefits (L/A/B) insurers. It is designed to assist insurers in drawing up their short lists of potential providers based on vendor market position and offering details. In order to be considered for this report, solution providers must be active in the North American market and have at least one live client or implementation in the U.S.

Methodology

The solution provider profiles included within Datos Insights vendor analysis reports do not provide subjective analyses of vendor solutions. The reports are based on direct responses to a universal request for information (RFI) distributed by Datos Insights, 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 the organization, technology stack, client base, and key functionality. Profiles also include a summary of key differentiators, supported lines of business, deployment options, implementation approaches, and how vendors handle upgrades/enhancements. They also include charts and tables to provide comprehensive information about solution and component capabilities.

These reports do not render judgment; an insurer's specific situation and needs will determine the fit with potential vendors. Datos Insights provides these types of advisory consultations to more than 120 insurer clients through its retained advisory service.

The Market

The life insurance industry has become increasingly competitive, with greater competition with and for distribution channels, creating challenges that carriers must address to maintain or improve their market position. Concurrently, significant demographic shifts are underway, with millennials and Gen Z now representing 54% of the U.S. labor force.¹ This environment is putting pressure on insurers to decrease costs while introducing new products and services that provide a better position to deal with an increasingly diverse marketplace.

Life Insurers Need Improved Technology to Compete

Many insurers continue to face challenges with legacy systems that limit their flexibility and impede the speed needed to compete for a new generation of connected consumers and producers. Customer expectations are constantly increasing due to advances in other industries, such as banking and retail, which offer a frictionless buying experience. Carriers are investing in technology solutions to meet these challenges, with growing interest in replacing core systems.

Because of the long-tail liabilities associated with typical life insurance and related line contracts, carriers are generally faced with a need to consider a phased approach to technology modernization. One of the key approaches to this modernization focuses on the NBU functionality.

Factors Driving Technology Decisions

Several factors are driving carrier technology investment decisions to meet life insurance market challenges. One driver is that millennials and Gen Z now represent the dominant consumer segments in the life insurance market. These digital-native generations expect seamless, mobile-first insurance experiences that mirror their interactions with other financial services and retail experiences.

Projections indicate that millennials and Gen Zers will comprise over 80% of the workforce and primary insurance buyers. Their preferences for digital engagement, personalized

¹ "Changes in the Generational Composition of the Labor Force," U.S. Department of Labor, accessed July 7, 2025, https://www.dol.gov/sites/dolgov/files/ETA/opder/DASP/Trendlines/posts/2024_08/Trendlines_August_2024.html#changes-in-the-generational-composition-of-the-labor-force.

products, and instant decisioning will fundamentally reshape insurance distribution and servicing models. Gen Alpha—individuals born from approximately 2010 to 2025—will also begin entering the workforce, bringing even higher expectations for technology-enabled insurance solutions.

Both generations' emphasis on digital convenience, transparency, and personalization is forcing carriers to accelerate their digital transformation efforts and modernize their entire insurance technology stack.

Another driving factor is the increased importance of business intelligence (BI) and analytics. Insurers are mostly using BI tools for reporting and monitoring customer and producer performance, but many plan to increase their use of predictive analytics, using both internally and externally supplied data as it becomes economically accessible. While larger carriers have developed analytics capabilities internally and are using big data databases and tools such as Snowflake, Hadoop, MongoDB, Tableau, Spotfire, and open source, some continue to look for analytics capabilities embedded in core system solutions.

Data analytics capabilities remain critical, but with a more nuanced understanding gained from post-pandemic insights. Many predictive models have required significant recalibration to account for lasting behavioral changes in work patterns, health consciousness, and financial decision-making. While wearables haven't achieved the widespread adoption initially predicted, carriers continue to offer wellness programs, with modest participation rates. The focus has shifted toward more reliable and accessible data sources for underwriting, such as electronic health records and prescription histories.

Predictive modeling is projected to become more sophisticated, incorporating dynamic data sources that reflect real-world behavioral patterns. Rather than heavily relying on wearables data, carriers are expected to develop more holistic risk assessment approaches combining traditional data sources with selective alternative data points. The industry anticipates moving toward adaptive underwriting models that can quickly adjust to societal changes and emerging risks. While wellness programs using wearables will continue, they're projected to be one component of a broader risk assessment strategy rather than a primary driver of underwriting decisions.

The emphasis has shifted from experimenting with new data sources to optimizing the use of proven, reliable data streams that provide consistent value for risk assessment and customer engagement.

Stand-Alone New Business and Underwriting Solutions

For carriers that are focused on addressing aging technology stacks, old platforms are frequently monolithic environments that support a variety of functions within a tightly integrated and inflexible platform. This may have produced a series of historic advantages, but it now leaves these carriers with rigid environments that make it very difficult and expensive to deploy new products and capabilities that are key to future competitiveness.

As a result, impacted carriers may begin a broad modernization and transformation effort. Effectively implementing a modern, function-specific capability allows for concurrently addressing key business needs, simplification of old environments, implementation of new architectural approaches, and building organizational experiences with new commercial, off-the-shelf solutions. One high-impact area that can allow carriers to address these points is the NBU arena. This is part of a broader strategic approach for insurer IT organizations, focused on reducing the costs and risks associated with aging environments.

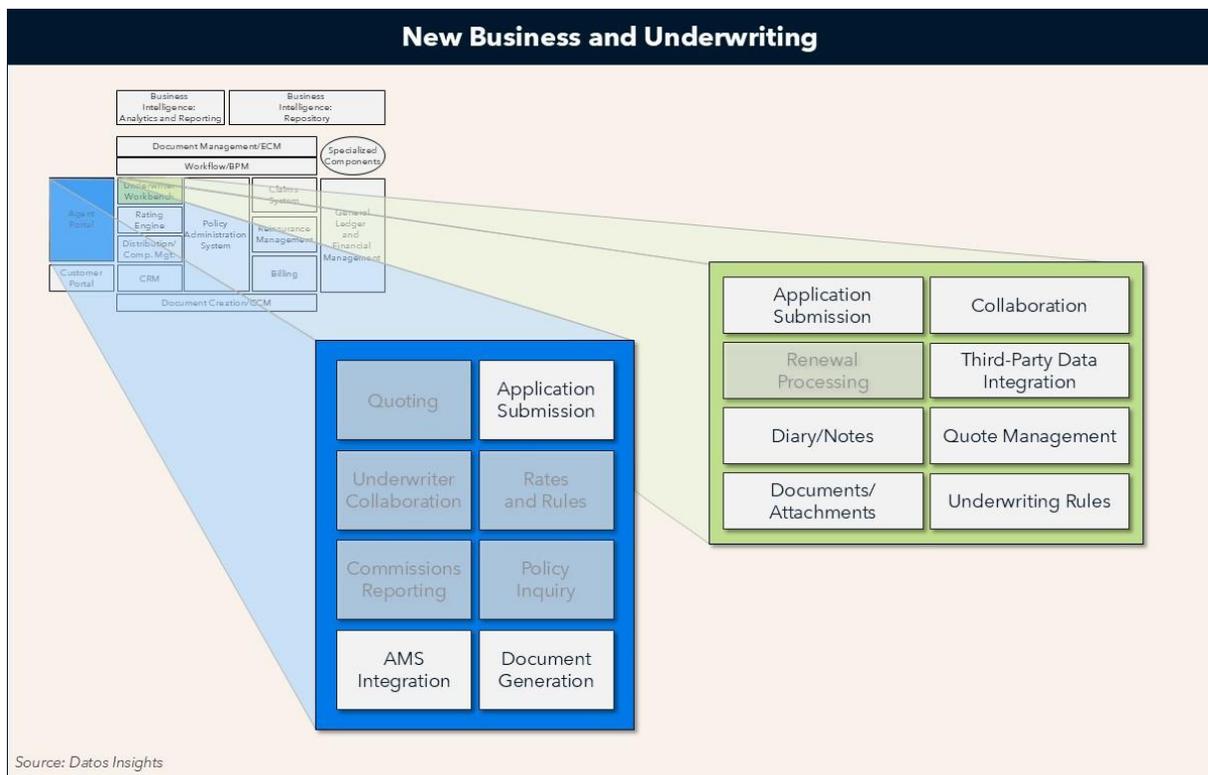
The disaggregated approach toward improving functionality can also include deploying stand-alone tools for agent portals, billing, and claims, in addition to underwriting. Across the functional spectrum, these solutions can provide more flexibility for new functionality, as well as usability improvements through browser-based user interfaces, configuration tools, and service-oriented architectures that simplify integration with core systems.

This report covers a variety of systems that include stand-alone components from full-suite policy administration solutions as well as solutions designed specifically for the new business process from point of sale to policy issuance and delivery.

Key Components

A well-developed NBU system should integrate with PAS and other downstream systems to support onboarding new contracts and the effective management of associated initial premiums (Figure 1). Additionally, if the system does not include robust modules to handle contact and document management, it should easily integrate with other platforms that provide the requisite functionality. Tools providing easy access and navigation to the traditional functions handled by both the sales organization and home office underwriters are standard.

Figure 1: Datos Insights Insurance Core Systems Map



Datos Insights surveyed the key features described in the following sections.

Agent Portal Capabilities

Solutions often offer agent-facing portals that serve as the primary interface for initiating and managing the new business process, offering streamlined access to application submission tools and case status visibility. These capabilities include electronic application functionality, document generation tools, and integration touchpoints that ensure

compliance and efficiency throughout the sales process. In addition, this functionality can facilitate direct communication between agents and underwriters, manage licensing and credentialing requirements, and provide real-time updates on application progress to support timely case resolution and enhanced customer experience.

Application Submission

Systems may include an electronic application (e-app) capability that can be completed using functionality deployed to agents, allowing them to gather information required to initiate the new business process. This functionality allows agents, or—in the case of self-service capabilities enabling direct sales—end customers, to submit a new business application, with a focus on the use of browser- or mobile-based functionality. Some systems include an electronic signature (e-signature) capability that enables streamlined processing of new business by allowing customers and/or agents to digitally sign documents. In other instances, solutions may provide integration with third-party services to perform similar functions. Some solutions can also deliver e-app functionality via mobile devices in connected mode (requires connection to the internet to complete the application) or disconnected mode (can collect application information without an internet connection and sync when a connection is established).

Agency Management System Integration

Systems may provide integration with producer licensing and credentialing information to ensure that compliance issues are minimized, and business is not slowed due to not-in-good-order (NIGO) paperwork.

Document Generation

Systems may include the ability to automatically generate correspondence to the various participants in the underwriting process. Correspondence can be in a variety of formats, such as hard-copy forms, email, and electronic alerts. This functionality is valuable for many uses, including requests for additional information to complete a review or routine status updates.

Underwriter Workbench Capabilities

Solutions typically provide some form of underwriter workbench that enables management of work objects and an integrated workflow that provides transparency into work items/needs for additional information. These capabilities include diary/notes, documents/attachments, and collaboration capabilities. In addition, this functionality can manage requests for information from data sources (e.g., Medical Information Bureau [MIB],

Department of Motor Vehicles [DMV], credit scores, Attending Physician Statements [APS]) needed to complete the process.

Collaboration

Some solutions support collaboration between the agent and the underwriter using features such as instant messaging/chat, social media, and other capabilities that support more rapid issue identification and resolution.

Third-Party Data Integration

Solutions generally provide integrations with third-party evidence providers (e.g., MVR, prescription databases, MIB, medical laboratories, APS, functional and cognitive testing), as well as other third-party data providers such as credit reporting bureaus.

Diary/Notes

Solutions may provide for an integrated case management capability that allows different participants in the underwriting process to update information independently and provide transparency to each other as contracts work their way through to final decisions.

Quote Management

Some solutions include the ability to produce a “quick” quote for a coverage based on the submission of limited information, providing an estimate of the cost of coverage. In addition, some solutions can provide multiple quotes based on the same source data.

Documents/Attachments

Systems may include an internal document management capability or a mechanism that allows for integration with enterprise capabilities in order to manage documentation necessary for regulation compliance, as well as the process of underwriting itself.

Underwriting Rules

Solutions may provide support for automatic requirements ordering, receipt, and status reporting, along with requirements optimization and automated follow-up on missing requirements. Systems may also provide routing and queuing based on complexity, underwriting expertise, workload balancing, and other user-defined rules.

Other Capabilities

- **Multiple workflow support:** Most solutions provide support for multiple workflows for application processing, including jet issue, automated, simplified, fully underwritten,

and via ticket/tele-underwriting. Some systems include a tool that provides a graphical user interface, often similar to Microsoft's Visio, which can establish and manage workflow capabilities and queues for underwriting processing.

- **Pre-fill:** Solutions may include the ability to pre-populate information into forms when extracted from other sources, including CRM platforms, sales illustration systems, and/or third-party data providers (e.g., prescription databases, MIB, DMV for motor vehicle reports [MVRs]).
- **Cash management:** Systems may include provisions for managing customer preferences regarding payments related to both the initial premium and subsequent scheduled premium payment for processing (e.g., monthly premiums for perm/term insurance). This may include establishing bank information needed for future transactions, and it may include gathering information for transactions via checks, ACH, credit/debit card, EFT, wire transfer, payroll deduction, etc. Solutions may also provide support for 1035 exchanges.
- **Reporting and analytics:** Systems may include integrated reporting capabilities that provide for information on performance, throughput, productivity, or other elements that are key to managing the overall underwriting function via a selected platform. Some solutions offer the ability to use data gathered during the underwriting process to develop a range of predictive analytics that look at contract persistency, mortality, and morbidity, which facilitates both appropriate pricing/rating and risk determination.
- **Ease of use:** Solutions provide capabilities for ease of system use, including paperless processing, real-time status updates, producer self-service capabilities, and collaboration and remote underwriter support. Some provide the ability to allow changes in the system user interface to tailor it to individual users performing different roles, based on factors such as seniority and location, to support the NBU processes.
- **Group/worksite functionality:** Solutions may support group underwriting, which differs from individual underwriting in that census-level data is evaluated. Capabilities may include enrollment tools to support the gathering of data required to support group plan enrollment or, in the case of individual products, to facilitate end-customer self-service for enrollment in voluntary benefits and other worksite marketing programs. Eligibility management tools may also be available that include an integrated rules engine or a third-party capability to help manage the provisioning of coverages based on predefined business rules or classifications. Group-specific case management and underwriting rules/workflow may also be supported. In addition, these group-oriented platforms may include an ability to ingest and evaluate census data, which may have an impact on both the initial underwriting process and the subsequent case installation effort.

Full Solution Profiles

The Datas Insights vendor graphic (Figure 2) provides an overview of major providers in the L/A/B NBU market. They are intended to help insurers quickly understand who is active in the space and their approximate relative market positions based on the total customer base in the U.S. or Canada and market traction, as well as the type of insurer the providers most commonly serve.

Figure 2: Datas Insights L/A/B NBU Vendor Categories



Each provider is shown in one of the following categories:

- **Dominant Providers** have strong market positions and momentum. Their solutions in the segment are well-known.
- **Contenders** have substantial customer experience and momentum.
- **Established Players** 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 Provider 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.

Sapiens International – Sapiens UnderwritingPro

Basic Firm and Product Information

Product name: Sapiens UnderwritingPro

Headquarters: New Rochelle, New Jersey

Founded: Sapiens was founded in 1982 and went public in 1992

Number of employees: 5,300

Key financial information: Sapiens International is a publicly traded company with an annual revenue of US\$500 million or greater. The company invests 10% to 15% of revenue in R&D. Sapiens International reports that its revenue growth rate in the last 12 months is less than 10%.

Target customer base: Tier-1 to Tier-4 individual and group life, annuities, and health carriers

Client base:

- **Total U.S./Canadian L/A/B primary insurers currently live on New Business and Underwriting as part of a suite:** None
- **Total U.S./Canadian L/A/B primary insurers currently live on New Business and Underwriting as a stand-alone system (rather than as part of a suite):** 27

Publicly announced clients: Did not disclose

Deployment options: On-premises, hosted at data center, hosted on a public cloud (e.g., AWS, Azure), hosted on a private or vendor-managed cloud

Average implementation time and cost:

- **Average time from contract signing to go-live:** Six to 12 months
- **Typical implementation cost for full suite, including service fees and SI partner cost:** Implementation cost is based on the line of business, number of products, necessary process configurations, number of integrations, and other factors.
- **Typical implementation cost for New Business and Underwriting component only, including service fees and SI partner costs:** Implementation cost is based on the

line of business, number of products, necessary process configurations, number of integrations, and other factors.

Pricing structure: Sapiens offers a SaaS model, which includes a license fee, hosting, maintenance and support, ongoing access to the latest version, and implementation of the upgrades.

Strategic partnerships:

- **Technology partners:** Atidot, Cincom, ForMotiv, Microsoft, Splice
- **SI partnerships:** Coforge, Cognizant, Deloitte, MindTree, PWC

Lines of Business Supported

Lines of Business Supported			
Individual Life	50 states	Indexed Annuities	10 to 49 states
Term Life	50 states	Single Premium Immediate Annuities (SPIA)	10 to 49 states
Whole Life	50 states	Dental Care	Supported
Universal Life	50 states	Vision Care	Supported
Variable Life	50 states	Disability	50 states
Variable Whole Life	50 states	Cancer/Critical Illness	50 states
Variable Universal Life	50 states	Accident	10 to 49 states
Group Life	10 to 49 states	Medicare Supplement	10 to 49 states
Group Term	10 to 49 states	Hospital Indemnity	10 to 49 states
Group Universal Life (GUL)	10 to 49 states	Individual Health	Not supported
Variable Group Universal Life (VGUL)	Supported	Group Health	Not supported
Group Annuities	Not supported	Absence Management	Not supported
Long-Term Care	10 to 49 states	Pet	Not supported
Fixed Annuities	10 to 49 states	Other	Not supported
Variable Annuities	10 to 49 states		

Source: Datos Insights

Technology Overview

Sapiens UnderwritingPro launched more than 20 years ago. The current version was released in March 2025. Sapiens releases major updates every 12 to 18 months. No customer is live yet on the new version, but 30% of customers are on the previous version,

which was released in 2023. Sixty-five percent are on a version released within the last three years, 5% are on a version that is more than or equal to three years old, and 80% of customers have been through at least one upgrade.

The solution supports relational (e.g., MSSQL, MySQL, Oracle), nonrelational (e.g., Hadoop, MongoDB), and cloud-native databases, , as well as traditional servers (Windows or Linux) and cloud-native platforms. The solution is written in object-oriented (Java, NET, C++) and scripting (JavaScript, Python, PHP) programming languages.

Support

There are 101 to 250 employees on the product design and engineering team and 101 to 250 employees on the in-house support team. There are 101 to 250 employees on the in-house implementation team.

Sapiens’ resources are based in the U.S., Canada, Europe, Asia-Pacific, the Middle East, and Africa. Implementation is done by Sapiens’ internal resources or partnership with a third-party provider. Sapiens offers customer engagement activities such as an online community, a customer advisory committee, customer success manager, user event/working groups, and training onsite and online.

Configuration Supported

Configuration	
Insurance product configuration	Via tools for use by client’s non-IT staff/SMEs
Screen configuration	Via tools for use by client’s non-IT staff/SMEs
Workflow configuration	Via tools for use by client’s non-IT staff/SMEs
Business rules configuration	Via tools for use by client’s non-IT staff/SMEs
Integration to third-party apps	Via tools for use by client’s IT analysts
Document authoring	Via tools for use by client’s non-IT staff/SMEs

Source: Datos Insights

Key Differentiators

Sapiens cites these as key differentiators:

- Largest customer base of stand-alone underwriting customers with a mature solution that has been in the market for more than 20 years

- Active user group of underwriting professionals who openly share ideas with each other and with Sapiens on a quarterly basis, further enhancing the product and roadmap and contributing to industry best practices
- Highly configurable platform with an integrated, business user-configurable underwriting rules engine increases straight-through processing (STP) rates, time-to-decision, organizational flexibility, and self-sufficiency
- UnderwritingPro is a key business application within the Sapiens Insurance Platform for life and annuities that can provide full end-to-end processing from portal to illustration, e-app, underwriting, policy administration, as well as data and analytics (BI)
- Numerous pre-built integrations are available, which decreases the risk for deployment and has time-to-market advantages. In addition, the solution is built on open architecture and open APIs, allowing the integration of any third-party products, services, or evidence providers quickly and efficiently.

Top Strategic Product Initiatives in the Next 12 to 18 Months

- Rules change impact analysis
- Continued AI and GenAI enhancements to support operational efficiency in evaluating case data, as well as creating rules
- Continued advanced data and analytics

Key Features and Functionality

E-Apps	
E-app support for reflexive questioning	Out-of-the-box
E-app support for dynamic forms attachment (based on responses to client data entry)	Out-of-the-box
Support for e-signature	Out-of-the-box
New business illustrations	Out-of-the-box
Ability to accept applications in a disconnected mode	Out-of-the-box
Quote Capabilities	
Multi-quote	Out-of-the-box
Quick quote	Out-of-the-box
Side-by-side quote comparison	Out-of-the-box
Multiple Workflow Support	

Jet	Out-of-the-box
Automated	Out-of-the-box
Simplified	Out-of-the-box
Full underwriting	Out-of-the-box
Core Functionality	
Pre-filled capabilities from internal and external systems	Out-of-the-box
Automatic producer licensing and contracting validation	Out-of-the-box
Advanced rules-based new business and underwriting rules and workflow (e.g., underwriting expertise, workload balancing)	Out-of-the-box
Underwriter workbench to centralize work items, reporting, notes, correspondence, decisions, and other case data	Out-of-the-box
Requirements Management	
Automatic requirements (ordering, receipt, statusing)	Out-of-the-box
Automated follow-up on missing requirements	Out-of-the-box
Cash Management - Processing and Recording	
Automatic cash with application acceptance based on predefined rules	Out-of-the-box
Checks	Out-of-the-box
Credit cards	Out-of-the-box
ACH	Out-of-the-box
EFT	Out-of-the-box
Wire transfers	Out-of-the-box
Payroll deduction	Out-of-the-box
Debit cards	Out-of-the-box
Support for 1035 exchanges	Out-of-the-box
Correspondence Management	
Automated correspondence creation	Out-of-the-box
Support for a centralized view of all correspondence about applicant	Integration
Integration	
MVR	Out-of-the-box
Rx	Out-of-the-box
MIB	Out-of-the-box
Labs/paramedical exams	Out-of-the-box
APS	Out-of-the-box
Credit reporting	Out-of-the-box
Ease of Use	
Support for paper initiation to paperless process	Out-of-the-box
Real-time status updates	Out-of-the-box
Producer portal with reporting and self-service capabilities	Out-of-the-box
Producer/underwriter collaboration tools	Out-of-the-box

Policy/document e-delivery	Integration
Group/Worksite Features	
Integration with ben admin systems	Out-of-the-box
Enrollment tools	Out-of-the-box
Eligibility management	Out-of-the-box
Case management	Out-of-the-box
Group-specific underwriting rules/workflow	Out-of-the-box
Reporting and Analytics	
Out-of-the-box NBU-specific dashboard support:	
By source (distribution channel)	Yes
By line of business and product type	Yes
By current status (UW stage)	Yes
Duration at each stage in the process	Yes
By underwriter	Yes
Out-of-the-box analytic support:	
Underwriting triage	Yes
Quantifying risk	Yes
Segmenting risk	Yes
Out-of-the-box reporting:	
Production	Yes
Sales	Yes
IGO/NIGO	Yes
Tools for ad hoc reporting	Yes

Source: Datos Insights

Conclusion

Insurers have an increasingly rich vendor market to select from when considering providers of new business and underwriting solutions. Modern L/A/B solutions are maturing, giving carriers better options than ever before.

Datos Insights recommends that insurers looking for a partner narrow the overall market to a shortlist of three or four by focusing on four main areas—staff, organization, functionality, and technology—easily remembered by the acronym SOFT. Consider the following questions for each area:

Staff

- Does the vendor's staff have the right skills and experience?
- How well are they likely to understand your needs?
- What resources are available for implementation and support?
- What assurances will you have that the staff you meet during the sales process will be the staff you work with?

Organization

- How stable is the organization?
- Is it big enough for your company to do business with?
- Who are their other clients?
- How focused are they on the insurance industry?

Functionality

- Do the solutions and services support your needs for modeling services, lines of business, states, and model maintenance?
- Which solutions and services are actually live at reference clients?

Technology

- Is the solution's technical architecture compatible with your enterprise standards (or can you build your enterprise standards around the solution's technical architecture)?
- Does your IT staff have the skills to support it?
- Do you have the appropriate business analysts for configuration, or will you rely on the vendor for support?

Insurers should be able to narrow the range of potential suppliers to a few candidates by using a handful of questions from each category. This approach is also much faster and more effective than distributing a large request for proposal, which insurers can avoid altogether or save for the final one or two potential suppliers after all the other evaluations have been completed.

About Datos Insights

Datos Insights is an advisory firm providing mission-critical insights on technology, regulations, strategy, and operations to hundreds of banks, insurers, payments providers, and investment firms—as well as the technology and service providers that support them. Comprising former senior technology, strategy, and operations executives as well as experienced researchers and consultants, our experts provide actionable advice to our client base, leveraging deep insights developed via our extensive network of clients and other industry contacts.

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