PerceptiveAnalytics

Submission Intake in Commercial Insurance Why only about 25-40% of submissions receive quotes, and what CXOs can do about it

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Executive Summary

Commercial P&C carriers do not lose submission opportunities in one dramatic moment. They lose them through a chain of small delays: unclear appetite, incomplete data, manual clearance, repeated rekeying, broker follow-up loops, and slow triage. The practical result is familiar to brokers and underwriters: a large share of submissions never become quotes, and only a subset of those quotes become bound premium.

This article treats the 25-40% submission-to-quote range as an operating benchmark, not as a universal statutory industry metric. It is a useful range because it is consistent with several observable signals: public quote-to-bind commentary in commercial brokerage, submission automation benchmarks, agent satisfaction research, and the persistent finding that underwriters still spend too much time on non-core work. J.D. Power's 2025 independent agent study found that only 57% of commercial lines agents say carriers meet foundational needs such as communicating appetite and eligibility; Accenture's 2025 underwriting research identifies ineffective systems as the most-cited internal underwriting challenge in its top-challenges chart, at 65%, and reports that only 9% of underwriting organizations currently use integrated solutions to prevent redundant data entry to a large or very large extent; and Guidewire's 2025 underwriting commentary describes the same lifecycle pattern: fragmented data, document handling, and rekeying across systems.

The business implication is larger than operations. In a softening but uneven market, speed and selectivity become strategic assets. Marsh's Q4 2025 Global Insurance Market Index reported a sixth consecutive quarter of global commercial rate decreases, while Aon's Q4 2025 market overview emphasized that insurers are leaning more heavily on data, analytics, and underwriting discipline to differentiate risks. When pricing tailwinds fade, intake quality becomes a source of profitable growth.

For Perceptive Analytics, the practical point is straightforward: submission intake should be managed as a decision-velocity problem. The same logic behind Perceptive Analytics' insurance decision velocity perspective applies directly to underwriting intake. The carriers that win are not simply the carriers with more data. They are the carriers that can turn submission data into a trusted quote, decline, referral, or broker question quickly enough to matter.

While our direct work in P&C is evolving, the patterns we are seeing closely mirror what we have implemented in other data-heavy industries such as banking, healthcare, payments, and retail, where fragmented systems, weak data quality controls, and slow reporting cycles create the same business drag. The lesson is not that insurance should copy another industry. The lesson is that data fragmentation has a recognizable operating signature, and it can be diagnosed, governed, and improved.

Who This Article Is For

This piece is written for CEOs, COOs, CUOs, CIOs, chief data officers, heads of distribution, and operating leaders in U.S. commercial P&C carriers, MGAs, and specialty programs. It is also relevant for broker executives who want to understand why submissions disappear into carrier queues and how to make the carrier relationship more efficient.

The article deliberately avoids a deep technical build specification. CXOs do not need another technical architecture diagram before they have a business diagnosis. They need to know where value leaks, which decisions must be redesigned, what data foundation is required, and how to sequence a transformation without over-automating judgment.

The core audience question is not, 'Which AI tool should we buy?' It is, 'Which submission decisions should become faster, more consistent, and more measurable, while still preserving underwriting judgment where it matters?' That is a business question first and a technology question second.

The Structural Hierarchy: How To Think About The Problem

A useful executive structure for this topic has to do more than list causes. It needs to move from market context to economics, then to operating failure modes, then to a decision model and transformation roadmap. The recommended hierarchy is:

- Define the submission funnel and make the 25-40% range explicit as a practical benchmark rather than a universal law.
- Explain why the gap exists: appetite mismatch, incomplete data, clearance friction, manual document handling, and slow prioritization.
- Translate the gap into economics: capacity waste, premium opportunity cost, broker relationship damage, and talent strain.
- Identify the data and operating model failures beneath the symptoms.
- Show what good looks like: an intake decision system, not a pile of tools.
- Provide a CXO roadmap: measure, triage, govern, automate, integrate, and continuously learn.
- Close with a board-level agenda and a realistic first 90 days.

This structure matters because senior readers are not just asking why submissions fail. They are asking whether the failure is material enough to justify attention, whether it can be improved without destabilizing underwriting quality, and whether the organization has a credible path to execution.

1. What The 25-40% Range Really Means

Submission-to-quote is not the same as quote-to-bind. Submission-to-quote measures the percentage of received submissions that result in a quote or quote-like offer. Quoteto-bind measures the percentage of quotes that become bound policies. Many organizations blur these metrics, and that blurring is one reason the intake problem stays hidden.

In practical terms, a carrier with 10,000 commercial submissions a month and a 30% submission-to-quote rate produces 3,000 quotes. If 25% of those bind, the organization binds 750 policies. Improving submission-to-quote from 30% to 35%, without changing quote-to-bind, adds 500 quotes and 125 bound policies. The real effect depends on premium size, line of business, loss expectations, and broker mix, but the operating leverage is obvious.

The 25-40% range should therefore be treated as a diagnostic range. If a carrier is below it, the organization may be structurally under-responding to the market. If it is inside the range, it may still be leaving profitable submissions untouched. If it is above the range, leadership should still ask whether the extra quotes are profitable, broker-aligned, and timely.

There is no single public statutory source that tells every carrier's submission-to-quote rate. Carriers define submissions differently, track email submissions inconsistently, and may exclude submissions that never enter formal workflow. That is why this article uses a triangulated benchmark instead of pretending the industry has one clean denominator.

Public market commentary does support the directional logic. Flow Specialty's 2025 announcement described a 50% quote-to-bind ratio as more than double suggested industry averages around 20%. That is a brokerage quote-to-bind metric, not a carrier submission-to-quote metric, but it reinforces the larger point: conversion ratios in commercial insurance are often low enough that process and appetite improvements can create meaningful business lift.

2. Where Submissions Leak Out Of The Funnel

2.1 Appetite Mismatch

The first leak is appetite mismatch. Brokers send risks that are not clearly inside carrier appetite, and carriers spend scarce underwriting time discovering what could have been made clear earlier. J.D. Power's agent research is especially relevant here because it does not frame the problem as a technology complaint. It frames it as a relationship and information problem: commercial lines agents say carriers often fail to communicate appetite, eligibility, and flexibility clearly enough.

That finding matters because appetite is the first underwriting decision. If appetite lives in PDF guidelines, emails, individual underwriter memory, and informal broker conversations, intake will always be uneven. A modern intake function needs appetite rules that are digitized, explainable, maintained, and visible to both broker-facing and underwriting teams.

The CXO question is simple: how many submissions are declined after an underwriter has already spent meaningful time on them, and how many could have been declined or redirected in minutes? If leadership cannot answer that question by line, broker, and reason code, the company is managing appetite by anecdote.

2.2 Incomplete Or Unusable Submission Data

The second leak is data quality. Commercial submissions arrive as ACORD forms, broker narratives, spreadsheets, schedules of values, loss runs, statements of operations, inspection reports, emails, and PDFs. Some are complete. Many are not. The operational pain is not merely that data is missing; it is that the organization often discovers the missing data too late.

In the starting draft, this was described as a data quality failure. That framing is directionally right, but a CXO version should be sharper: incomplete intake data is a decision-delay asset class. Every missing loss run, malformed location schedule, unclear revenue exposure, or inconsistent named insured creates a delay that competes directly against another carrier's faster response.

This is where Perceptive's work on data quality in other industries becomes relevant. In Perceptive Analytics' data quality monitoring case study, the key lesson is that trust is not created by one-time cleanup. It is created by continuous monitoring, validation, and exception visibility. Submission intake needs the same discipline: quality checks at ingestion, not after the underwriter is already buried in the file.

2.3 Clearance And Duplicate Work

Commercial insurance intake often includes clearance: checking whether the account, location, producer, or insured already exists in the system, whether a renewal is in process, or whether another office already has the submission. When this process is slow or fragmented, it creates two costs: the direct labor cost of checking systems and the indirect cost of underwriters hesitating because ownership is unclear.

Clearance is rarely glamorous, but it is one of the best places to find early ROI. It is rulesheavy, data-dependent, and measurable. It also prevents duplicate underwriting effort, reduces broker frustration, and helps leadership see actual submission flow rather than a distorted count of system-entered cases.

2.4 Manual Document Handling

The fourth leak is manual document handling. Underwriters and assistants open attachments, rename files, search for key facts, copy values from schedules, reconcile data between forms, and re-enter information into rating, policy administration, and workbench systems. Guidewire's 2025 bionic underwriter article points to the same broad issue: underwriters still spend significant time on manual data entry, while the future role requires more judgment, analysis, and portfolio thinking.

The problem is not that every document can or should be fully automated. The problem is that carriers often treat all documents alike. A loss run, a property schedule, a certificate, and a broker narrative each require different extraction, validation, and review logic. Intelligent document processing becomes valuable only when it is attached to underwriting decisions, not when it is treated as generic OCR.

2.5 Slow Prioritization

The final leak is prioritization. Not every submission deserves the same service path. Some should be declined quickly. Some should be routed to small commercial automation. Some should be assigned to a specialist. Some should trigger a broker question. Some should be escalated because they match a profitable segment, strategic broker, or target geography.

Many carriers still prioritize by inbox arrival, producer pressure, underwriter availability, or account size alone. Those rules are understandable, but they are not enough. A modern intake system should score submissions by appetite fit, completeness, expected premium, relationship value, loss indicators, line complexity, and service SLA risk. That is how intake becomes a management system rather than a queue.

3. Why This Is Now A Board Level Issue

3.1 The Market Is Less Forgiving

The commercial insurance market is no longer uniformly hard. Marsh reported that global commercial rates declined 4% in Q4 2025, the sixth consecutive quarterly decline. WTW's Q4 2025 survey found U.S. commercial insurance prices still rising, but at a more moderate 2.9% pace, down from 5.6% in Q4 2024. Aon described a buyer-favorable but uneven market, with casualty still challenged in North America.

That unevenness is the point. In a hard market, carriers can survive slow intake because pricing momentum hides operational weakness. In a more competitive market, slow intake shows up as lost broker attention, weak hit ratios, and underwriters spending time on the wrong accounts. The carrier that responds faster to the right risk earns more looks from brokers. The carrier that responds slowly gets shopped as a backstop.

3.2 Underwriting Profitability Requires Selection, Not Just Rate

The broader U.S. P&C industry entered 2025 from a stronger profitability position. NAIC's first-half 2025 analysis and AM Best's first-half 2025 report both highlighted improved underwriting results. S&P Global's 2025 P&C market report described a period of stability amid broader volatility. Yet improved industry results do not remove the need for discipline. They raise the bar.

As rate momentum moderates, underwriting profit depends more heavily on selection, portfolio steering, and operational expense control. Submission intake is where those disciplines first meet the market. If the intake process cannot distinguish good-fit risks from noise quickly, the carrier will either overwork the wrong accounts or miss the right ones.

3.3 Broker Relationships Are An Economic Asset

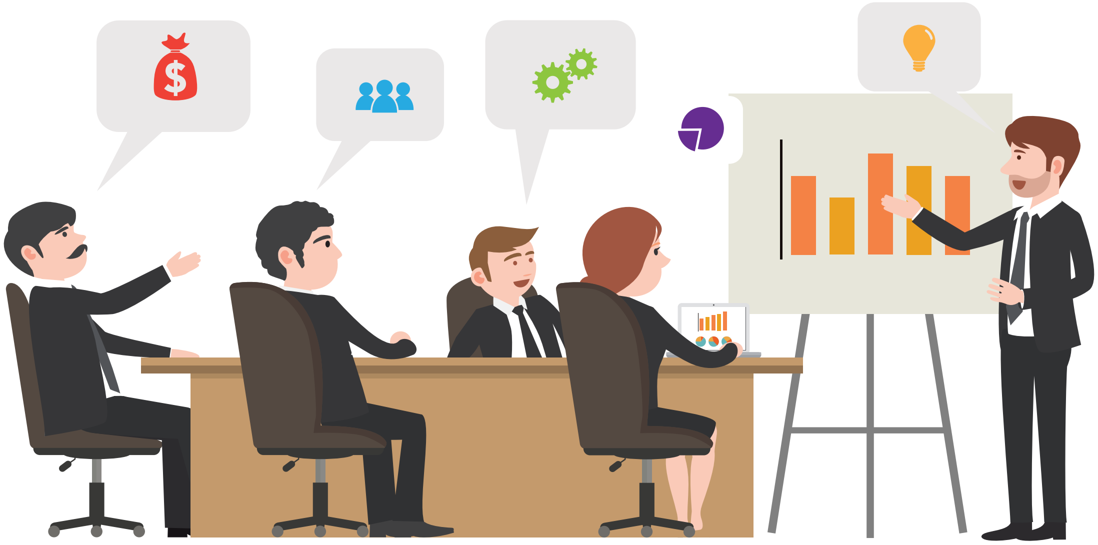
J.D. Power's 2025 study should make this issue visible to distribution leaders. It found that only 57% of commercial lines agents say carriers meet foundational needs, that 22% of commercial agents feel undervalued by carriers, and that commercial agents who feel undervalued are seven times more likely to reduce business with those carriers. It also found a 314-point satisfaction gap when working with a commercial insurer is very easy versus difficult.

Those are not soft measures. They are forward indicators of submission quality and market access. Brokers decide which carriers see the best risks first. If intake is slow, opaque, or inconsistent, brokers learn to use that carrier selectively or late in the process. Over time, the carrier's apparent appetite worsens because it receives more marginal submissions, reinforcing the very overload it is trying to solve.

3.4 Talent Capacity Is Tight

The talent problem is not simply a shortage of people. It is a shortage of experienced judgment. The Jacobson Group and Aon's Q3 2025 labor study found that technology, underwriting, and claims roles were among the industry's greatest needs. The same study found that 53% of carriers planned to increase staff and 33% planned to maintain staff, while analytics and executive roles remained difficult to fill.

When underwriters spend a large share of their week on document handling, clearance, and follow-up, carriers are not just wasting salary dollars. They are spending scarce underwriting judgment on work that does not require underwriting judgment. Guidewire's 2025 bionic underwriter commentary, citing hyperexponential research, notes that 86% of underwriters spend more than two hours per day on manual data entry.



4. The Economics Of Submission Intake

The business case should be built in four layers: capacity, premium opportunity, broker relationship value, and risk quality. This is important because automation projects often fail to win executive support when they are presented as labor-saving tools alone. Submission intake is not primarily a headcount story. It is a profitable-growth story.

4.1 Capacity Reallocation

Assume a commercial underwriting unit has 50 underwriters with an average fully loaded cost of $150,000. If each underwriter loses two hours per day to manual data entry and intake administration, the organization is effectively allocating roughly one-quarter of its underwriting capacity to work that should be reduced, redesigned, or automated. That does not include underwriting assistants, broker follow-up, management review, or lost responsiveness.

The goal is not to eliminate humans from the process. The goal is to move human attention to decisions where judgment changes the outcome: pricing exceptions, coverage structure, exposure interpretation, broker negotiation, and portfolio trade-offs. That is why Perceptive Analytics' view on the human future of insurance analytics is directly relevant: speed must serve judgment, not replace it.

4.2 Premium Opportunity

Now consider a carrier receiving 5,000 submissions a month. If 30% receive quotes, that is 1,500 quotes. If 25% bind, that is 375 bound accounts. Improving submission-to-quote to 36%, with no change to bind rate, creates 300 additional quotes and 75 additional bound accounts. At $20,000 average written premium, that is $1.5 million in additional monthly written premium before loss and expense effects.

The actual number will vary by line, premium size, underwriting margin, broker mix, and appetite. That is precisely why each carrier needs its own model. But the equation is simple enough for a board discussion: additional viable quotes multiplied by bind probability multiplied by expected profitable premium. The improvement should be measured by profitable quote lift, not by raw submission throughput.

4.3 Expense Ratio And Rework

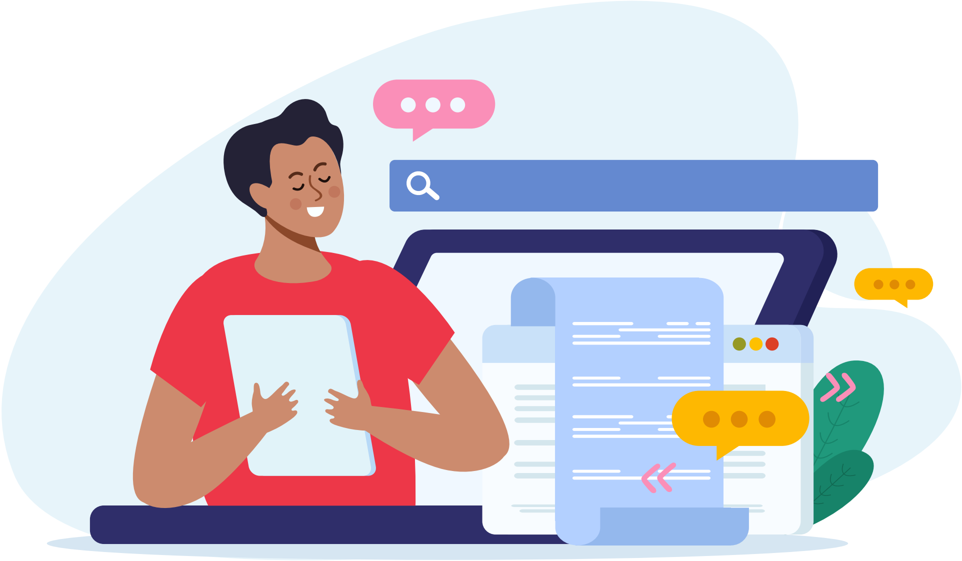
Expense improvement comes from fewer touches per submission, less rekeying, fewer duplicate clearance checks, fewer back-and-forth broker questions, and fewer submissions reaching senior underwriters when the appetite answer was already clear. The best early metric is not full automation rate. It is touch reduction for submissions that should never become complex work.

This is also where governance matters. A carrier can reduce expense by declining more quickly, but that does not mean it is making better decisions. Intake automation should track decline reason quality, broker appeal rates, reopened submissions, exception approvals, and downstream loss performance. Speed without learning is just faster waste.

4.4 Risk Quality

A better intake process should improve risk quality by routing complex risks to the right people earlier, flagging missing exposure data, identifying loss patterns, and making appetite exceptions visible. It should also improve portfolio steering by letting leadership see submission flow by class, geography, broker, limit profile, and loss indicator before the account becomes bound premium.

This is one reason AI in underwriting should be treated as an operating-model redesign. McKinsey's 2025 article on the future of AI in insurance argues that AI will reshape the insurance value chain, but the value comes from embedding AI into domains and decisions. Intake is one of those domains. It sits upstream enough to influence growth, profitability, and workload at the same time.



5. The Five Root Causes Behind Low Quote Rates

5.1 Fragmented Data Architecture

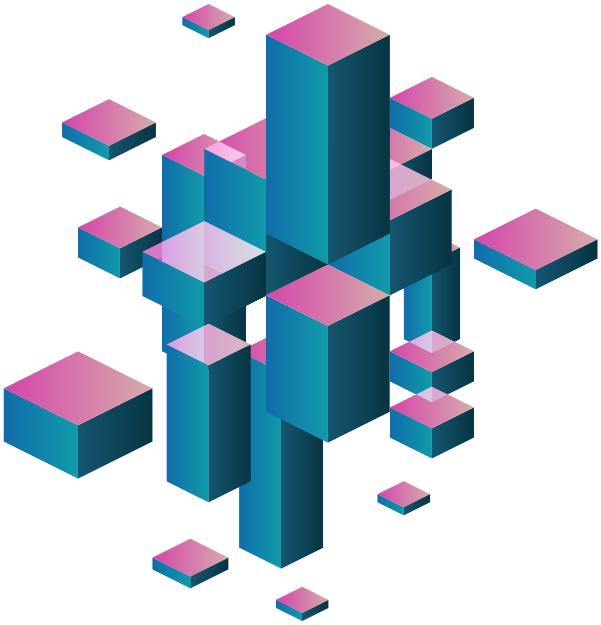
Most commercial P&C carriers operate across policy administration systems, rating platforms, document repositories, broker portals, email inboxes, spreadsheets, thirdparty data services, and data warehouses. Each system may be defensible on its own. Together, they create friction. Underwriters do not experience a modern data architecture; they experience a hunt.

Perceptive Analytics has described this broader problem in modernizing insurance data from silos to real-time AI: policy, claims, billing, and document data often do not move at the speed required for real-time decisioning. Submission intake is the front door to that same problem. If source systems are not connected, the intake decision cannot be connected either.

5.2 Process Design Built Around Paper

Many intake processes were digitized without being redesigned. Email replaced mail. PDFs replaced paper. Portals replaced fax. But the underlying workflow stayed the same: receive, open, read, rekey, check, ask, wait, assign, review. That is not digital underwriting. It is paper underwriting with better transport.

The process should be redesigned around decisions. What does the carrier need to know within five minutes? What must be known before an underwriter touches the file? Which missing fields are fatal, and which can be collected later? Which documents are required by line, account size, and risk class? Which submissions can be triaged automatically, and which require immediate human review?



5.3 Weak Appetite Governance

Appetite is often treated as a business preference rather than governed data. But if appetite determines which submissions deserve underwriter capacity, it should be versioned, owned, tested, and refreshed. It should also be expressed in a way that systems can use: class codes, geographies, limits, construction, occupancy, loss thresholds, revenue ranges, vehicle counts, safety indicators, and broker eligibility.

This is not about making appetite rigid. It is about making appetite explicit enough to support consistent decisions. Exceptions should still exist, but they should be visible. When exceptions are tracked, leadership learns which rules are too restrictive, which brokers bring strategically valuable exceptions, and which underwriters repeatedly override appetite for reasons that deserve portfolio review.

5.4 Data Quality Discovered Too Late

Data quality is often discovered at the moment of underwriting rather than at the moment of ingestion. That timing is expensive. If a location schedule is missing construction details, a loss run is stale, payroll data is inconsistent, or named insured information conflicts across documents, the carrier needs to know immediately.

A strong intake operating model uses automated completeness checks, confidence scoring, document classification, and exception queues. It does not pretend that every submission can be perfect. It simply makes imperfection visible early enough that the organization can act before the broker window closes.

5.5 Technology Pilots Without Adoption

The industry is not short of AI pilots. Deloitte's 2025 insurance outlook reported that many insurance executives have implemented generative AI capabilities in at least one business function. Accenture's underwriting research found that underwriting executives expect AI adoption to rise sharply over the next three years. But pilots do not fix intake unless they change workflow, data ownership, governance, and incentives.

This is where many programs stall. A model extracts data, but the underwriter does not trust it. A dashboard shows submission backlog, but nobody owns the SLA. A portal collects data, but brokers still email missing attachments. A workbench launches, but underwriters keep using spreadsheets because exceptions are easier there. Technology succeeds only when the operating model changes with it.

6. What Good Looks Like: The Intake Decision System

The goal should not be an 'AI submission intake tool.' The goal should be an intake decision system. That system has six capabilities: capture, classify, enrich, decide, route, and learn.

Capability	Executive Meaning	Typical Outputs
Capture	All submissions enter a measurable front door, including email, portal, and broker feeds.	Submission ID, broker, line, timestamp, documents.
Classify	The system understands what has arrived before work begins.	Document type, line of business, account type, completeness score.
Enrich	Internal and external data are added before underwriter review.	Existing account match, loss history flags, location data, third-party risk signals.
Decide	The first decision is made quickly and consistently.	Quote path, decline, refer, ask broker, missing-data queue.
Route	Work goes to the right person or automation lane.	Assignment, SLA, priority, escalation, specialist referr
Learn	Outcomes improve future triage and appetite rules.	Bind outcome, decline reason, loss feedback, broker quality score.

This structure aligns with Perceptive Analytics' broader insurance analytics practice: eliminate bottlenecks, create unified visibility, automate insight, and move decisions closer to the moment where they create value. For submission intake, that moment is the first hour after the submission arrives.

7. The Data Foundation Required

7.1 A Submission Data Model

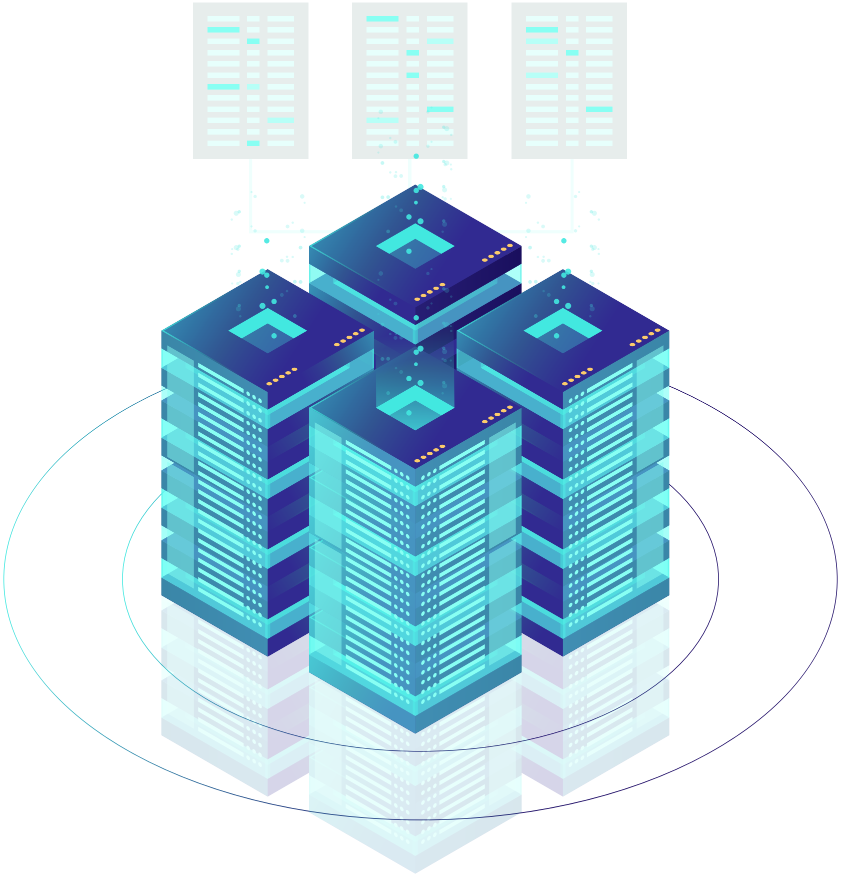
A carrier cannot improve submission-to-quote without a proper submission data model. At minimum, leadership needs a normalized view of submission ID, broker, producer, insured, line, class, geography, premium estimate, documents received, fields missing, appetite status, clearance result, assigned underwriter, first-touch time, quote status, decline reason, and bind outcome.

Most carriers have pieces of this model, but not a reliable end-to-end view. That is why the first phase is often less exciting than AI: define the object model, connect the systems, standardize reason codes, and build trustworthy metrics. The reward is executive visibility into the actual funnel.

7.2 Data Quality Rules At Ingestion

Data quality should be line-specific. A workers' compensation submission needs different validation than a property submission. A commercial auto account needs fleet and driver details. A property account needs COPE characteristics, location schedules, valuation, occupancy, and catastrophe exposure. A casualty account needs operations, revenue, payroll, contracts, limits, and loss history context.

The intake system should therefore maintain rule libraries by line and segment. These rules should classify missing data by severity: fatal, quote-limiting, referral-triggering, or acceptable for later follow-up. That distinction is essential because overly strict portals frustrate brokers, while overly loose intake creates rework downstream.



7.3 Master Data And Entity Resolution

Entity resolution is one of the hidden foundations of better intake. The same insured may appear under different legal names, DBAs, subsidiaries, locations, and broker descriptions. Without strong matching logic, the carrier may miss account history, duplicate submissions, claims context, or existing relationship information.

This is where Perceptive's experience in data warehousing and analytics programs outside insurance becomes useful. Banking, payments, healthcare, and retail all face the same issue: decision systems fail when customer, account, product, and transaction entities are not reconciled. The industry vocabulary changes, but the data problem is recognizable.

7.4 Human Readable Governance

Governance should not be a policy document that nobody reads. For submission intake, governance means clear owners for appetite rules, data quality rules, extraction confidence thresholds, decline reason codes, model monitoring, broker-facing communications, and escalation paths. Perceptive Analytics' partner selection guide emphasizes that insurance AI and data programs need pipeline reliability, governance operating models, and adoption design. Intake is exactly the kind of workflow where these disciplines determine whether the solution is trusted.

8. AI And Automation: Where They Help, And Where They Should Stop

8.1 What To Automate First

The safest first automation targets are not complex underwriting decisions. They are intake decisions with high volume, clear rules, and low judgment risk: document classification, data extraction, completeness checks, duplicate detection, appetite prescreening, routing, SLA alerts, and broker follow-up drafting.

This sequencing avoids the common trap of trying to automate the hardest underwriting judgment before the organization has automated the surrounding clerical work. It also creates immediate credibility with underwriters because it removes work they already know is low-value.

8.2 Human In The Loop By Design

AI should not silently decline complex commercial risks. It should recommend, explain, and route. The human-in-the-loop design should be explicit: which risks can receive straight-through appetite decline, which require underwriter confirmation, which require manager review, and which must never be automated because coverage, legal, or reputational risk is too high.

The regulatory direction also supports this caution. The NAIC's AI governance work and state adoption of AI oversight principles have made transparency, accountability, and governance central to insurance AI. The point for executives is not to avoid AI. It is to build AI that can be explained to underwriting leadership, compliance, brokers, and regulators.

8.3 Model Risk And Fairness

Submission intake models can create unfair or strategically harmful outcomes if they learn from biased historical patterns. For example, a model trained on historical quote behavior may deprioritize brokers or classes that were previously neglected, even if they are now strategic. A model trained on bound outcomes may miss risks that were profitable but rarely quoted because the old process was slow.

That is why intake AI must be monitored against business and governance metrics: routing accuracy, override rates, broker distribution, class distribution, decline reason consistency, appeal outcomes, and downstream loss performance. The Stanford 2025 AI Index reinforces the broader point that AI adoption is accelerating while responsible AI practices must keep pace.

8.4 The Right Success Metrics

The right metrics are not 'documents processed' or 'fields extracted.' Those are internal production measures. CXOs should track measures that connect to business value:

- Submission-to-quote rate by line, broker, producer, segment, and underwriter team.
- First-touch time and quote turnaround time by priority category.
- Percentage of submissions declined within defined SLA with reason code.
- Percentage of submissions routed without manual reassignment.
- Underwriter time spent on non-core work versus risk assessment.
- Broker satisfaction and broker repeat submission quality.
- Quote-to-bind, loss ratio, and profitability of automation-assisted submissions.

9. Industry Examples And What To Learn From Them

Examples are useful only if they are interpreted carefully. Perceptive Analytics should not imply direct P&C implementation experience it does not yet have. The more credible approach is to use industry examples as pattern evidence and then connect them to data modernization capabilities that Perceptive does have.

9.1 Foresight And Celent: Submission Automation As Recognized Innovation

Foresight Risk and Insurance Services was named a 2025 Celent Model Insurer in Digital and Emerging Technology, with public materials describing the role of AI-powered submission processing. IntellectAI's Foresight case study describes the underlying Magic Submission implementation. Celent's Model Insurer program is relevant because it evaluates insurer technology initiatives based on business impact and implementation quality, not only novelty.

The lesson is not that every carrier should buy the same system. The lesson is that submission automation has moved from experimental to recognized operating innovation. Commercial insurers are now being judged on how well technology changes underwriting workflow, not just on whether they have deployed new tools.

9.2 AIG: AI As Real-Time Underwriting Context

AIG's 2025 annual report describes expanded AI partnerships and the use of AI to ingest, organize, and contextualize data in real time for clearer underwriting and claims insights. AIG is not presented here as a submission-to-quote case study. It is evidence that large commercial insurers are treating real-time data context as a strategic underwriting capability.

For mid-market and specialty carriers, the strategic implication is important: large carriers are investing in underwriting intelligence at scale. Smaller carriers and MGAs do not need to replicate the same budget, but they do need a sharper, more focused version of the same capability around the lines and brokers that matter most.

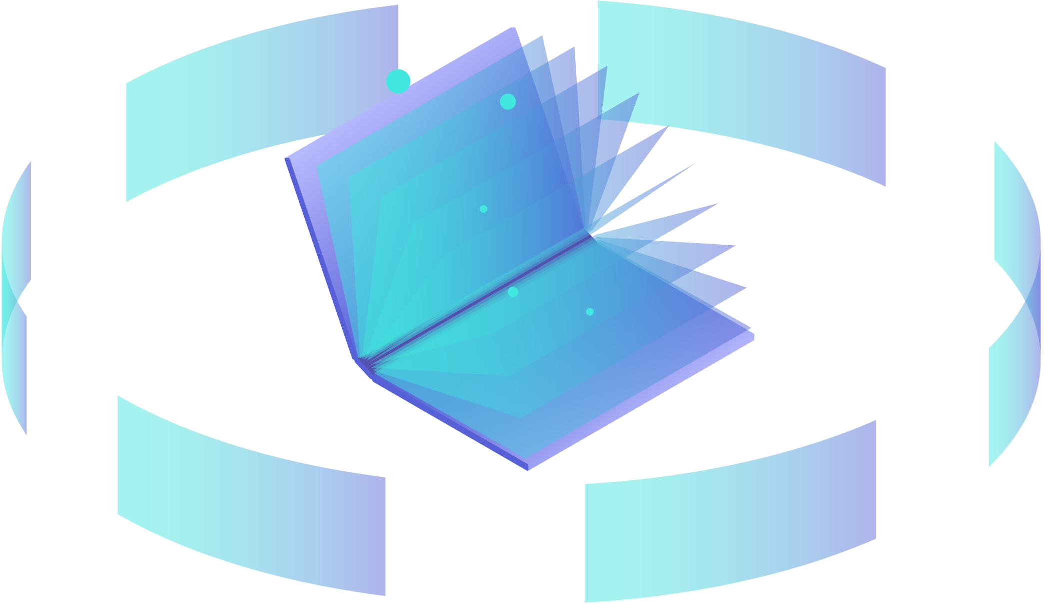
9.3 Munich Re alitheia: Parallel Evidence From Automated Underwriting

Munich Re's alitheia platform is more directly associated with life insurance, but it illustrates the operating potential of automated evidence collection, decision support, and faster underwriting pathways. The point is not to transplant life underwriting into commercial P&C. The point is that underwriting speed improves when data collection, rules, evidence, and workflow are designed as one system.

9.4 Perceptive Pattern Bridge

While our direct work in P&C is evolving, the patterns closely mirror what we have seen in other data-heavy industries: fragmented intake data, manual validation, inconsistent exception handling, delayed reporting, and weak feedback loops. In those environments, the value came from building governed data foundations, automating repetitive validation, and designing dashboards around decisions rather than around available data.

That is why Perceptive's advanced analytics consulting practice and its insurance analytics POV are relevant to submission intake. The carrier-specific domain judgment must come from underwriting leadership. The data engineering, pipeline, modeling, dashboard, and governance disciplines are repeatable.



10. A CXO Roadmap From 25% Toward 40%+

Phase 1: Measure The Real Funnel

The first phase is measurement. Many carriers believe they know their submission volume, but they only know the volume that entered a formal system. Email submissions, bounced portal attempts, broker resubmissions, duplicate accounts, and informal declines may not be counted consistently. The first task is to define the funnel from receipt to bind.

- Create one submission ID across channels.
- Capture timestamp, source, broker, line, class, documents, status, and owner.
- Define quote, indication, decline, referral, and no-response consistently.
- Measure submission-to-quote, quote-to-bind, and time-to-first-touch by segment.
- Identify top 20 brokers by volume, quote quality, and profitable bind outcomes.

Phase 2: Digitize Appetite And Decline Reasons

Next, digitize appetite. This does not mean reducing underwriting to rigid rules. It means making the first pass visible and consistent. Appetite rules should be owned by underwriting, encoded by data and technology teams, and reviewed through governance.

- Translate appetite into line-specific rules and thresholds.
- Create standard decline and referral reason codes.
- Track underwriter overrides and exception approvals.
- Share clearer appetite guidance with broker-facing teams.
- Review appetite performance monthly by submission, quote, bind, and loss outcome.

Phase 3: Automate Completeness And Document Intake

The third phase removes obvious friction. Use document classification and extraction to identify what arrived, what is missing, and what can be prefilled. The goal is not perfect extraction on day one. The goal is to reduce the time between submission receipt and a useful underwriting decision.

- Classify attachments automatically by document type.
- Extract key fields with confidence scores.
- Route low-confidence fields for human review.
- Generate missing-information requests before assignment where appropriate.
- Prefill workbench, clearance, and rating inputs where confidence is sufficient.

Phase 4: Build The Underwriting Workbench Around Decisions

A workbench should not be another screen. It should be the underwriter's decision cockpit. That means the submission summary, extracted evidence, appetite status, account history, broker context, loss indicators, documents, questions, and next best action must be available in one place.

This is where Deloitte's underwriting gen AI perspective and Capgemini's 2025 P&C report are directionally aligned: underwriting transformation is about augmenting professionals with better risk insight and execution models. The workbench should elevate judgment, not bury underwriters under another layer of administration.

Phase 5: Close The Learning Loop

The final phase is continuous learning. Intake decisions should feed portfolio management. Declines should inform appetite. Broker questions should inform portal design. Bound outcomes should inform prioritization. Loss emergence should inform the next generation of risk scoring.

This is what Perceptive Analytics means by moving from reporting to decision velocity. In our AI and real-time claims article, the same principle appears in claims: batch reporting creates delay, while continuous intelligence moves decisions closer to the event. Submission intake needs the same shift.

11. The First 90 Days

A practical first 90 days should not start with a full platform transformation. It should start with a diagnostic and a controlled improvement lane.

Days 1-30: Baseline And Map

- Map all submission channels and handoffs for one or two priority lines.
- Calculate current submission-to-quote, quote-to-bind, first-touch time, and noresponse rate.
- Interview underwriters, assistants, distribution leaders, and selected brokers.
- Identify top missing data fields, top decline reasons, and top rekeying tasks.
- Create a heat map of volume, profitability, and operational friction by broker and segment.

Days 31-60: Design And Pilot

- Define a target intake decision model for the pilot line.
- Digitize a first set of appetite and completeness rules.
- Build a submission dashboard showing funnel health and SLA risk.
- Pilot document classification and extraction on a subset of submissions.
- Create broker-facing missing-information templates and response SLAs.

Days 61-90: Operate And Decide

- Measure touch reduction, first-touch improvement, and underwriter time savings.
- Review false declines, overrides, broker feedback, and reopened submissions.
- Refine rules and data quality checks based on pilot evidence.
- Prepare the investment case for scale-up by line, broker tier, and integration requirement.
- Decide whether the next step is workbench integration, portal redesign, or broader data foundation work.

12. The Board Level Questions

A board or executive committee does not need to approve every workflow detail. It does need to ask the right questions. The following questions are a useful starting point:

1. What is our true submission-to-quote rate by line, segment, broker, and region?
2. How many submissions never receive a decision within the broker's market window?
3. What percentage of underwriter time is spent on non-core intake work?
4. Which brokers generate the highest-quality submissions and fastest profitable binds?
5. Which decline reasons consume the most capacity?
6. How quickly can we identify incomplete or out-of-appetite submissions?
7. Do our appetite rules exist as governed data or as documents and tribal knowledge?
8. Are AI pilots changing underwriting workflow, or merely producing demonstrations?
9. How are we monitoring model risk, fairness, override behavior, and broker impact?
10. What is the premium opportunity from moving from today's quote rate toward the next performance tier?

13. What Perceptive Analytics Would Bring To The Conversation

Perceptive Analytics should enter this topic with credibility and restraint. The company should not claim a long P&C implementation history if the marketing team has clarified that direct P&C work is evolving. The stronger position is this: submission intake is a dataheavy decision workflow, and Perceptive has deep experience in data analytics, AI, automation, data warehousing, modeling, pipelines, and executive dashboards across industries where similar fragmentation exists.

The Perceptive role is not to replace underwriting expertise. It is to help leadership see the funnel, build the data foundation, automate repetitive intake checks, design decision dashboards, and create governed AI-assisted workflows that underwriters can trust. This aligns naturally with Perceptive's published views on insurance analytics, decision velocity, workflow bottlenecks, and responsible human-AI decisioning.

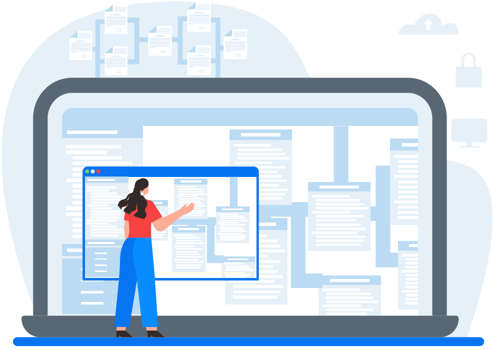
A credible Perceptive engagement would begin with a diagnostic: measure the submission funnel, identify leakage points, quantify the business case, assess data readiness, and prioritize a pilot. From there, the work can move into data model design, pipeline engineering, document intelligence, workflow analytics, BI dashboards, model development, and adoption support.

The message to the market should be confident but honest: while our direct work in P&C is evolving, the patterns closely mirror what we have solved in other data-heavy industries. We understand how fragmented data slows decisions. We understand how to build governed analytics systems. And we understand that AI creates value only when it improves the decision a business actually needs to make.

14. Broker Behavior: The Hidden Variable In Intake Performance

Submission intake is often described as an internal carrier workflow. That is only half true. Intake performance is co-produced by brokers and carriers. Brokers decide which markets see which risks, when they see them, how complete the submission is, and how quickly they respond to follow-up questions. Carriers decide how clearly appetite is communicated, how fast submissions are acknowledged, and whether brokers receive a useful answer in time to act.

This means low quote rates are not always caused by weak underwriting operations alone. Sometimes they reflect weak broker segmentation. A carrier may receive a high volume of low-fit submissions from brokers who do not understand appetite or who use the carrier as a market of last resort. Another broker may send fewer accounts but with higher completeness, better prequalification, and stronger fit. Treating those two brokers the same is operationally convenient and economically wrong.



A mature intake model should therefore include broker quality analytics. Not as a punitive scorecard, but as a way to improve the relationship. The carrier should know each broker's submission completeness rate, appetite match rate, quote rate, bind rate, average response time to carrier questions, loss performance of bound accounts, and proportion of submissions requiring rework. These measures help distribution leaders have a better conversation: 'Here is where your submissions move fast, here is where they stall, and here is what we can fix together.'

This is especially important because agent satisfaction research shows that ease of doing business has a very large effect on commercial lines satisfaction. A carrier that uses data to help brokers submit better risks is not simply improving operations. It is creating a differentiated broker experience. The carrier becomes easier to place with, clearer about appetite, and more predictable in response. In a market with moderating rates and uneven capacity, predictability is a form of currency.

The operating design should also distinguish between strategic brokers and long-tail broker volume. A strategic broker may deserve white-glove triage, dedicated appetite sessions, and custom data feedback. A long-tail broker may need clearer digital guidance, automated completeness checks, and faster decline messages. Both experiences can be good, but they should not be identical.

15. Line-Of-Business Differences: Why One Intake Model Will Not Fit All

Commercial P&C is not one workflow. Submission intake for small commercial package, middle-market property, excess casualty, commercial auto, workers' compensation, cyber, and specialty programs differs materially. A single enterprise intake vision is useful, but the operating model must be configurable by line and segment.

In small commercial, the opportunity may be more straight-through triage, rules-based appetite matching, and rapid quote or decline. In middle-market property, the focus may be schedule quality, valuation, COPE data, catastrophe exposure, engineering reports, and layered pricing. In casualty, the intake model must handle operations descriptions, contracts, loss narratives, limits, jurisdictional exposure, and social inflation sensitivity. In workers' compensation, payroll, class code accuracy, experience modification, loss history, and safety controls matter. In cyber, controls evidence and questionnaire completeness become central.

This line-level variation is why document automation alone is not enough. The same extraction engine may read fields across documents, but the business meaning of those fields changes by line. A missing revenue field may be fatal in one context and manageable in another. A loss run may be essential for a large account and unnecessary for a simple renewal. A location schedule may be the heart of a property submission and irrelevant elsewhere.

Executives should therefore avoid approving a generic intake transformation without asking for line-specific value cases. The first pilot should be chosen where three things intersect: meaningful submission volume, clear operational pain, and enough business rule clarity to support measurable improvement. Starting with the most complex specialty line may look ambitious, but it can slow momentum. Starting with a line where intake rules are visible and business value is measurable creates proof and trust.

At the enterprise level, the reusable components are the data model, document pipeline, governance model, dashboard pattern, integration approach, and feedback loop. At the line level, the configurable components are appetite rules, required documents, completeness thresholds, routing logic, risk indicators, and escalation rules. That distinction lets a carrier scale intelligently without pretending every line behaves the same.

16. The ROI Model CXOs Should Demand

A submission intake business case should not be built on vague automation claims. It should be built on a transparent model that leadership can challenge. A practical model has six inputs: submission volume, current submission-to-quote rate, current quote-to-bind rate, average written premium, expected underwriting margin, and current cost per submission touch.

The first layer estimates profitable premium lift. If viable submissions are being missed because of slow triage or incomplete processing, the value comes from increasing timely quotes in segments where the carrier wants to grow. The model should separate all submissions from in-appetite submissions. Otherwise, leadership may accidentally incentivize more quoting of poor-fit business.

The second layer estimates capacity release. This should include underwriter and underwriting assistant time spent on non-core work, but it should not be framed only as labor savings. The better question is: what higher-value work becomes possible when underwriters recover time? More broker conversations, deeper analysis of complex accounts, faster renewal strategy, better

The third layer estimates broker relationship value. This is harder to quantify, but it should not be ignored. Faster acknowledgement, clearer appetite, and fewer back-and-forth cycles can increase a broker's willingness to send better risks earlier. Over time, that can change the quality of the carrier's submission pool. Leadership should track strategic broker submission share, quote share,

The fourth layer estimates risk quality. Better intake should reduce avoidable misclassification, missed loss signals, and inconsistent appetite exceptions. This value may take longer to prove because loss outcomes mature over time, especially in casualty. Still, the intake system should capture the data needed to compare loss performance across automation-assisted, manually

The fifth layer estimates implementation cost and adoption risk. Integration, data cleansing, change management, governance, and model monitoring are real costs. A credible business case includes them. The worst business case is the one that makes transformation look easy by excluding the work required to make it trustworthy.

The final layer is a sensitivity analysis. What happens if quote lift is only half the target? What happens if bind rate falls because the carrier quotes more marginal risks? What happens if document extraction reaches 80% useful accuracy rather than 95%? What happens if underwriters override routing recommendations 40% of the time? CXOs should want these questions answered early. A resilient business case survives conservative assumptions.

17. Common Failure Modes And How To Avoid Them

17.1 Mistaking A Portal For A Strategy

Portals can help, but a portal is not a submission strategy. Many broker portals fail because they shift work to brokers without improving carrier responsiveness. Brokers will use a portal if it gives them speed, clarity, status visibility, and a better chance of a useful answer. They will resist it if it feels like extra data entry into a black box.

The better approach is to design the broker experience around mutual efficiency. If the carrier requires a field, explain why it matters. If data is missing, identify it immediately. If a risk is outside appetite, say so quickly and with a usable reason. If a submission is promising, make the next step visible. The portal should be a decision interface, not a compliance hurdle.

17.2 Automating Bad Rules

Automation makes rules more powerful. That is useful only if the rules are good. If appetite guidance is outdated, inconsistent, or politically negotiated rather than portfoliodriven, automation will hard-code confusion. Before rules are automated, underwriting leadership should review them for strategic alignment, clarity, exception logic, and measurable outcome definitions.

This is why governance cannot be postponed. A rule owner should be responsible for each major appetite rule. Rule changes should be versioned. Overrides should be tracked. Decline reasons should be reviewed. Otherwise the organization will not know whether the system is improving discipline or simply scaling legacy habits.

17.3 Underinvesting In Change Management

Underwriters are often skeptical of intake automation for good reasons. They have seen tools that create more clicks, extract data incorrectly, ignore judgment, or produce management dashboards that increase pressure without removing work. A successful program should involve underwriters from the beginning. They should help define what good extraction looks like, which decisions can be automated, where confidence thresholds belong, and how exceptions should be handled.

The change story should be practical: this program gives you more time for risk selection, broker negotiation, and complex underwriting. It removes repetitive tasks and makes missing data visible earlier. It does not ask you to trust a black box. It gives you a faster first draft and a clearer decision trail.

17.4 Measuring Activity Instead Of Outcomes

A team can process more documents and still fail to improve quote quality. It can reduce first-touch time and still quote the wrong risks. It can increase automation rate and still frustrate brokers. That is why outcome metrics matter more than activity metrics. The program should be judged by timely decisions, profitable quote lift, broker experience, underwriter capacity release, and risk quality.

17.5 Scaling Before Trust Is Earned

The final failure mode is scaling too quickly. Intake touches distribution, underwriting, operations, data, compliance, and technology. A pilot that looks successful in one line may fail in another if the data, documents, appetite rules, and broker behavior differ. The right scaling path is sequenced: prove the pattern, refine governance, build reusable components, then expand line by line.

18. Operating Model: Who Owns Submission Intake?

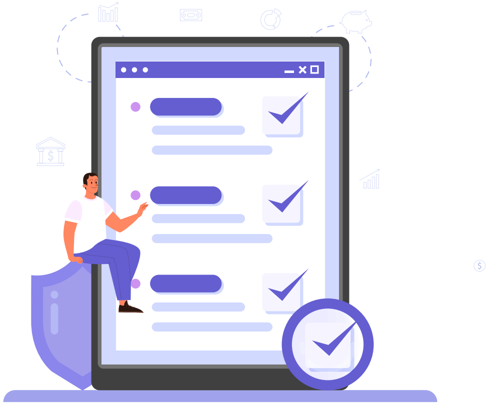
Submission intake often suffers because ownership is fragmented. Distribution owns broker relationships. Underwriting owns risk appetite. Operations owns workflow. IT owns systems. Data teams own pipelines and dashboards. Compliance owns governance concerns. When everyone owns a piece, nobody owns the funnel.

A stronger model creates an intake steering group with clear executive sponsorship, usually from the COO, CUO, or both. The group should include underwriting, distribution, operations, data, technology, compliance, and finance. Its mandate should be specific: improve timely, profitable submission decisions while strengthening broker experience and underwriting discipline.

This group should not meet only to review project status. It should review funnel metrics, appetite performance, broker quality, SLA breaches, automation accuracy, override patterns, and business outcomes. It should decide which rules change, which integrations matter next, which broker segments need attention, and which lines are ready for scale.

The operating model also needs a product owner for the intake workflow. This person is not merely a project manager. The product owner translates business decisions into workflow requirements, prioritizes the backlog, coordinates underwriter feedback, and makes sure dashboards answer real management questions. Without this role, intake transformation becomes a collection of disconnected technology tasks.

Finally, finance should be involved early. Finance can help validate the business case, define premium opportunity assumptions, measure expense effects, and prevent the program from being judged only by technology milestones. When finance participates, the program becomes easier to defend at executive level.



19. Data Warehouse And Pipeline Design

A modern intake program needs operational systems, but it also needs an analytical foundation. The data warehouse or lakehouse should not be an afterthought. It is where the organization learns from submissions over time. Without it, the carrier can automate today's workflow but cannot improve tomorrow's decisions.

The warehouse should capture raw submission events as well as curated business entities. Raw events preserve the audit trail: when a submission arrived, which documents were attached, which extraction model processed them, what confidence scores were assigned, who reviewed exceptions, and what status changes occurred. Curated entities make the data usable for executives: account, broker, policy, quote, line, exposure, document, rule, decision, and outcome.

Pipelines should include data quality checks at each stage. A failed extraction, missing document, invalid class code, duplicate account match, or inconsistent premium estimate should be visible. Data engineers should design for observability: pipeline freshness, failure alerts, reconciliation controls, and lineage. This is not technical ornamentation. It is what allows underwriting leaders to trust the metrics.

The architecture should also support feedback loops. Bound policy outcomes, loss emergence, broker response behavior, and underwriter overrides should flow back into the intake analytics environment. That is how the carrier learns whether its triage logic is creating better business or merely faster movement.

In Perceptive Analytics language, the goal is to move from disconnected reporting to decision intelligence. A dashboard that shows last month's backlog is useful. A system that predicts which submissions are about to miss the broker decision window, explains why, and routes the next action is more valuable. That is the difference between analytics as visibility and analytics as operating leverage.

20. Final Conclusion: The Unquoted Submission Is A Strategy Signal

A submission that never receives a quote is not always a failure. Sometimes the right answer is a fast decline. Sometimes the submission is outside appetite. Sometimes the broker sent incomplete data. But when large volumes of submissions disappear without timely, measurable decisions, the organization has a strategy problem.

The 25-40% range should therefore be treated as a mirror. It asks leadership to look at the whole system: appetite clarity, data quality, broker experience, underwriter capacity, technology adoption, governance, and decision speed. The answer is not to quote everything. The answer is to make the right first decision faster and to learn from every outcome.

In 2025 and 2026, commercial P&C carriers are operating in a market where rates are moderating, casualty remains difficult, broker expectations are rising, underwriting talent is stretched, and AI capability is moving quickly. That combination makes submission intake a board-level issue.

The carriers that improve intake will not simply process more submissions. They will see the market earlier, protect underwriter judgment, strengthen broker trust, and turn operational speed into profitable growth. That is the real prize. Not automation for its own sake, but decision velocity that serves underwriting discipline.

Glossary For CXOs

Submissiontoquote: The percentage of received submissions that result in a quote, indication, or quote-like offer, depending on carrier definition.

Quotetobind: The percentage of quotes that convert to bound policies.

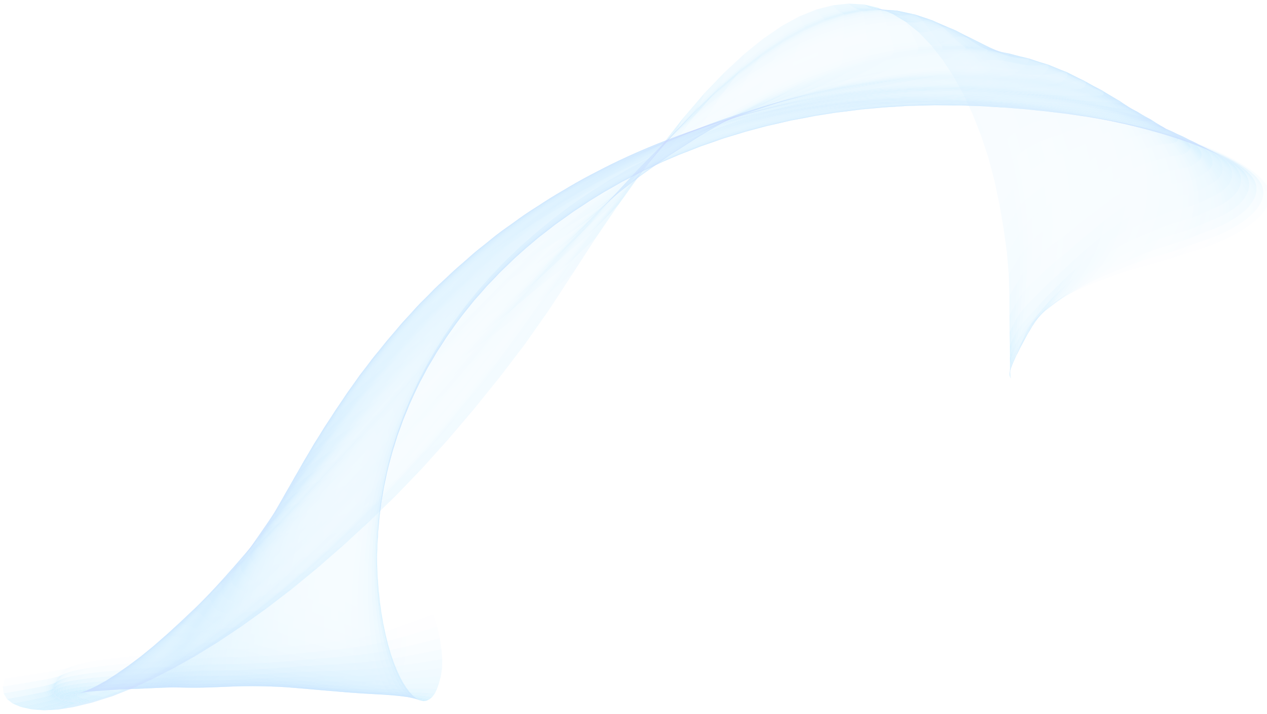
Appetite: The carrier's current willingness to consider a risk, based on line, class, geography, exposure, limits, loss profile, broker relationship, and strategic priorities.

Clearance: The process of determining whether an account already exists, is assigned, or conflicts with another submission or renewal.

Straightthrough processing: A workflow in which a submission or decision moves without manual intervention, usually for simple or well-defined risks.

Underwriting workbench: A unified workspace that gives underwriters the data, documents, rules, insights, and actions needed to make decisions.

Decision velocity: The speed at which an organization turns data into a trusted decision and measurable business action.



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