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MAY 2025

PARAMETRIC TOOLS FOR SMARTER CAPTIVE STRATEGIES

BEYOND AUTOMATION: GEN AI VALUE IN UNDERWRITING

FACING RISK HEAD ON: ADAPTING TO AN UNCERTAIN WORLD

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Editor's Note

Dear Readers,

This May issue brings together articles that highlight a simple but powerful truth: the insurance industry is evolving rapidly, driven by forces that demand new thinking and fresh approaches. From the US's new tariff policy rattling global supply chains and business interruption coverage, to parametric insurance reshaping how captives respond to risk; the risk landscape is shifting. And how the industry as a whole adapt will shape the future of risk management.

What strikes me most is how these shifts aren't just about new tools or policies—they're about mindset. Take generative AI, for instance. It's not just automating tasks; it's pushing underwriters to think differently, to find patterns buried deep in data and make smarter, faster decisions. And then there's the broader picture: social inflation and evolving broker-carrier relationships. The complex web of risks we now face demand more collaboration and sharper insights than ever before.

I personally view these challenges as opportunities—a chance for insurers to move beyond traditional roles and really partner with clients. It's about being agile, transparent, and willing to rethink old assumptions. That's no small task, but it's exactly what today's environment calls for. As the old saying goes, *"Smooth seas never made a skilled sailor."* This may be rough sea moment but it's sharpening the industry's ability to navigate what comes next with more clarity, confidence, and creativity.

So as you explore these articles, I hope you'll find both practical insights and a spark to think differently about where insurance is headed. Because adapting isn't just about survival anymore; it's about leading the way with uncertainty.

Annie Undikai

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Managing Editor

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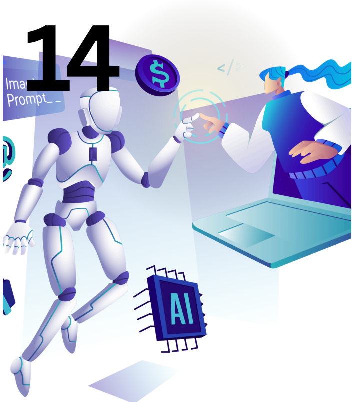

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Tariffs & Trade Wars

Rethinking Business Interruption Risks

The US's newly announced tariff policy has sparked immediate reactions. At first glance, tariffs might seem like a trade issue. However, for anyone underwriting or managing business interruption (BI) risks, the implications go deeper. They cut across supply chains, policy wording, and loss assessments in ways that demand immediate attention. What seems like a policy decision in Washington, is shaking up global supply chains and quickly becoming a pressure point for BI coverage.

For years, supply chain risk lingered in risk reports—recognised yet seldom prioritised. Unless a natural disaster or political upheaval disrupted a key supplier, most global operations carried on without interruption. The pandemic changed that. It exposed the fragility of global logistics in real time.

Now, tariff hikes are compounding the pressure. Companies dependent on imported materials or components are encountering significant delays. Late-arriving replacement parts are pushing back repair timelines. In some cases, operations grind to a halt with little warning.

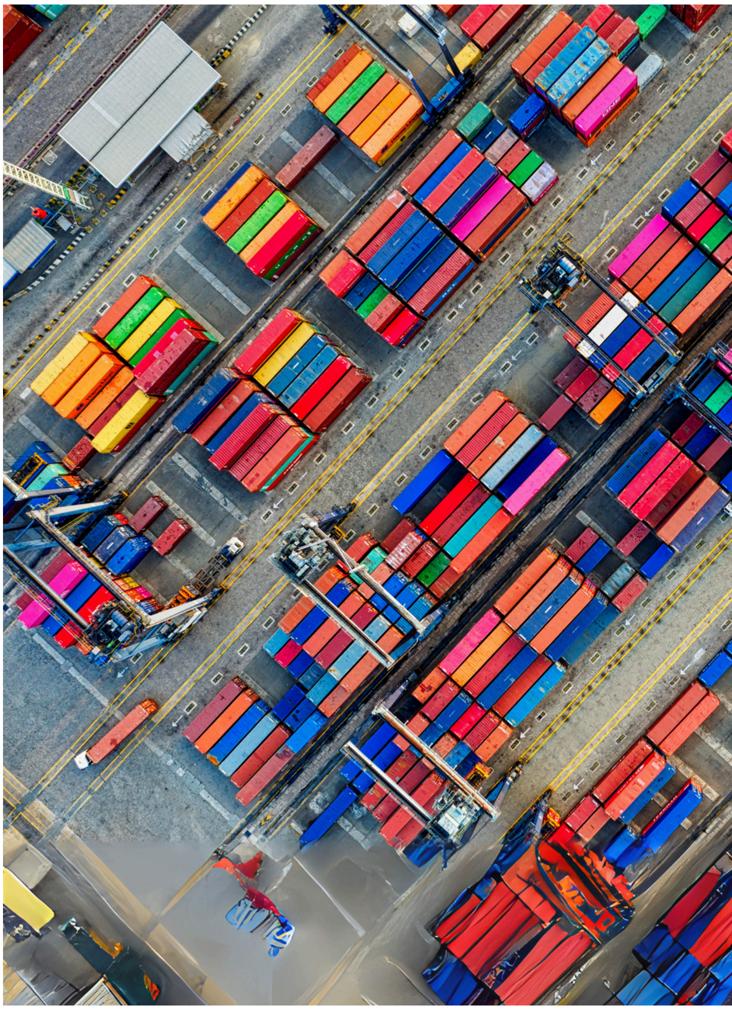
The Shockwave Of A Policy Shift

Take Sophia Argyropoulos, director of the Australian swimwear brand RAQ. Her swimwear is manufactured in China and shipped from a Melbourne warehouse. But under US trade law, they're considered Chinese goods. When the US imposed an initial 10% tariff on Chinese imports, RAQ passed the cost on to its American customers. When it climbed to 20%, RAQ raised prices slightly and absorbed part of the difference.

But by April 9 when the tariff soared to 145%, that same $95 swimwear faced an extra $137 in import fees. Absorbing that cost would have erased the brand's profit margins. Passing it on would have priced her products out of the market. With few viable options, Sophia shut down RAQ's US website and paused all American sales, losing 20% of the brand's revenue almost overnight.

Since then, there's been a partial reprieve. As of May 13, the US administration has put a pause on the 145% tariff rate on Chinese imports. Instead, a 30% tariff has taken effect, with some exceptions. While this offers some relief, uncertainty remains. Brands like RAQ are still making hard choices in the face of sudden, unpredictable policy shifts.

What seems like a policy decision in Washington is shaking up global supply chains and quickly becoming a pressure point for BI coverage.



But this isn't just a story about a swimwear label. It's a snapshot of how trade decisions ripple through supply chains, revenue models, and ultimately, insurance claims. It's a stark reminder that business interruption can start far upstream, well before anything breaks or burns.

These kinds of economic interruptions, which are rooted in geopolitics rather than operational failure; don't always fit neatly within traditional business interruption coverage. Yet the financial impact is just as real. It pushes insurers to rethink what business interruption risk really means and whether they're prepared for the next disruption that leaves no wreckage, just silence and stalled operations.

Rethinking BI Risk

Business interruption insurance has always leaned on something tangible. But the rules are shifting. Economic disruptions are getting harder to see and harder to insure. A tariff can stall production just as effectively as a natural disaster. A sudden change in trade policy can cut off a supply chain overnight. These don't always trigger traditional coverage, yet the losses feel just as heavy.

The challenge lies in the fact that tariffs themselves typically do not result in physical damage. But they can set off a chain reaction that does. For instance, shipping delays can result in the spoilage of perishable goods, exposure of construction sites and equipment to environmental elements, or escalate a minor operational disruption into a prolonged, costly shutdown; as in the case of RAQ.

And in some cases, trade tension can boil over into more destructive territory such as sabotage, riots, and theft. These aren't hypotheticals risks, but depending on the policy, could lead to valid and substantial claims.

Policy language carries more weight than many businesses realise. The fine print can make all the difference, especially when it comes to coverage for losses tied to government actions. In some cases, if tariffs significantly raise the cost of goods and force a slowdown or halt in operations, coverage may apply.

But only if the policy explicitly includes government actions as a covered trigger. The problem is, many businesses don't know where their coverage starts or ends until they're already dealing with a loss. By then, it's often too late to fill the gaps.

This raises questions for insurers and brokers. Are they doing enough to help clients assess exposure to political and trade risks? Are policies adapting to the way the world works now, or are they still built for a more predictable past?

It also shifts how we think about risk itself. Two businesses in the same industry might look similar on paper, but the one with a more flexible, regionally diversified supply chain may be far less vulnerable. In a world shaped by tariffs, sanctions, and sudden policy shifts; resilience takes on a new appearance.

Insurance in today's world extends beyond merely safeguarding physical assets such as buildings and equipment. It's about ensuring the seamless movement of goods, the flow of daily operations, and the steady continuity of income. When this rhythm is disrupted by something as intangible as a policy announcement, businesses must be prepared to respond effectively.

PARAMETRIC TOOLS FOR SMARTER CAPTIVE STRATEGIES

There's something frustrating about watching a loss unfold, knowing the damage is real but the policy wording might say otherwise. Maybe it's a supply chain disruption triggered by a flood that didn't quite breach the warehouse. Or a power outage that lasted just short of the deductible threshold. These aren't rare events. They happen all the time. And when they do, traditional indemnity policies can leave a business exposed. That's where parametric insurance comes in.

Parametric insurance is designed for that space in between. It doesn't aim to replace traditional cover but instead, adds structure to the grey areas. For captives, which are already built to respond with flexibility, parametric solutions offer a practical way to strengthen risk programs and provide faster, more targeted support.

What Is Parametric Insurance?

Parametric insurance works differently from traditional indemnity cover. It's based on objective, predefined triggers such as wind speed, rainfall, temperature, or seismic intensity. It's a simple idea with powerful implications. Imagine a policy that responds the moment a Category 3 cyclone is recorded, or when rainfall exceeds 300mm in a single day. Once the agreed threshold is met, payment is made. That's the whole mechanism. There are no disputes over coverage interpretation or waiting for claims investigations. Only a timely, data-driven response.

Of course, parametric insurance isn't a substitute for traditional coverage such as property or liability insurance. It's not meant to be. But it can play a valuable supporting role, especially where traditional policies fall short. Think of losses tied to non-damage business interruption, uncovered perils, or events that sit beneath large deductibles. These are precisely the types of risks that parametric insurance can address.

For captives, which are already built to respond with flexibility, parametric solutions offer a practical way to strengthen risk programs and provide faster, more targeted support.

For captives, this makes a lot of sense. They have deep visibility into the parent company's risk profile. They're structurally close to the operational pain points and have the flexibility to structure solutions that the commercial market may not offer. Parametric coverage gives them one more tool to respond with speed, precision, and purpose.

How Captive Can Use Parametric Insurance

Captives exist to solve problems the markets can't always address. They're closer to the risk, more involved in operational planning and often write coverage that's narrowly defined or high frequency in nature. That makes them ideal vehicles for parametric solutions.

Instead of waiting for broader market capacity, a captive can design a parametric policy around the organisation's specific exposures. Let's take a closer look via an example. A manufacturing company in Southeast Asia relies on a central warehouse that often gets cut off by flooding. The building itself isn't damaged, but when the access roads are underwater, shipments get delayed and operations come to a standstill.

The company's traditional insurance doesn't cover that kind of loss. So the company uses its captive to set up a parametric policy. If rainfall measured at a nearby weather station exceeds a certain threshold over two consecutive days, the policy pays out. This helps cover the cost of rerouting deliveries or sourcing materials locally to avoid further disruption.

This kind of approach isn't just theoretical. During the COVID-19 pandemic, Katoen Natie, a global logistics firm based in Luxembourg, faced major business interruption. Lockdowns disrupted supply chains and shut down parts of their network. But because there was no physical damage, traditional policies didn't cover the losses. Through its captive, Katoen Natie developed a parametric policy tied to specific triggers, like government-imposed closures.

It gave them access to fast capital during a period of deep uncertainty. The solution wasn't perfect, but it filled a critical gap. And it showed how captives can respond with speed and precision when the standard market falls short.

Captives have always been about flexibility. Parametric insurance just gives them one more way to use it. When designed well, these policies can deliver cash when it's needed, for risks that are otherwise uninsurable or at least uncovered. This approach doesn't aim to replace traditional coverage; rather, it focuses on creating solutions that truly work.

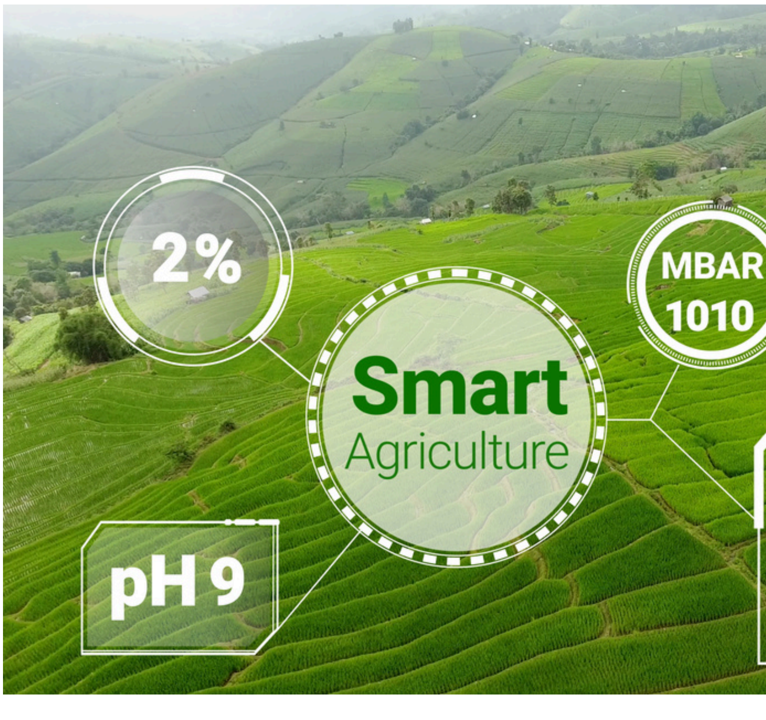
In each of these cases, the captive didn't just mimic what the commercial market was already doing. Instead it looked closely at a specific operational pain point, found data that could be tracked in real time, and built a policy that responded when it was most needed.

Benefits of Parametric In Captives

Captives are in a strong position to do this kind of work for a few key reasons. First, they sit closer to the business. They work directly with teams in operations, supply chain, finance, and even ESG. This direct access provides captives with a clearer understanding of the actual risks involved, beyond what is reflected in historical loss data. Consequently, they can design policies that align more effectively with the organisation's operational realities.

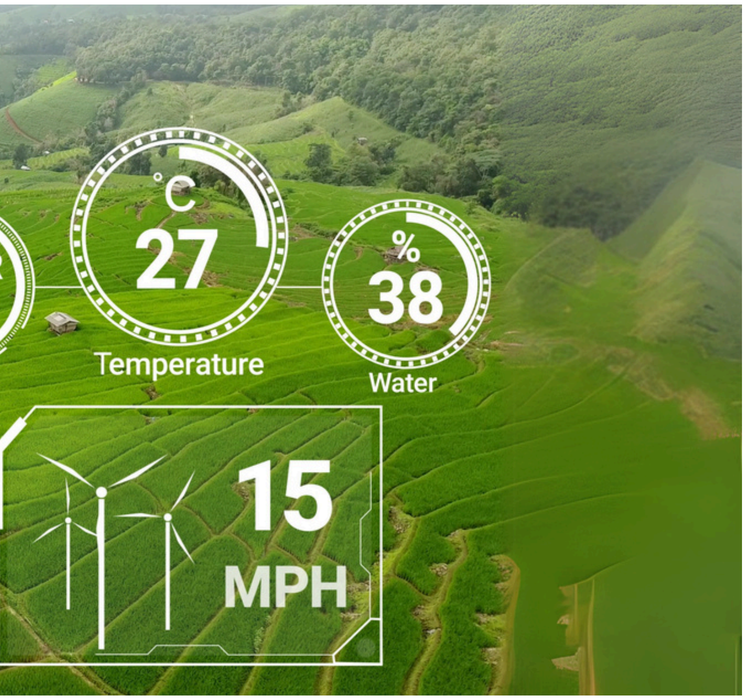
Captives have the advantage of agility. Unlike traditional insurers, who may wait years for data and depend on industry benchmarks before providing coverage, captives can swiftly address new or emerging risks. Whether the threat is related to climate change, cyber security, or reputation, a captive can create and implement a parametric policy in months instead of years.

When addressing basis risk—the disparity between the trigger and the actual loss—captives typically exhibit greater flexibility. While commercial insurers often aim to completely eliminate basis risk, this can lead to delays or complicate policy implementation. In contrast, captives can adopt a different perspective. They may embrace a slight mismatch in return for enhanced speed, transparency, and cash flow, resulting in a more strategic approach.



That gives them more freedom to accept a level of mismatch, so long as the overall solution improves resilience. For example, a captive might write a parametric earthquake cover that pays out when a magnitude 6.0 quake hits within a 50-kilometre radius, even if the actual site isn't damaged. Why? Because the costs of evacuation, inspection delays, or lost production often follow regardless of physical loss. This may not be a perfect match, but it addresses a very real disruption.

Industries with high exposure to uncontrollable external events have started using this approach more actively. Agriculture is a clear example. Captives supporting farming cooperatives or food producers have used satellite data on soil moisture, rainfall, or heatwaves to trigger payouts that help offset crop losses or input cost spikes.



In energy, some companies have explored parametric covers for wind speed or wave height to manage downtime in offshore operations. Even in healthcare, parametric policies tied to infectious disease outbreaks have helped captives cover surge costs or revenue drops that fall outside traditional policies. Across all of these examples, what stands out is how captives use their inside knowledge of both insurance and the business itself.

Final Thoughts

Parametric insurance isn't a silver bullet. It won't replace traditional covers, nor eliminate uncertainty. But in the hands of a captive, it becomes something uniquely useful—a way to respond quickly, fill in the gaps, and support the business when timing and clarity matter more than precision.

And this approach is gaining traction. According to Marsh's Captive Landscape Report, more than 15% of large captives are now using parametric structures in some form. That's five times more than in 2018. As risks grow more complex and the gaps in traditional policies widen, parametric solutions offer captives a chance to step up—not just as insurers, but as partners in resilience.

Beyond Automation

GEN AI VALUE IN UNDERWRITING

Underwriting is rooted in analysis and logic, but shaped by uncertainty, judgment and nuance. This is especially true in insurance and reinsurance where no two risks are exactly alike and no data set is ever complete.

Despite a decade of digital transformation, much of underwriting still relies on manual tasks and fragmented workflows. Influenced by unstructured documents and legacy systems, the underwriting process often feels outdated, error-prone, and sluggish. But Generative AI (GenAI) is changing that balance—not to replace underwriters but to reshape the process around them.

We're seeing this unfold in real time. Insurers are experimenting with GenAI to assist with risk analysis, policy drafting, and data interpretation. Some are farther along than others. A few have embedded GenAI into production workflows. Others are still in pilot mode, testing use cases and trying to understand what's hype and what's real.

But one thing is evident, underwriting is no longer just about looking backward at historical loss ratios. It's about forecasting with sharper tools and making sense of unstructured data including emails, reports, medical notes and handwritten forms.

What Makes GenAI Different

AI and machine learning aren't new to insurance. They've been used in risk scoring, claims prediction, and automating renewals. Most of these tools rely on clean, structured data. However, that's rarely what underwriters typically work with.

Insurance and reinsurance submissions are full of unstructured content: broker notes, engineering reports, financial statements, handwritten endorsements, and legacy systems. Trying to feed this into traditional AI models is like giving a calculator a novel and expecting it to understand the narrative.

GenAI is designed to understand and produce natural language. It has the capability to analyse free-form text, identify key risk attributes, summarise multiple document submissions, and draft policy language in accordance with underwriting rules. In essence, it helps clarify the chaos. When utilised effectively, GenAI not only accelerates tasks but also reduces errors, reveals patterns, and enables underwriters to make better-informed decisions with minimal manual effort. It accomplishes what many traditional systems fail to do: transforming unstructured data into actionable insights.

A McKinsey study estimates that GenAI could deliver $50 to $70 billion annually in productivity gains across the global insurance industry. The bulk of this value is expected to come from two core areas: underwriting and claims.

In underwriting, GenAI can reduce time spent on manual data entry, streamline risk evaluation, and improve the accuracy of decisions by making better use of unstructured information. On the claims side, it can automate documentation, accelerate processing, and enhance fraud detection. These changes represent not merely incremental advancements; they indicate a profound transformation in the way insurers handle time, talent, and data on a large scale.

QBE, a global insurer, began rolling out its first generative AI solution in December 2023, starting with a Cyber Underwriting AI Assistant for its North American operations. The tool was designed to help cyber underwriters process broker submissions faster and more efficiently.

Early results have been promising. The company reports a 65% reduction in the time it takes to review submissions, marking a significant gain in productivity. QBE is now scaling the technology across other parts of its business, seeing GenAI not as a one-off experiment, but as a core capability for the future of underwriting.

Where GenAI Adds Real Value

When thoughtfully integrated, GenAI does more than automate individual tasks. It reshapes the entire flow of underwriting—from the first touchpoint to portfolio-level decisions.

At the intake stage, GenAI can read, extract, and classify information from a wide range of formats including emails, PDFs, and scanned documents. What used to take hours of manual review can now be completed in minutes. This shift frees up underwriters to focus on judgment calls rather than administrative cleanup.

In risk evaluation, GenAI tools can reveal valuable insights from historical claims, third-party databases, and narrative risk descriptions. This capability goes beyond merely speeding up processing; it aids underwriters in recognising patterns, identifying gaps, and uncovering exposures that they might otherwise overlook.

Drafting policy documents is another area that are seeing impact. Generative tools can create initial versions of policy wordings or coverage endorsements, dramatically reducing the time spent revising language with legal or compliance teams. While the outcome isn't a final product, it certainly paves a much quicker path toward one.

At the portfolio level, GenAI adds a layer of intelligence that can analyse entire books of business. It can flag emerging risks, highlight unusual concentrations, and even support reinsurance strategy by surfacing patterns across multiple markets or geographies.

The potential is clear and investment interest is growing. In a 2024 Accenture survey, 78% of insurance executives said they plan to invest in GenAI for underwriting within the next 12 months. However, only 22% believe their current data architecture is ready to support it. That disconnect between aspiration and infrastructure is where the real challenge lies.

What You Need to Get It Right

While the technology is indeed powerful, GenAI cannot remedy existing issues if the surrounding systems remain unchanged. To achieve meaningful results, it is essential for the infrastructure, governance, and culture to progress in tandem with the tools.

And this starts with data. Underwriters need fast, reliable access to clean and connected information. If pricing models live in one system, claims data in another, and past submissions are buried in someone's inbox; GenAI becomes just another disconnected tool. Creating a central underwriting workbench—ideally cloud-based and easily searchable—isn't just helpful; it's foundational.

In risk evaluation, GenAI tools can surface relevant insights from historical claims, third-party databases, and narrative risk descriptions.

Infrastructure alone isn't enough. Model governance matters just as much. While GenAI is a powerful tool, it doesn't guarantee accuracy. It can produce polished, convincing output that turns out to be wrong. Without clear oversight, that becomes a serious risk. A human-in-the-loop review shouldn't be an afterthought; rather, it should be designed into the workflow. This entails monitoring model behaviour, explaining outputs when needed, and tracking changes over time.

Then there's the human side of adoption. Even the most sophisticated tool won't work if underwriters don't trust it. That trust has to be earned. Begin by involving underwriters in the process from the outset. Allow them to test the outputs, question assumptions, and assist in refining the model. When they can see their input reflected in how the tool behaves, they're far more likely to utilise it.

Finally, resist the urge to do everything at once. Begin with small steps and focus on high-volume, low-risk tasks like document processing or submission triage. These areas can show early results and help build confidence across the organisation. Once the foundation is solid, you can move into more complex applications like pricing support, language generation, and even portfolio analytics.

End-to-end transformation won't happen overnight, but GenAI doesn't need to be fully embedded to start delivering value. The key is knowing where to begin and being thoughtful about where to go next.

The Real Shift

GenAI isn't about replacing underwriters. It's about building a partnership and one where human experience works alongside machine intelligence to make better decisions, faster.

Underwriting will always require judgment. What GenAI offers is the ability to ground that judgment in fuller, more timely information. It transforms disparate inputs into actionable insights, enabling underwriters to transition from reactive decision-making to a more proactive and strategic approach.

When done right, GenAI doesn't just make underwriting faster, it changes how underwriting operates, how it sees risk, and how it adapts over time. The real value isn't just in efficiency but in the shift from fragmented effort to integrated intelligence.

FACING RISK HEAD-ON

ADAPTING TO AN UNCERTAIN WORLD

Uncertainty often arrives unannounced. It creeps in quietly, usually when you're preoccupied with other matters, and then it begins to escalate. Before you realise it, you're compelled to make decisions on the go. This is the reality that many businesses face today.

Global disruptions and regulatory changes demonstrate how swiftly risk profiles can shift. They serve as a reminder that merely reacting is insufficient; businesses must remain prepared at all times. Yet, this can be difficult in an environment marked by constant, unpredictable changes that frequently lie beyond our control.

For insurers, it's crucial to remain aware of the fundamental forces that influence risk. This entails looking beyond the headlines to understand the underlying factors, including human behaviour and the impact of technology on decision-making. Three significant elements currently at the forefront are: social inflation, AI, and the evolving relationships between customers, brokers, and carriers. Each poses its own set of challenges. The way insurers address these issues will not only dictate their performance but also shape their ability to assist others in managing risk.

Social inflation Is Real And Growing

The phrase "social inflation" is not just a jargon, but it describes a real, measurable trend that's straining the foundation of liability insurance. This includes broader views on negligence, increased litigation funding, and shifting public sentiment around accountability. Courts are now imposing higher damages, often with a punitive element. And claims that would have settled quietly a decade ago are now escalating further and faster.

However, social inflation goes beyond merely larger claims. It represents a fundamental change in how liability is perceived by courts, the public, and the legal system itself. In recent years, we are seeing broader interpretations of negligence, rising legal costs and more third-party litigation funding. There is also a growing willingness to challenge corporate defendants, especially in high-profile cases.

These narratives are not exclusive to the US or Europe. Countries across Asia are beginning to face similar pressures. While the pace and scale vary—depending on local legal frameworks, public sentiment, and judicial culture—the overall trend appears to be strikingly similar.

Take jury awards. Most Asian jurisdictions don't follow the jury system in the same way, but court decisions are still showing signs of increasing severity. Judges are granting larger settlements, and in some cases introducing a punitive element that didn't exist before. Class actions are gaining ground, too.

In South Korea, for example, investors and consumers filed a high-profile class action against Volkswagen over the emissions scandal, citing misleading information. In the case of local consumers, the court ruled that Audi Volkswagen Korea must pay 1 million won to each plaintiff for mental distress. However, it dismissed the claims related to property damage and alleged fraud tied to the emissions rigging and misleading advertising.

The 2020 Robodebt class action, involving unlawful debt collection by the Australian government, resulted in a $1.2 billion settlement. Today, this has become a case study in how litigation can shape public policy and reshaped insurers' understanding of systemic risk.

Elsewhere, Singapore and Thailand are beginning to lay legal groundwork for class action mechanisms. Thailand's Civil Code Procedure was amended in 2015 to permit class actions in certain areas, including consumer protection, environment, and securities law. In 2024, the Southern Bangkok Civil Court granted permission for a class action lawsuit to proceed against Stark Corporation Pcl. This undoubtedly marked a significant step in the country's evolving legal landscape around corporate accountability.

In South Korea, for example, investors and consumers filed a high-profile class action against Volkswagen over the emissions scandal, citing misleading information.

Social inflation has intensified as public attitudes shift on corporate responsibility and social justice. This trend carries significant implications for insurers. Shifts in public sentiment and legal culture can't be easily captured in spreadsheets. That's part of the challenge. What was once a routine claims process can now escalate unexpectedly, driven by evolving expectations, sudden media attention, or the unpredictable momentum of a high-profile case.

AI Is Powerful But Not Infallible

Until recently, the use of AI in insurance was mostly confined to narrow applications such as fraud detection, pricing segmentation, and basic claims triage. These tools served a purpose, but their impact was modest. They offered efficiency, not transformation.

That's changing. With the rise of large language models, generative AI, and more advanced predictive analytics, insurers are moving beyond limited use cases. Underwriting for small commercial risks is being automated at scale. Natural language processing is being used to extract patterns and insights from years of unstructured claims notes, legal documents, and call centre transcripts.

Chatbots, once clunky and inconsistent, are improving in sophistication and are now being used to manage full customer interactions, from policy queries to first notice of loss. Image recognition, on the other hand, is enabling faster and more accurate property inspections, cutting down manual effort and reducing turnaround times.

McKinsey's report on GenAI in insurance put the potential impact in clear terms: across functions, GenAI could deliver up to $300 billion in annual value to the insurance industry globally. That's not just cost savings. It includes revenue growth from faster product development, smarter risk selection, and better customer retention. The biggest gains are expected in underwriting, claims, and customer service. Insurers that have utilised these tools are seeing early signs of better decisions and smoother operations.

While the advantages are significant, they are accompanied by risks that extend beyond technical issues. A model that denies a legitimate claim because of flawed training data can do more than frustrate a customer. It can trigger regulatory scrutiny, erode trust, and tarnish a company’s reputation. Bias in underwriting, even if unintended, can open the door to legal and ethical challenges.

So there is a delicate balance to maintain. The benefits are evident, but the responsibilities are equally significant. This is where human judgment remains essential. Not every insight a model produces is actionable and every correlation is worth acting on. We still need people who can interpret, question, and challenge what the machine suggests. Hence, AI should enhance decision-making, not remove the decision-maker.

Strong governance matters too. The quality of AI outputs depends heavily on the quality of the inputs. This emphasises the importance of making data integrity a fundamental aspect of operations, rather than just addressing it when issues arise. It’s crucial to maintain transparency with regulators, customers, and one another regarding decision-making processes and the role of algorithms.

Collaboration Is A Necessity

The relationship between customers, brokers, and carriers is evolving. What was once a relatively linear transaction has become a far more nuanced and collaborative exchange. This shift isn’t just about process but reflects deeper changes in how risk is perceived, how coverage is valued, and how trust is built.

Customers today are more informed and demanding. They expect their insurance partners to understand the specifics of their operations and not just provide off-the-shelf solutions. They want clarity on what’s covered and what’s not, especially in areas like cyber, D&O, and environmental risk where the fine print matters. Additionally, they value prompt responses to their inquiries and transparency in the decision-making process.

This has pushed brokers into a more strategic role. Many are now acting as true risk advisors, helping clients navigate increasingly complex coverage landscapes. Brokers are translating policy language into business impact, comparing carrier appetites, and advocating for more bespoke wordings. Their proximity to the client gives them a unique vantage point, and with it, greater responsibility.

Carriers are also stepping into a new role. One that demands more than technical underwriting or back-end processing. They are now expected to be active participants—listening, explaining, and engaging with clients and brokers much earlier in the process.

Beyond mere transactional interactions, the role of carriers extends far beyond quoting and binding; it involves actively participating in the development of solutions from the outset. As clients become more inquisitive and brokers seek clarity, it is essential for carriers to respond with both transparency and accuracy.

Delivering in Uncertain Times

The insurance industry isn't short on challenges. Social inflation is pushing claims costs higher. AI is reshaping how we underwrite, assess risk, and serve customers. Meanwhile, the risks businesses face be it from litigation, cyber threats, or regulatory shifts, are evolving faster than many models can keep up with.

This transformation is not just about modernising operations; it aims to establish an insurance market that is more agile, transparent, and better suited to the risks that businesses encounter today. Clients are seeking more than just transactional relationships or fixed policies. They want risk partners who understand their context, offer insight, and adapt as conditions shift.

The future of insurance depends on the industry's ability to remain anchored in its core purpose while adapting to new risks, technologies, and client expectations. By engaging with complexity rather than avoiding it, insurers can provide greater clarity and support to businesses navigating uncertain environments.