



The intelligence era in P&C

From AI promise to AI advantage

World Report Series 2026
Property and Casualty Insurance

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Partner with Capgemini

Foreword

The conversation around artificial intelligence (AI) among property and casualty (P&C) insurance leaders has evolved. The debate is no longer whether to invest in AI: it's whether insurers can turn it into a durable source of competitive advantage by embedding intelligence across their organizations.

The investment is real, the ambition is genuine, and pilots are running. Early gains have been made, but they remain incremental. What hasn't kept pace is the operating model required to translate AI capability into sustained value.

Transformation in the P&C industry is constrained less by the limits of technology and more by how decisions are made and work is organized. Underwriting and claims rely on expert judgment shaped by regulation, context, and experience. As insurers advance their AI agendas, the challenge is not whether to automate, but how to embed intelligence in a way that reinforces trust, preserves accountability, and elevates decision quality.

Against this backdrop, Capgemini's 19th World Property and Casualty Insurance Report explores the shift from AI efficiency to lasting competitive advantage. It highlights a small group of intelligence trailblazers – roughly 10% of insurers – who are pulling ahead. These organizations outperform peers on revenue growth and share price performance by treating AI as a core operating capability, not just a technology initiative.

Yet, not even trailblazers have fully adopted intelligence at scale. Most AI still operates at the task level. Across the industry, workflows remain built for human execution, and gaps in collaboration, data readiness, and process redesign are fast becoming the defining challenges of the next phase.

Closing these gaps requires clarity about where human judgment creates irreplaceable value and where synthetic execution can be trusted to act across underwriting, claims, distribution, and customer service. It requires discipline to align investment decisions with measurable business outcomes, not just capability inventories. Just as important is engaging employees as active participants in the transformation, at a time when concerns about the future of work are real and consequential.

The insurers getting this right aren't simply deploying more AI. They're rethinking how decisions are made and how work gets done, intentionally building an expert-centric operating model that pairs deep insurance knowledge with a scalable, synthetic workforce. The choices made today will shape competitive positions for years to come.

This report provides the clarity leaders need to act decisively – and the confidence required to bring their people with them.



Kartik Ramakrishnan
CEO Financial Services, Capgemini
Member of the Group Executive Board

Executive Steering Committee

The Executive Steering Committee participants of the World Property and Casualty Insurance Report 2026 include top executives from leading insurance firms, technology leaders, and industry analysts. We're grateful for their time, experience, and vision as they helped guide our report's content.

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Executive summary

The P&C insurance industry has no shortage of AI ambition and investment. While initial progress through pilots showed potential, they haven't yet transformed into enterprise adoption. Across the large group of insurance leaders that we interviewed, 40% said AI meets their expectations, but those expectations were low to begin with. Gains have been small, and there's a growing gap between most insurers continuing to run parallel pilots and the few that are figuring out how to implement AI enterprise-wide. The Capgemini World Property and Casualty Insurance Report 2026 explores how insurers can move from improving efficiency in specific areas, to gaining a significant competitive edge – by redesigning their organizations for the age of intelligence.

Unlocking the next AI value leap: What's really holding back ROI?

The issue runs deeper than unmet expectations: 42% of insurers don't track any AI metrics at all. Without measurement, there are no scalable playbooks, no way to validate what works, and no way to stop what doesn't. As a result, 60% remain stuck in exploration or proof-of-concept (POC) phases.

42%

P&C insurers don't set KPIs to measure AI success

Investment patterns expose the constraint: while 72% of AI spending goes to technology, only 28% is invested in change management initiatives. Technology creates capability. Change management determines whether this capability translates into performance. This imbalance leaves many programs short of the organizational support required to move from pilots to full-scale implementation.

28%

Total AI-related spend is aimed at
change management initiatives

Transformation hits a structural ceiling which we call the "architecture mismatch", driven by fragmentation across business units and functions combined with organizational lack of expertise to drive innovation at scale. This mismatch appears across three dimensions simultaneously:

- Strategically, only a small number of insurers connect AI to driving tangible business results beyond efficiency.
- Technically, legacy systems and data quality slow down progress
- Organizationally, a lack of ownership and Return on Investment (ROI) metrics mean programs rely on individual champions.

The result is clear: employees with access to AI report unchanged workdays even after 18 months, while customer expectations have evolved faster than organizational models can adapt. And these aren't two separate issues: together they represent the same dilemma seen from both internal and external perspectives.

Beyond efficiency: What does it take to turn AI into competitive advantage?

A top-performing group of about 10% of P&C insurers – we call them “intelligence trailblazers” – demonstrate how the industry can move forward. Compared to mainstream insurers, these winning organizations have achieved 21% higher revenue growth and 51% greater share price increases over a three-year period. What sets them apart isn't spending, but strategic clarity: they treat AI as a core operating capability and address strategy and talent, technology, and organizational adoption simultaneously.

That simultaneity creates a compounding advantage. Trailblazers implement comprehensive change management and focus on explainable AI infrastructure that guides teams on when to trust the outputs. They also organize teams around shared outcome Key Performance Indicators (KPIs) rather than letting them operate in functional silos. This approach enables use cases that often fail when departments optimize independently.

However, even trailblazers haven't solved all of the industry's challenges. Most AI still functions at the individual task level, despite significant employee time spent collaborating across teams. Only a small minority of players report high data readiness, limiting effective AI deployment where underwriting and claims decisions depend on unstructured data. Most importantly, AI has been layered on top of existing workflows designed for humans, rather than processes completely redesigned for AI capabilities. These gaps shape the upcoming competitive battleground and set the blueprint for what every insurer should now develop.

The intelligence imperative: How do you redesign the organization for the agentic era?

Closing this gap requires an architecture built around expert human judgment – not human workflows with AI added on top. The longer insurers delay this redesign, the harder it becomes. AI agents can improve at executing defined tasks, but they can't reorient themselves toward new strategic priorities as risk landscapes shift.

Executive summary


Only human experts can make that judgment call, and only if the organization is structured to give them the authority to do so. This is what we describe as the “expert-centric P&C insurer” and they operate through four interconnected building blocks:

- **Leadership** sets the direction and defines human-AI boundaries.
- **Human experts**, like underwriters, claims specialists, and distribution specialists, define outcomes and establish accreditation frameworks that synthetic workforces must meet before they're trusted to act.
- **Synthetic execution** handles high-volume work but escalates when complexity exceeds defined thresholds.
- **Orchestration managers** have capabilities that separate leading organizations from the rest: they translate business strategy into AI principles and govern how intelligence scales across the organization. Without them, synthetic agents remain point solutions; but with them, they become coherent, well-governed systems.

Getting there means optimizing today through strategic decisions on build, buy, and partner options while reimagining the future by using a synthetic workforce to serve previously uneconomical markets. It requires discipline in how capital is deployed: knowing what to commit to early, what to test before scaling, and what to challenge as AI continues to transform the landscape. When firms have that clarity, moving forward requires building leadership conviction, transforming priority value streams, and evolving towards intelligence metrics to track progress.

The shift from a focus on efficiency to the pursuit of competitive advantage is already differentiating a small, leading group of insurers who are building long-term benefits, from the majority of insurers who are optimizing current operations. The gap between these intelligence trailblazer insurers and most other organizations isn't just a technology problem. It's about organizational redesign decisions yet to be made.





1 Unlocking the next AI value leap: What's really holding back ROI?

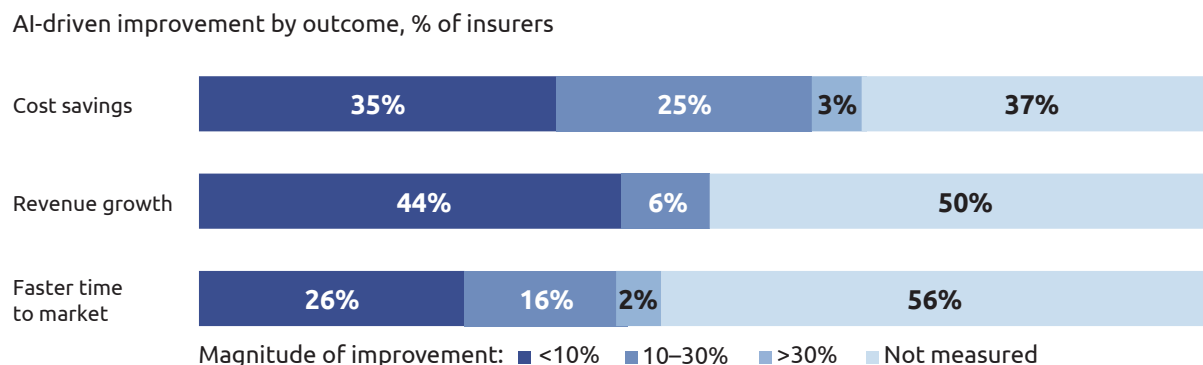
40% of P&C insurance leaders say AI is meeting their expectations and, on the surface, that seems reassuring. But a closer look tells a different story: expectations started low, gains to date have largely been marginal, and many insurers aren't measuring outcomes. Initial progress through pilots showed potential and enabled a first wave of transformation. But if firms keep measuring their progress using early-stage metrics, they'll fall short of what enterprise transformation truly demands now that AI has advanced to become more reliable and scalable.

The impact of this narrow focus is real, but not universal. A small set of P&C insurers have broken the pattern – not by spending more, but by asking a different question. Instead of asking, “How do we use AI to work faster?” they ask, “How do we use AI to advance our business goals?” This shift may sound subtle, but the competitive gap it creates isn't. That widening gap is the focus of this report.

The expectation illusion

The core issue isn't unmet AI expectations, but rather what the results reveal. As figure 1 shows, many insurers report only marginal gains through cost savings, revenue growth, and time to market. A large portion of the industry hasn't measured outcomes at all.

Figure 1:
Most insurers are realizing marginal gains from their AI investments – and many aren't tracking results



Source: Capgemini Research Institute for Financial Services analysis, 2026; World Property and Casualty Insurance Report 2026 Executive Interviews 2026 (N=344)



“The real barrier to AI value in insurance isn't technology, it is the tendency across the industry to stay in experimentation mode. Too many insurers focus on endless pilots, creating noise and fatigue, and teams keep ideating instead of executing. AI becomes meaningful when leaders commit to delivery, design for operational realities early, and move decisively from POCs to scale.”

Edwin Klaps

Managing Director, Broker Channel and Non-Life, AG Insurance

This measurement gap isn't a footnote, it's a structural constraint. 42% of insurers aren't tracking AI metrics. Without measurement, they can't validate what works, shut down what doesn't, or build scalable playbooks. Without disciplined tracking, AI programs remain stuck in pilot mode rather than delivering outcomes at scale. As a result, 60% of carriers remain in the exploration or proof of concept (POC) stage, concentrated in customer service, underwriting, and agent and advisor support.

These dynamics fuel a self-reinforcing cycle: limited strategic ambition produces modest outcomes, those outcomes validate the limited ambition, and the cycle accelerates AI fatigue and a growing credibility problem – one that no amount of additional technology investment can solve on its own.

Investing in technology, not transformation, limits achievable success

Insurers' spending patterns make the challenge clear. On average, 72% of AI investments go toward technology and infrastructure, and only 28% to change management. That imbalance leaves many programs short of the organizational support required to move from pilots to full-scale implementation.

While technology creates capability, it's change management that determines whether that capability becomes true performance. Without redesigning how people work, make decisions, and are rewarded, even the most advanced AI systems won't move the needle of business results.

Where insurers allocate their change management funding also highlights the real opportunity. Most insurers – 86% according to our research – have focused on foundational training to build baseline AI literacy across employees and leaders. Yet, the areas with the highest potential to unlock enterprise-level value remain underleveraged:

- Governance and risk management frameworks – 52%
- Advanced AI skills development – 46%
- Incentive and workflow redesign – 27%

The emerging pattern here is a familiar one across complex enterprises: transformative technology advances faster than the organizational foundations built to absorb it. The result is predictable. Transformation hits a structural ceiling.



“The greatest barrier to AI adoption is that it is still viewed as an efficiency driver rather than a strategic capability. AI must be a core element of corporate strategy, not a standalone innovation topic. The long-term value lies in customer experience, risk selection, pricing accuracy, fraud detection, and claims excellence. Achieving this demands moving from AI that 'responds' to AI that 'acts and orchestrates'.”

Eric Féron

Deputy CEO and Chief Transformation Officer,
Crédit Agricole Assurances

Across the industry, the architecture mismatch is real

We call the structural ceiling described above “the architecture mismatch”. The mismatch shows up, consistently, across the three interconnected dimensions shown in figure 2: strategy and talent gaps, technical constraints, and organizational barriers.

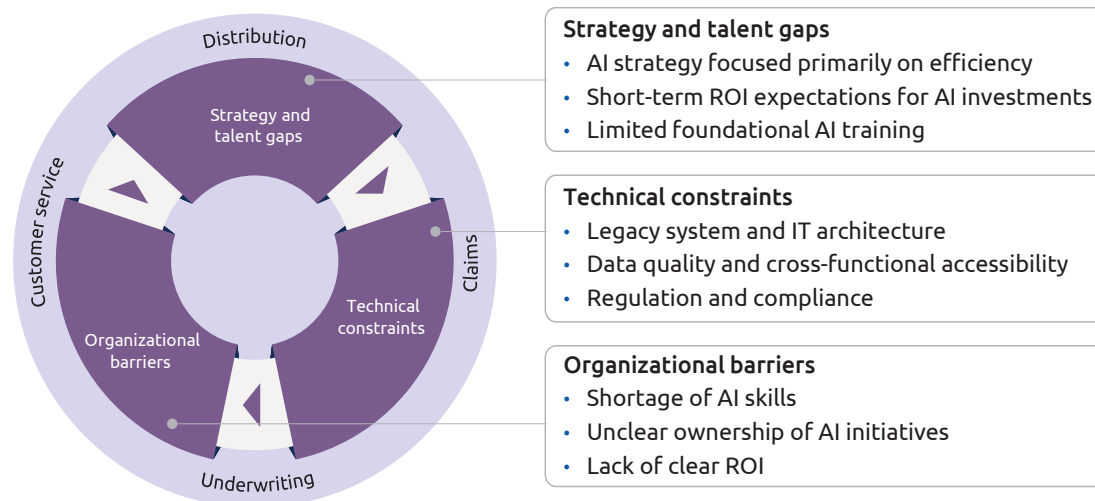
Strategy and talent gaps

AI strategies that mainly focus on efficiency create natural pressure for near-term returns. According to our analysis of the top 20 P&C insurers, ranked by gross written premiums earned (S&P Global, 2025), only 35% explicitly link their AI strategy to business outcomes beyond efficiency.¹ This framing also creates time pressure. Nearly half (47%) of AI decision-makers across financial services report that their organizations require a positive return on AI investment

35%

Top global P&C insurers explicitly linking AI strategy to business outcomes beyond efficiency

Figure 2:
Barriers to AI-driven transformation are compounded across interconnected insurance workflows



Source: Capgemini Research Institute for Financial Services analysis, 2026



“A major challenge in scaling AI is training models with enough high-quality data. For example, call-center recordings often contain inaccurate human responses, creating risks for how AI learns. Disciplined data curation is non-negotiable: the quality of early deployments depends entirely on the quality of the training data, and poor choices compound over time.”

Ney Ferraz Dias

Chief Executive Officer,
Bradseg Participações S.A.

within a year, creating tension between short-horizon pilots and the longer horizon capability building that enterprise-scale AI ultimately requires.²

At the same time, 85% of employees report limited foundational AI training, even as 87% use publicly available Gen AI tools. The opportunity for insurers is to harness employee enthusiasm within frameworks that ensure consistency, quality, and appropriate governance.

In 2025, MAPFRE, a global insurer with a strong presence in Spain and Latin America, responded to these challenges by putting in place a structured framework to standardize and scale AI responsibly. The firm publicly defined its principles for the development and use of AI by publishing the *‘Manifesto for a Humanistic, Ethical, and Responsible AI,’* as well as establishing a global AI center to coordinate strategy, governance, and innovation. MAPFRE reported deploying 115 AI use cases globally, with virtual assistants handling 40% of operations and more than 1.2 million customers benefiting from automated document processing.³

Technical constraints

In addition, technical realities often slow execution. In our research, insurers cited three dominant technical barriers to scaling AI:

- 81%: Legacy systems and IT architecture constraints
- 74%: Data quality and cross-functional accessibility
- 61%: Regulatory and compliance constraints

The practical path forward is to improve adaptability: make data accessible across functions and enable AI capabilities to operate on top of existing systems rather than rebuilding entire systems from scratch.

Organizational barriers

Organizational blockers complete the picture. 67% of the insurers we surveyed identified a shortage of AI skills as a key barrier. Close behind, 55% of insurers pointed to unclear ownership of AI initiatives, signaling continued uncertainty about accountability structures. And a further 55% highlighted the absence of a clear ROI. As a consequence, programs depend on individual champions. No matter how talented they are, those individuals can’t substitute for institutional capability at scale.

Sully McConnell, Head of Insurance at Snowflake said, *“Another key challenge for insurers is the AI skills gap, which extends beyond technical specialists to leaders and employees at all levels of the organization. Successfully scaling AI depends on how well people understand, trust, and work with these systems in day-to-day business processes, making broad-based education and capability building a critical priority.”*



“The true differentiator is not technology itself but the strong data foundations, organizational culture, and process design that enable rapid adoption. Organizations that build these foundations and execute change consistently across both technology and business will be best positioned to shape competitive outcomes.”

Ollie Holden

Chief Information Officer, SVP,
Intact Insurance

The distance between investment and impact shows up in the numbers:

- Across the insurance industry, 62% of AI decision-makers believe Gen AI tools will always produce the same outputs if they're given the same prompt – a fundamental misunderstanding that shapes adoption and risk decisions across the organization.
- 47% of employees with access to AI tools report that their workday remains unchanged even after 18 months.

Investment continues to flow, and teams are actively running pilots, yet organizations still struggle to convert that activity into sustained changes in how work gets done. This challenge has a direct consequence as customer expectations continue to evolve.

Customer expectations are accelerating faster than insurers can adapt


Across all industries, 73% of today's consumers expect better personalization as technology advances.⁴ Insurance policyholders reflect this broader trend, wanting proactive capabilities like usage-based pricing (cited by 46% of our respondents), personalized advice (38%), and risk prevention alerts (21%). 51% of these customers say they're very comfortable with insurers using AI to provide proactive services.

Insurers investments are already there. Yet 86% of policyholders still describe their relationship with insurers as reactive and transactional. This isn't because insurers haven't taken any action, but because expectations are rising faster than ways of working can evolve. This competitive pressure makes it an urgent priority to resolve the structural gaps discussed earlier.

The opportunity is to move from AI for efficiency to AI for competitive advantage. Efficiency optimizes the present but it's intelligence that will build the future. A small group of insurers is already making the shift, and that's where we turn next in our report.

51%

Customers are very comfortable with insurers using AI to provide proactive services



Global multi-line insurer deploys a scalable AI solution to deliver fast, accurate, and seamless customer experiences

Business challenge: A global insurer's travel business line struggled with high operational costs and limited scalability due to heavy reliance on human customer service agents. Traditional Gen AI use case approach would require each country to look at initiating separate project efforts, slowing time to market and preventing true global scale across the line of business.

Strategy: As part of its 2024–2026 strategic action plan, the insurer embedded AI and data-driven innovation at the core of its transformation agenda. Partnering with Capgemini, it co-created a modular Retrieval-Augmented Generation (RAG) solution – an AI approach that combines document retrieval with generative models connected to backend and trust systems, to reduce manual intervention and enhance agent effectiveness through accurate, real-time policy insights. The solution was delivered as both a customer-facing chatbot that enables self-service, and an intelligent agent assistant that provides real-time access to travel policy information. It was designed for global scalability, security, and seamless integration with the insurer's core

systems. Powered by advanced multimodal Gen AI models, the solution can interpret text, images, charts, and tables from complex documents to provide precise, context-aware answers. To ensure smooth adoption, the insurer introduced KPI dashboards for continuous performance monitoring, and created tailored playbooks for both technical and business users.

Results: The initiative was deployed across multiple countries within 3 months of MVP#1 release across the travel business line, demonstrating adaptability and scale. It created a strong competitive edge by automating a high percentage of queries through chatbots across customer- and agent-facing channels, significantly reducing costs while equipping customer service agents with intelligent insights to strengthen relationships and improve customer experience. The solution consistently delivers 85%+ accuracy, ensuring fast and reliable interactions. Its modular, ready-to-use architecture positions it as a scalable asset that can be replicated across other business lines.



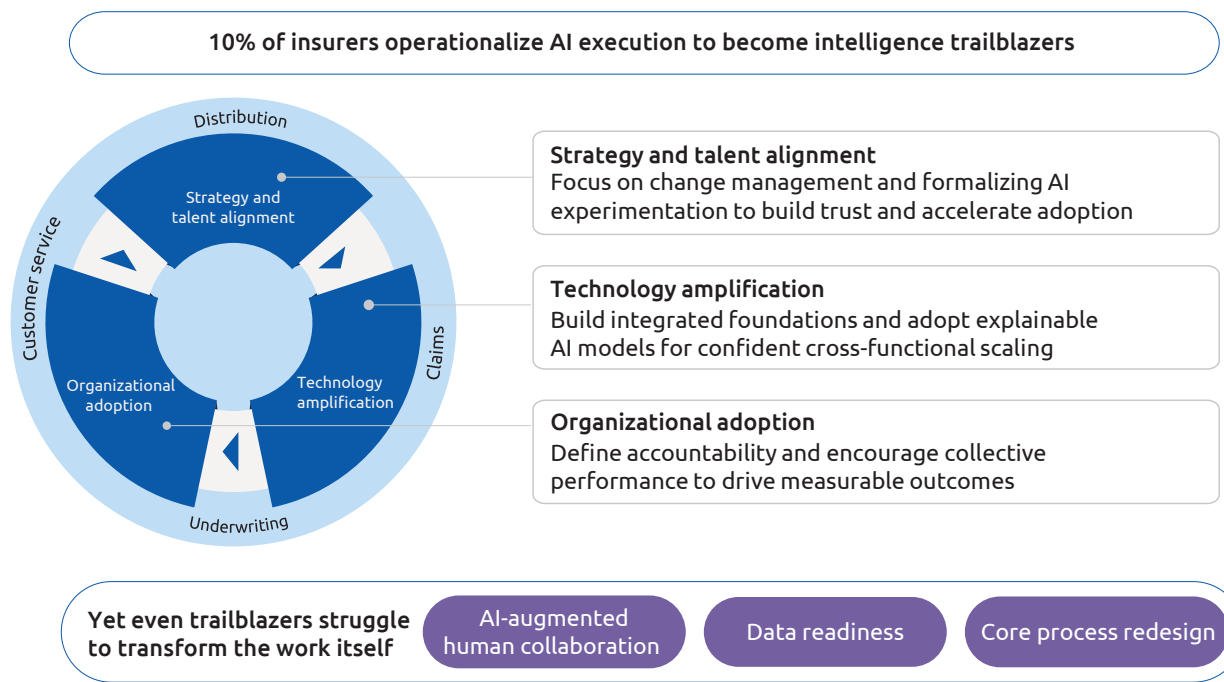
2 Beyond efficiency: What does it take to turn AI into competitive advantage?

The gap between efficiency and intelligence is already measurable. Most insurers have adopted AI, run pilot programs and gained some efficiency. A few have taken a different approach. They see AI as a core operating capability rather than a set of tools, and address strategy and talent, technology, and organizational adoption not in sequence but in concert. The result? Turning isolated wins into a growing, organization-wide advantage.

We define this group of P&C insurers as “intelligence trailblazers”: the 10% of insurers that have advanced AI beyond pilots to scalable production systems, with AI investments linked to business outcomes and capabilities designed to compound across the organization.

Compared with mainstream insurers, they’ve demonstrated 21% higher revenue growth and a 51% greater increase in share price over several years.* These results represent the financial signature of a strategic decision: create the organizational environment necessary for AI to scale enterprise-wide, rather than managing a portfolio of pilots. Figure 3 showcases the capabilities of these trailblazers.

Figure 3:
Three capabilities that set intelligence trailblazers apart



Source: Capgemini Research Institute for Financial Services analysis, 2026

*Share price and revenue growth are measured across 2021–2024, capturing the full period of AI investments, including traditional AI/ML (predictive models, rule-based systems, and statistical algorithms), and foundational investments leveraged for subsequent Gen AI and agentic AI adoption.

Business growth outcomes for trailblazers

+ 21%

Organizational revenue growth

+ 51%

Share price increase

But even trailblazers haven't solved everything yet. Three areas remain works in progress for even the most advanced insurers: AI-enabled collaboration, unstructured data readiness, and core process redesign. These aren't minor gaps. They comprise the next frontier where further competitive separation is likely.

Global insurer transforms claims with agentic AI, driving toward 8-figure annual profit impact and 95% automation

Business challenge: A global insurer was struggling with manual claims handling, characterized by fragmented processes across regions, departments, and subsidiaries. This variability increased processing time, created dependency on human effort, and limited opportunities to scale efficiently. Inconsistent workflows also compromised accuracy and hindered customer outcomes across markets.

Strategy: The carrier set a strategic goal to boost automation and reduce employee effort through higher Straight-Through Processing (STP) enabled by an intelligent, globally standardized claims model. The insurer, in partnership with a technology solution provider and Capgemini, embarked on a joint delivery to introduce agentic automation across five business lines, deploying more than 12 AI agents in 12 countries. The transformation focused on creating a unified foundation, by standardizing workflows and implementing decision rules and approval structures across entities, to reduce fragmentation and support

scalability. At the core of the solution was a privacy-centric AI platform paired with a centralized control hub, to orchestrate intelligent workflows with minimal human-in-the-loop involvement. The updated AI-enabled claims model replaced isolated, manual processes with a unified approach that can scale across countries.

Results: Already demonstrating strong momentum, the program is driving toward an 8-figure annual profit impact, a 95% STP rate and 100% accuracy in claims validation and decision making across deployed markets. Processing time and manual effort dropped significantly. Standardized workflows and harmonized approval structures proved critical to rapidly and consistently scaling the solution across the business lines and markets. The integration of agentic automation signals a move from incremental improvements to enterprise-wide AI adoption, unlocking scalability, consistency, and competitive advantage in a fast-evolving insurance landscape.



"Misalignment occurs when AI initiatives are led by IT without sufficient business context. At the same time, productivity-based metrics often fail to reflect real business constraints and opportunity costs. Embedding AI expertise within business units helps break silos, ensuring accountability rests with the business and that KPIs reflect real opportunities and value."

Eric Merville
Claims Director,
Generali



“As AI takes over entry-level tasks, insurers must rethink how new talent learns the business fundamentals. Simulation-based training similar to aviation or financial trading, will help employees learn faster, supervise AI effectively, and make higher-level judgment calls using AI-generated insights.”

Chaz Perera

Chief Executive Officer,
Roots AI

Trailblazers start differently

For intelligent trailblazers, business strategy drives AI. They embed AI into business strategy from day one, with the C-suite treating it as a business goals accelerator rather than as a technology initiative. The business defines use cases linked to strategic outcomes, while IT enables execution by building the platforms, data infrastructure, and delivery capabilities. This shifts the organization’s focus from scattered experiments – where adoption is sporadic, results focus on efficiency, and tech debt grows – to true enterprise transformation, where AI is systematically embedded, adoption is intentional, and outcomes are tied to strategic priorities that scale across the organization.

Trailblazers implement AI across the three pillars simultaneously

Trailblazers focus on three areas simultaneously: strategy and talent alignment, technology amplification, and organizational adoption. Tackling just one area rarely leads to growth, while addressing all three builds momentum and creates an operating flywheel.

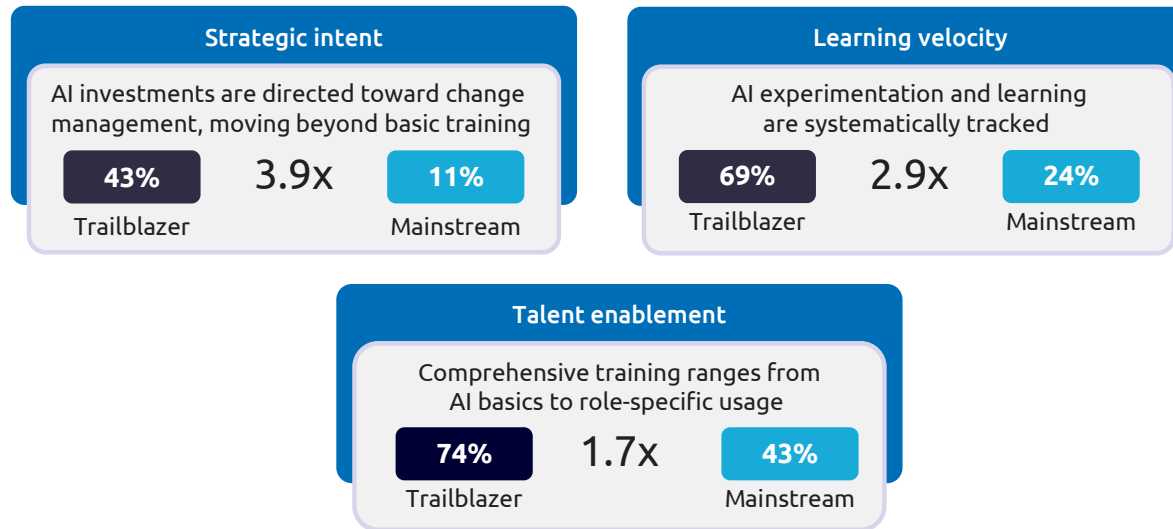
Strategy and talent alignment: Building foundations for long-term AI value delivery

Trailblazers recognize that treating AI as a business accelerator is more than a shift in mindset. It demands a deliberate strategy to support it. Where most insurers approach AI as a short-term project, trailblazers plan for the long term, investing in their people with the same rigor they apply to their technology. That strategic commitment shows up in practice and delivers results.

Trailblazers begin with change management, as figure 4 shows:

- Trailblazers go far beyond basic training, focusing on factors that genuinely alter behavior and build organization-wide trust in AI.
- They also treat learning as something that should be intentionally designed rather than left to chance. By systematically tracking AI experimentation, they turn individual discoveries into shared institutional knowledge.
- Finally, they take role readiness seriously by providing training that covers everything from AI basics to its application in specific jobs, helping employees see AI as part of their work rather than something separate.

Figure 4:
Trailblazers align their strategy and talent to deliver long-term AI value



Source: Capgemini Research Institute for Financial Services analysis, 2026; World Property and Casualty Insurance Report 2026 Executive Interviews 2026 (N=344)

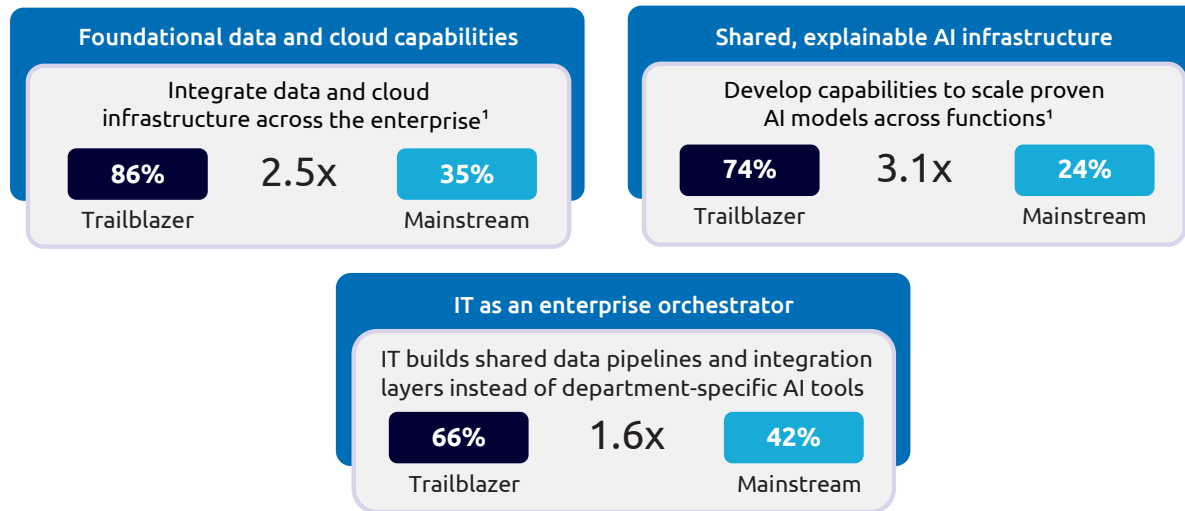
Liberty Mutual's scaling of responsible AI adoption across its workforce illustrates these approaches. The insurer embedded data-driven decision making into daily operations – and it drives AI through a structured Digital Progression Framework that empowers employees to learn, experiment, and responsibly apply AI. It reported that the approach saves an average of 13,500 hours each week, letting teams reinvest that time into improved service and better customer outcomes.⁵

Technology amplification: From isolated AI tools to reusable, trusted intelligence

Most insurers have the tools, but what trailblazers also possess is the foundation to build on those tools. This advantage wasn't built overnight: it reflects years of investment in cloud architecture, data integration, and enterprise IT infrastructure that are now paying off in the ability to deploy new use cases faster, more reliably, and at greater scale.

The biggest differentiator is explainable AI infrastructure. As shown in figure 5, trailblazers develop capabilities that tell teams when to trust AI and when to question it, building enterprise-wide confidence through consistent validation and transparency standards. That trust is what enables AI to scale beyond isolated pilots. These leaders also operate on a cloud infrastructure that lets AI run alongside legacy systems, avoiding costly core replacements, and elevates

Figure 5: Trailblazers move from isolated technology tools to reusable, trusted intelligence



Source: Capgemini Research Institute for Financial Services analysis, 2026; World Property and Casualty Insurance Report 2026 Executive Interviews 2026 (N=344)

Note: 1. Possess at least moderate capabilities on a scale of basic, moderate, advanced



“Technology infrastructure needs to move beyond standalone AI tools and become integrated into how the organization operates. Rather than remaining a horizontal support function, IT must align technology, data, and platforms to business value streams. This shift allows insurers to scale AI while managing flexibility and technology risk, including concerns around platform lock-in.”

Ronak Doshi

Partner, Everest Group



“Organizations should start by establishing a centralized governance model or an AI center of excellence to give teams clear guidance and a reliable anchor. Paired with AI education, early visible wins build confidence and momentum, helping teams shift from short-term efficiency to long-term value.”

Prashant Nema

Chief Information Officer,
Arch Insurance

IT into an enterprise orchestrator that builds shared data pipelines instead of siloed tools. Yet these advantages are time-sensitive: AI technology is advancing rapidly, and insurers that move now can close these gaps before they harden into unassailable competitive moats.

A good example of this foundational work can be seen in Zurich’s efforts to leverage its data and cloud architecture to accelerate digital transformation. The insurer expanded its digital distribution by unifying previously fragmented sales, servicing, and claims experiences across markets. They built Edge Assist, an omnichannel platform that integrates these journeys and delivers AI-driven product recommendations. Built on a 100% cloud-native architecture with open APIs, the platform enables seamless integration, multi-market scalability, and faster time to market.⁶

Organizational adoption: Transforming capability into measurable outcomes

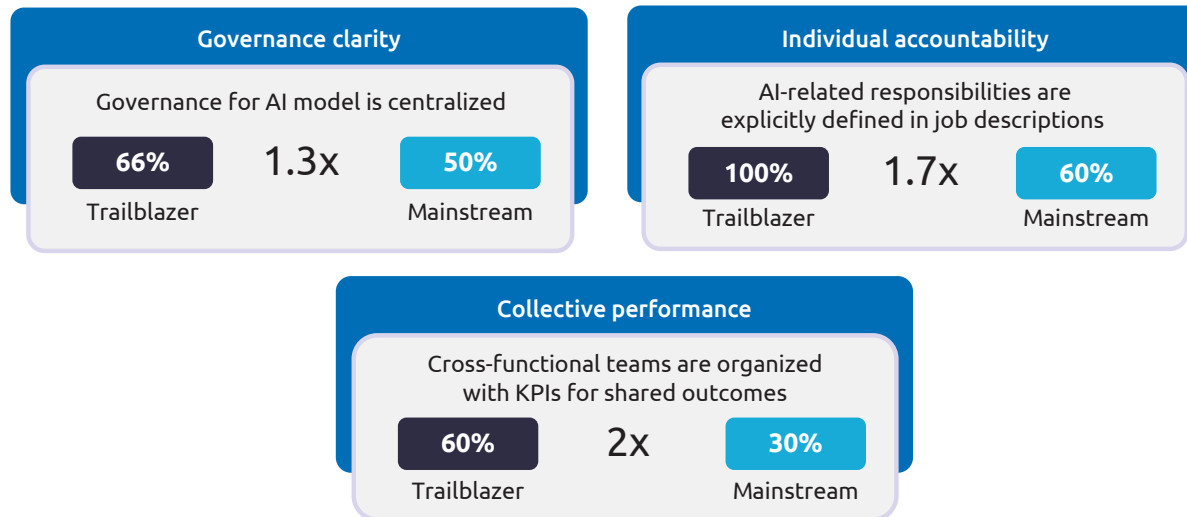
Technology doesn’t create an advantage if adoption remains optional. Trailblazers understand that the organizational conditions around AI matter as much as the technology itself, and they build those conditions deliberately across governance, accountability, and collective performance.

Look at the differences between trailblazers and mainstream insurers across three key dimensions in figure 6:

- Trailblazers focus on establishing a clear, centralized AI governance model, ensuring standards for validation, deployment, and compliance are consistent across lines of business rather than reinvented by each function.
- They’re also more likely to have AI responsibilities explicitly listed in job descriptions, shifting AI from something employees can choose to do, to something integrated into role expectations.
- The most difficult, impactful step is organizing cross-functional teams around shared outcome KPIs. Trailblazers focus squarely on this, enabling AI use cases that can’t succeed when teams are evaluated in silos.

Governance creates the conditions. Accountability creates ownership. Shared outcomes create the incentive to change how work get done.

Figure 6:
Trailblazers realize ROI through organizational transformation that bolsters AI adoption



Source: Capgemini Research Institute for Financial Services analysis, 2026; World Property and Casualty Insurance Report 2026 Executive Interviews 2026 (N=344)

Note: 1. Possess at least moderate capabilities on a scale of basic, moderate, advanced

The high cost of the architecture mismatch

Strategy and talent, technology, and organizational adoption shape where trailblazers build. But the true test is whether any of it actually changes how work gets done. Across the four core roles in P&C operations – agent, customer service agent, underwriter, and claims adjuster – the pattern remains consistent. AI creates pockets of efficiency, but fragmented systems, manual handoffs, and limited access to tools keep the impact incremental. The architecture mismatch is more than an abstract concept: it’s a daily operational reality, and it’s where the cost of standing still is most obvious.

Agent

Customers expect speed, personalization, and seamless interactions. Agents want to meet these expectations, but the systems make that harder than it should be. Agents struggle to deliver a fast, seamless quote-to-bind experience (47%), meet sales targets (46%), and provide personalized recommendations (46%). The root causes are operational: manual data entry and quotation processes, fragmented systems across carriers and partners, and limited access to customer insights.

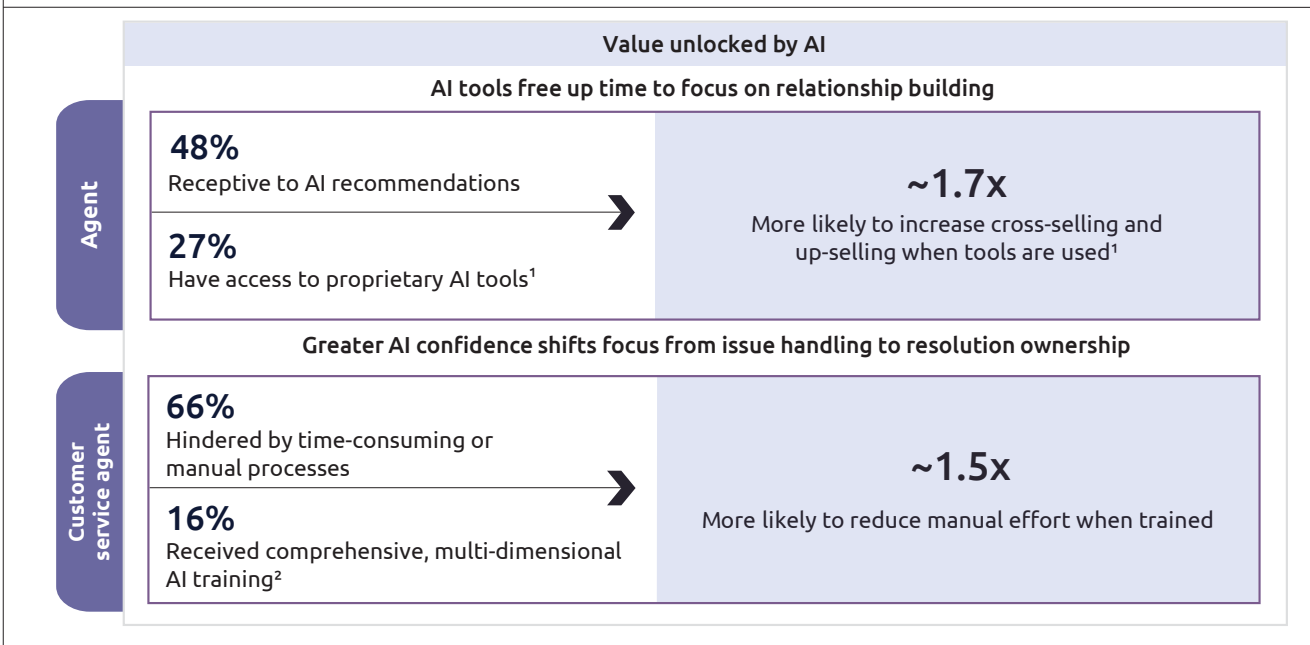
Figure 7 highlights this opportunity. While many agents are receptive to AI recommendations, far fewer have access to the proprietary tools that let them act on those insights. However, closing the access gap alone isn't enough. Even with the right tools, agents still spend much of their time verifying information and navigating systems rather than building relationships. The real opportunity is process transformation: moving AI from a supporting role to being the core engine that manages end-to-end routine quoting and binding, so agents can focus on advisory conversations that boost retention and growth.

Customer service agent

This is the area closest to fully deploying agentic AI. Of the customer service agents we surveyed, 84% said they struggle to reduce call-handling time while maintaining quality, and 48% find it difficult to follow company policies and regulations. Agentic AI is increasingly being used to handle these pressures by managing routine interactions like query resolution, policy information, and simple updates. Human agents are left with the tasks that AI can't manage – complex, emotionally charged, judgment-heavy conversations.

That transition makes the training gap more consequential. Looking again at figure 7, customer service agents who receive comprehensive AI training, and know how to work alongside AI, understanding when to intervene, escalate, and use AI insights in real time, are reducing manual effort, enabling the shift from reactive issue-handling to high-value

Figure 7:
AI creates greater capacity for relationship building, but client service transformation requires advisory redesign



Source: Capgemini Research Institute for Financial Services analysis, 2026; World Property and Casualty Insurance Report 2026 Voice of Employee surveys 2026 (N=809)

Notes: 1. Refers to insurers' internal Gen AI tools, 2. Refers to training across topics like role-specific usage and AI literacy.

advisory interactions. The goal isn't just to automate customer service: it's to shift its focus by letting AI handle transactional tasks, while agents concentrate on interactions that foster loyalty, address complex issues, and safeguard retention.

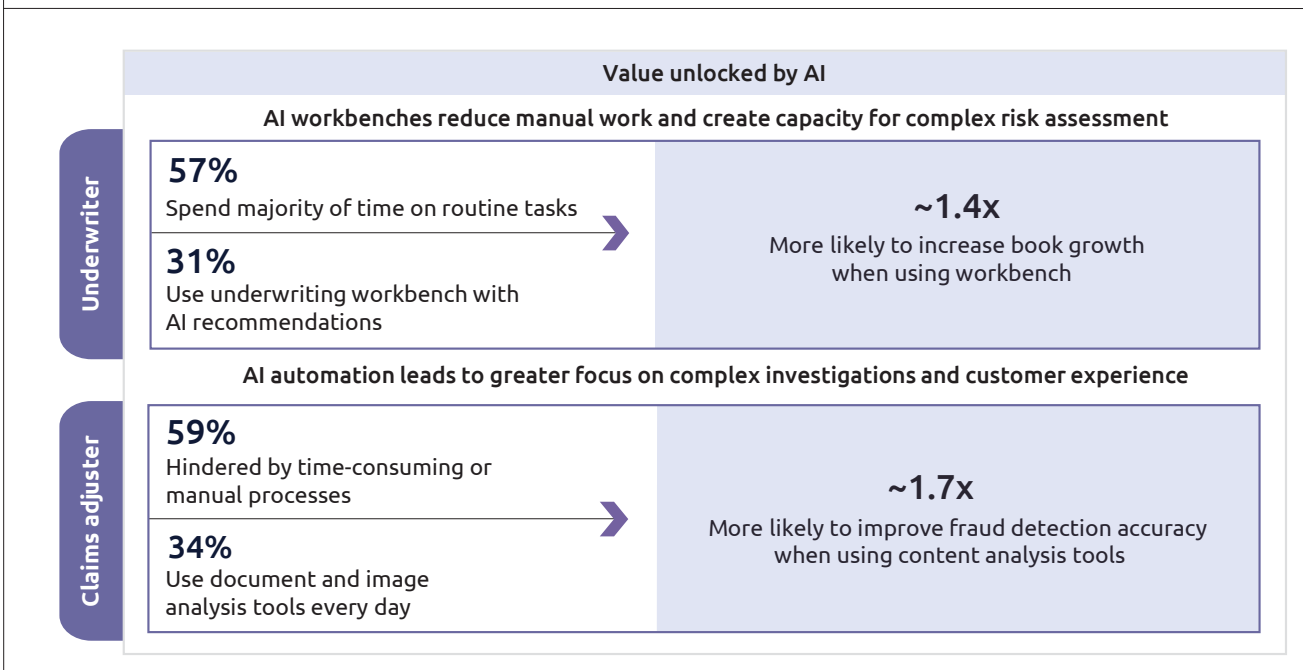
Underwriter

Underwriting is where the capacity trap is most costly. As figure 8 shows, underwriters spend most of their time on routine tasks – data gathering, document review, and basic eligibility checks – that could be automated. This leaves limited capacity for the work that requires real expertise, and the consequences show up in outcomes: 61% struggle to increase quote-to-bind conversion rates, 57% find it difficult to maintain underwriting accuracy and risk quality, and 49% struggle to maintain agent and customer satisfaction.

57%

Underwriters spend most of their time on routine tasks

Figure 8:
AI improves efficiency, but competitive advantage requires decision-making transformation



Source: Capgemini Research Institute for Financial Services analysis, 2026; World Property and Casualty Insurance Report 2026 Voice of Employee surveys 2026 (N=809)

AI-enabled workbenches deliver significant value where deployed, but the barriers are structural: market conditions and competitive pressures, workload and turnaround pressure, and manual processes all combine to keep underwriters anchored in routine work rather than in complex risk assessment.

Today's tools streamline parts of the workflow, but the decision flow itself hasn't been redesigned. Outcomes still depend heavily on individual judgment rather than a consistent, AI-guided framework. Until that changes, AI might help underwriters work faster but it doesn't fundamentally change the quality or consistency of decisions.

Reflecting a broader shift toward AI-assisted underwriting, AG Insurance developed Enterprise Risk 360 to relieve underwriters of routine information-gathering and strengthen the evaluation of large commercial property risks. The AI-enabled assistant automatically synthesizes information from internal systems, inspection reports, public databases, media sources, and company disclosures into a unified view, letting underwriters focus on judgment rather than data collection. The result is faster quote generation, more informed risk assessments, and stronger risk selection. On average, the tool delivers time savings of 40–60% per file, freeing underwriters to respond more quickly to submissions, generate more quotes, and support portfolio growth. Additionally, a built-in feedback loop captures how underwriters use the tool, so the AI could refine its insights over time.

Claims adjuster

Claims has access to more AI-ready data than most other functions in P&C insurance including structured loss records, images, documents, correspondence, and fraud patterns accumulated over decades. However, the core claims decision-making process remains mostly unchanged: coverage determination, liability assessment, and settlement still rely heavily on individual adjuster judgment, applied inconsistently across teams, regions, and complexity levels.

The operational pressure is real. 64% of adjusters struggle to meet turnaround targets due to high volume, 48% to maintain customer satisfaction, and 46% to reduce adjustment costs. But high volume is a symptom, not the diagnosis. The deeper problem is that AI has been deployed only at the edges of the claims process, around document processing, image analysis, and fraud detection, without touching the decisions that drive loss ratios.

64%

Claims adjusters struggling to meet turnaround times due to high volumes



Taking another look at figure 8: where content analysis tools are used daily, they significantly improve fraud detection accuracy. The result highlights what's possible when AI is integrated into the decision-making process rather than used alongside it. The opportunity is to redesign the claims process around what AI can now manage: STP for simple claims, standardized validation, and escalation flows that give adjusters the right information at the right time for cases that truly need human judgment.

Where AI is applied accurately, the results are already evident. A US-based P&C carrier processing over 200,000 homeowners' First Notice of Loss (FNOL) reports annually faced significant workflow inefficiencies, with adjusters spending up to 15 minutes per claim manually reviewing policy documents across multiple systems. The carrier implemented an AI solution from Roots AI (an AI Agent platform for the insurance industry) to automate FNOL intake, extracting data from unstructured documents, retrieving policy records, reconstructing the current-year policy with all historical changes, and automatically routing claims and document packages to the relevant systems with adjuster notification. Over six months, the solution achieved 99.9% STP, reduced cycle time by 73%, and saved hundreds of adjuster hours, all without additional resources, empowering adjusters to focus on customer interactions and higher-value tasks.



“Most insurance organizations were designed for a human-centric operating model, so unlocking the potential of agentic AI requires insurers to reimagine both their operating and business models. As agentic AI introduces new risks, strong governance must be built into systems to balance speed with control and secure a lasting advantage.”

Simon Torrance
Chief Executive Officer,
AI Risk

The frontier even trailblazers have yet to cross

Changing how work gets done remains the central challenge, even for those already ahead on strategy, technology, and adoption. However, three areas are still a work in progress for all players across the P&C industry, and meeting these challenges is where the next wave of competitive advantage will be realized.

Collaboration remains largely untouched

The first area is collaboration. 49% of employee time is spent on cross-team collaboration, yet most AI tools operate at the individual task level, automating work after decisions are made rather than shaping those decisions.

49%

Employee time spent collaborating across teams

The necessary shift is for AI to provide insights during real-time decision making – in calls, meetings, and cross-functional reviews – rather than only supporting post-decision tasks. This is where true decision quality improvement lies: fewer underwriting exceptions, more consistent claims settlements, and faster collaboration across functions. But providing real-time insights depends on having data ready when it’s needed, and that’s the second challenge for P&C insurers.

Elisa Farri, Co-author of 'HBR Guide to Generative AI for Teams' said, *“The competitive advantage lies in actively integrating AI as a sparring partner in team collaboration, not as an individual productivity tool. It’s time to look beyond one person, one screen, one task – and rethink how teams work better, faster, and smarter with AI. When AI is embedded intentionally into teamwork, the benefits are real: richer discussions, sharper thinking, and deeper alignment.”*

Unstructured data readiness continues to be low

Across the industry, only 12% of insurers report very high maturity in data readiness, yet underwriting, claims, and service decisions rely heavily on documents, images, correspondence, and audio.⁷ Current infrastructure focuses on structured data, which limits how widely and reliably AI can be deployed.

The goal is to create a multi-modal foundation that renders unstructured data as accessible and reliable as structured data. An orchestration layer that can evaluate risk, route requests, enforce governance, and escalate issues when AI confidence is low is also required. With this in place, the result is decision-grade data available instantly at the time of decision. The solution also lets AI engage actively in real-time decision making.

Core processes remain unchanged

The third of these three challenges is the deepest. AI has been added to workflows built for humans, including sequencing, handoffs, and decision points, none of which were originally intended to incorporate AI. Until those workflows are redesigned around what AI can now manage, governance and training will continue to operate on the fringes of a process that was never meant to include them.

12%

Insurers report a high maturity level in data readiness

But this clarity gap runs deeper than process design. 43% of employees cite job security as one of their top concerns about AI, and 25% worry that the transition to AI will increase rather than reduce their workload. Employees navigating genuine uncertainty about their future are unlikely to lean into a technology they associate with displacement. Until insurers address process design and the trust deficit together, transformation will remain out of reach.

These challenges aren't signs of failure, but rather the natural next stage of progress. They point to something deeper than a capability gap. The operating model, built for human-driven workflows, handoffs, and judgment, has barely changed. Trailblazers have built better tools and stronger foundations, but no one has yet reimagined the system those tools are meant to power, in a way that answers the human question at its center: not just how AI fits into work, but how people fit into a world increasingly shaped by AI.



3

**The intelligence imperative:
How do you redesign
the organization for the
agentic era?**

The architecture mismatch explains why AI gains stall – and intelligence trailblazers show what overcoming it requires. But even the most advanced insurers haven’t crossed the final threshold: building an enterprise where human expertise and synthetic execution are deliberately designed to work together as one continuously adapting organization – as technology matures, risk landscapes shift, and the boundaries between human judgment and AI expand. This is what we describe as the “expert-centric P&C insurer.”

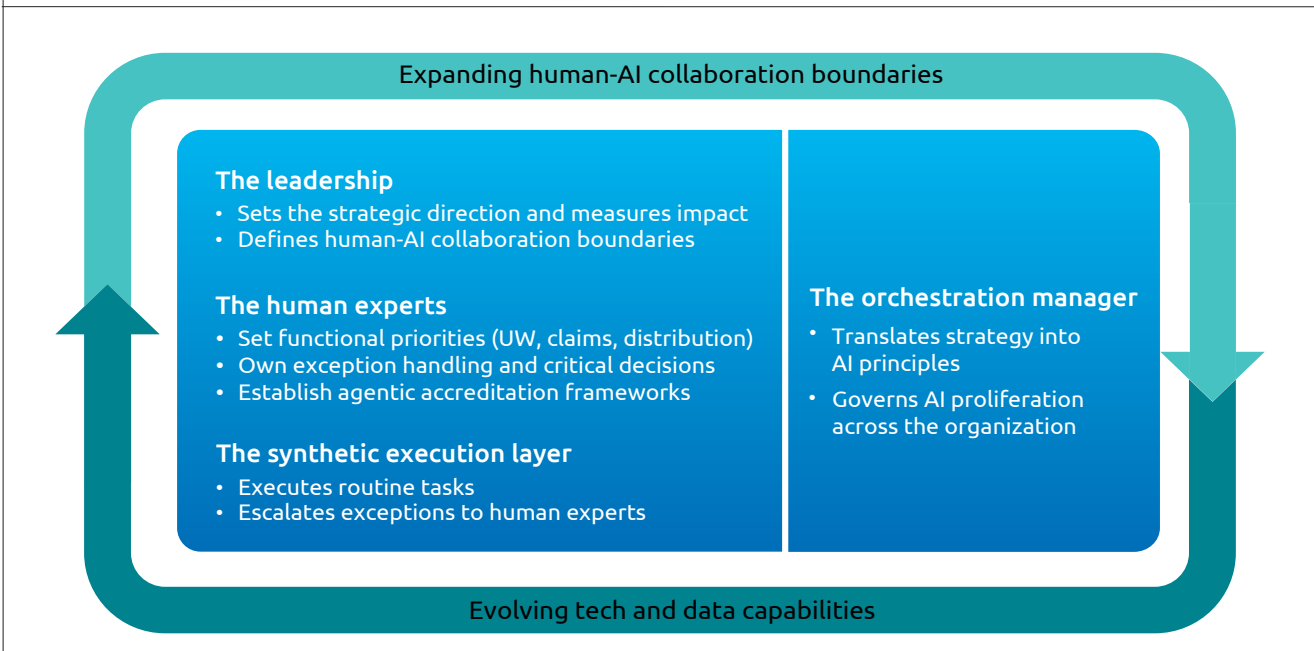
The expert-centric P&C insurer: A network of experts, powered by agentic intelligence

The expert-centric P&C insurer isn’t defined by how much AI it deploys. It’s defined by how it deliberately organizes human and AI capabilities around a single question: where does human judgment create irreplaceable value, and where can synthetic execution be trusted to act?

Figure 9 shows how four interconnected building blocks define how that organization operates:

1. Starting at the top, leadership sets strategic direction and defines human-AI collaboration boundaries as a flexible, continuously evolving framework that expands as technology matures and confidence in synthetic execution grows.
2. The human expert building block is where irreplaceable expertise lives. Functional specialists like underwriters, claims specialists, and distribution specialists set

Figure 9:
Expert-centric insurers place human judgement at the core, powered by agentic intelligence



Source: Capgemini Research Institute for Financial Services analysis, 2026



“Leaders need to rethink how frontline roles will evolve with AI and what new skills employees require. Frontline teams should learn to work with AI while maintaining strong insurance expertise. As adoption increases, human oversight remains essential to preserve judgment, maintain knowledge, and ensure AI supports decision making rather than replaces them.”

Sundari Veerabahu
Chief Data Officer, SVP,
The Hartford

priorities, own exception handling, and make the judgment calls that define outcomes. Their role isn't diminished by AI: it's elevated. They become the standard setters for synthetic execution: just as underwriters and claims specialists earn accreditation before they're trusted to make consequential decisions, human experts define equivalent frameworks for AI agents, establishing what synthetic workforces must demonstrate before they're trusted to act.

3. Next, synthetic agents handle the high-volume, repeatable work. For routine cases, they execute end-to-end: processing documents, validating data, and completing STP without human intervention. When confidence is low or complexity exceeds defined thresholds, cases are escalated to the human expert layer above.
4. Alongside these elements is what separates leading organizations from the rest: orchestration managers. These people hold deep functional expertise and understand AI sufficiently to fine-tune models built with IT. They translate corporate strategy into the principles that govern how intelligence scales across the organization. They sit at the intersection of business and technology, ensuring synthetic agents remain aligned to strategic outcomes rather than optimizing in isolation. They become the glue of a coherent, well-governed system. This is the capability that matters most.

When human expertise is concentrated where it matters most, the outcomes will follow: sharper decision quality, tighter loss ratios, and better conversion rate.

Optimizing today while reimagining tomorrow

Moving towards this future model requires insurers to pursue two transformation paths in parallel, optimizing the current state while reimagining tomorrow.

The first path optimizes the present by strengthening expert judgment with intelligent capabilities. The strategic discipline is knowing what only you can build, what the market can provide, and where the right partner accelerates what neither could provide on their own. It comes down to three decisions:

- Buy the table stakes that create competitive parity, like AI-enabled workbenches.
- Build the proprietary capabilities that create competitive differentiation, like risk selection logic and real-time pricing models.
- Partner for capabilities that are too costly to build and too strategic to simply procure.

The second path reimagines the future through a scalable synthetic workforce, and its implications extend further than operational efficiency. The insurance industry is one of the few where demand structurally outstrips supply,

and the protection gap persists because the economics of serving it haven't worked. Synthetic execution changes that equation in two ways: it enables insurers to expand into previously uneconomical segments without proportional costs, and it enables risk modeling sophisticated enough to expand the boundary of what's insurable.

Most insurers will begin with the first path by strengthening what exists before reimagining what comes next. But the second path can't wait until the first is complete. Organizations that will lead are those that commit at least a portion of their ambition and capital to reimagining the future while they're still optimizing the present. The ratio shifts over time, but the commitment to both must start now.

Stefan Engl, CEO & Co-founder at Otera said, *"During catastrophes, insurers face severe workload spikes that make permanent peak staffing uneconomical. AI agents can absorb excess volume, allowing smaller, well-trained core teams to focus on complex work while improving decision quality and reducing claims leakage – especially in fast-track cases with limited review."*

US personal lines insurer charts a data and AI strategy roadmap to optimize underwriting and drive profitable growth

Business challenge: A personal lines insurance carrier in the northwestern US was under mounting financial pressure as inflation and escalating wildfire activity drove loss trends higher, while delayed rate adjustments further compressed margins. The insurer's siloed data and AI capabilities prevented effective customer segmentation across business lines, limiting its ability to reshape its portfolio strategically and respond quickly to shifting market conditions.

Strategy: Capgemini was engaged to deliver a 12-week strategic data and AI engagement to accelerate the insurer's analytics transformation. Together with the insurer's Chief Data and Analytics Officer, the project team conducted interviews across the C-suite, function heads, and analytics leads to assess the organization's current data and AI capabilities. Leveraging a Gen AI-based strategy, the team analyzed publicly filed rate documents to develop a phased

business and technology roadmap spanning core, emerging, and long-term initiatives. The roadmap prioritized customer segmentation capabilities, forecasting integration, and cloud-native data architecture to enable data-driven decision making across the value chain.

Results: The roadmap is estimated to decrease the insurer's combined ratio by 3% and increase premium growth by 10%, driving significant profitability improvements through better underwriting and portfolio optimization. By integrating previously siloed data capabilities, the insurer can now leverage data and AI across the enterprise to optimize underwriting decisions and ensure rate adequacy in a fast-changing market.



“Organizations need clear AI transformation priorities: first, define whether AI will drive growth or efficiency; second, use an iterative build approach to keep pace with rapid change; and third, embed measurable targets into plans and budgets to ensure real accountability for productivity and business value.”

Rob Raus

Chief Information Officer,
US & Bermuda
Market Insurance

Where does your intelligence investment belong?

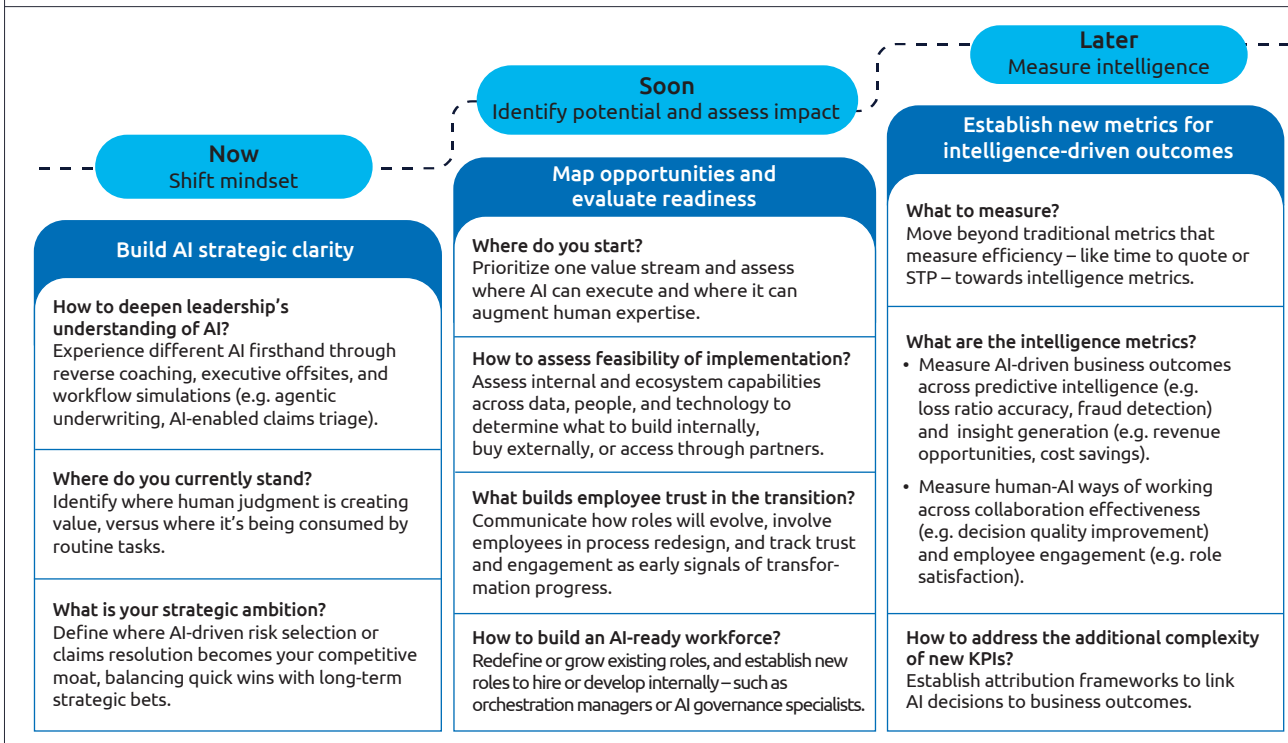
Capital discipline is what separates insurers who build the expert-centric organization from those who accumulate AI investments without compounding them. That discipline begins with clear business outcomes and a focus that hones in on one high-impact value stream at a time – and it’s within the chosen value stream that investment decisions become concrete. From there, three filters bring rigor to every investment decision.

- **Invest with intent: Build no-regret foundations.** Some investments hold value regardless of how technology evolves or which capabilities emerge as dominant. These are worth committing to early because they create the conditions for everything else without betting on a particular outcome. Data accessibility, cloud-integration capabilities, and AI and human governance boundaries all fall into this category.
- **Test with confidence: Ensure trust before scaling.** Other investments need proof before enterprise commitment because their value depends on how well they hold under operational pressure. Decision support tooling for human experts, synthetic workforce pilots in high-volume, low-exception processes, and orchestration manager roles in priority value streams all fall here. The goal is to generate the evidence needed to make scaling a confident decision rather than a leap of faith.

- **Challenge with perspective: Reframe your value equation.** As agentic capabilities accelerate, the assumptions behind many existing and prospective investments deserve scrutiny. Platform commitments, ecosystem partnerships, and workforce restructuring plans were often sized for a world where AI matured more slowly. But the challenge now is: do they still pay back on their original terms if AI matures faster than expected? In today’s rapidly moving environment, that question deserves an answer, whether the capital has already been committed or is still being considered.

As AI capabilities accelerate, competitive advantage accrues to organizations that deliberately align capital, platforms, and workforce.

Figure 10:
The journey to becoming an expert-centric P&C insurer requires navigating three strategic horizons



Source: Capgemini Research Institute for Financial Services analysis, 2026

The path to achieving an expert-centric organization

The journey to the expert-centric organization unfolds across three horizons, each building on the last. As figure 10 shows, it begins with mindset, moves through opportunity mapping, and culminates in a fundamentally different way of measuring success.

- **Now: The starting point where leadership conviction is built on more than strategic intent.** Leaders need to experience AI firsthand, not just read about it. From that firsthand understanding, two assessments follow – one, where human judgment is currently creating value versus being consumed by routine tasks, and two, where AI could become a genuine competitive moat rather than just a cost reduction tool. This is the shift from treating AI as an end in itself to being a means to a strategic outcome.
- **Soon: Where the focus shifts from clarity to action.** One value stream is prioritized, and the organization begins assessing what to build, buy, or access through partners. This is also where workforce transformation begins in earnest, not as a cost exercise but as a deliberate redesign of how work gets done. Critical to this phase is building employee trust in the



“AI has the greatest impact when companies transform entire lines of business instead of isolated use cases. This approach allows organizations to redesign processes, partnerships, and data systems effectively. By collaborating with the right partners and integrating capabilities, insurers can create greater value for customers.”

Christina Lucas

Global Insurance Market Leader,
Google

transition. This means communicating how roles will evolve, involving employees in process redesign, and tracking trust and engagement as early indicators of transformation progress. With that trust in place, existing roles evolve, new capabilities are built, and the orchestration manager role that most organizations don't have yet, begins to take shape.

- **Later: Marking the most consequential shift – from measuring what AI automates to measuring what AI changes.** Most insurers aren't equipped for that transition yet. Intelligence metrics require moving beyond efficiency proxies to track AI-driven outcomes across predictive intelligence and insight generation. Measuring human-AI collaboration effectiveness requires entirely new frameworks that most finance and technology functions were never built to produce. And underpinning both of these needs is an attribution challenge that few P&C insurers have solved – linking AI decisions to business outcomes clearly enough to drive real accountability.

The shift in measurement isn't just a sign of maturity. It's what makes the advantage sustainable and the clearest signal that a P&C insurer has genuinely crossed the threshold to the expert-centric model.

Suhas Krishna, Principal, Digital Strategy Group Financial Services and Insurance at Adobe, said, *“Measuring AI by model accuracy alone misses the point. In insurance, value shows up when AI improves speed, relevance, and trust across customer journeys. Metrics like quote-to-bind, retention, claims cycle time, straight-through processing with governance guardrails, and compliance pass rates are what truly connect AI performance to growth, efficiency, and customer confidence.”*

Conclusion

The shift from efficiency to competitive advantage is no longer a future consideration: it's already separating P&C insurers who are compounding advantage now, from those who are optimizing in place. Yet for most, while the investments are real and the ambition is genuine, the results are still falling short. The reason isn't a lack of effort. It's architecture.

Adding AI to existing systems, processes, and ways of working yields what the data shows: incremental efficiency gains, pilots that don't scale, and a growing disconnect between ambitions and results. Closing that gap doesn't just require more AI investment: rather, it requires a different organizational logic – one that concentrates human expertise where it creates irreplaceable value, and builds the conditions for intelligence to compound across the enterprise rather than accumulate in isolation.

This distinction – between accumulating AI and compounding it – is the key to building an intelligent, expert-centric P&C insurance organization, and it's a very achievable goal. The most crucial step is understanding that success isn't simply a matter of new technology, but that it's the result of new organizational decisions.



Methodology

The World Property and Casualty Insurance Report 2026 draws on three primary sources: the 2026 Global Voice of the Customer Survey, the 2026 Global Insurance Employee Surveys, and the 2026 Global Insurance Executive Interviews. This primary research includes insights from 20 markets: Australia, Belgium, Brazil, Canada, Denmark, Finland, France, Germany, Hong Kong, India, Italy, Japan, Norway, Portugal, Singapore, Spain, Sweden, the Netherlands, the United Kingdom, and the United States.

2026 Global Voice of the Customer Survey

Our comprehensive Voice of the Customer Survey, conducted from December 2025 to February 2026 in collaboration with Phronesis Partners, polled 1,113 people across 18 countries. These markets span the three global regions: the Americas (Brazil, Canada, and the United States), Europe (Belgium, Denmark, Finland, France, Germany, Italy, Portugal, Spain, the Netherlands, and the United Kingdom), and Asia-Pacific (Australia, Hong Kong, India, Japan, and Singapore).

2026 Global Insurance Employee Surveys

The report also includes insights from four Global Insurance Employee Surveys conducted between December 2025 and February 2026, with 809 insurance employees across 16 markets. The four surveys include 200 agents, 200 claim adjusters, 200 customer service agents, and 209 underwriters. These markets span all three global regions: the Americas (Brazil, Canada, and the United States), Europe (Belgium, Denmark, Finland, France, Germany, Italy, Spain, the Netherlands, and the United Kingdom), and Asia-Pacific (Australia, Hong Kong, India, and Singapore).

2026 Global Insurance Executive Interviews

The report also includes insights from Global Insurance Executive Interviews conducted between December 2025 and March 2026, with 344 senior insurance executives from leading property and casualty insurance companies across 18 markets. These markets span all three global regions: the Americas (Brazil, Canada, and the United States), Europe (Belgium, Denmark, Finland, France, Germany, Italy, Norway, Spain, Sweden, and the United Kingdom), and Asia-Pacific (Australia, Hong Kong, India, Japan, and Singapore).

AI definition

In this study “AI” refers to Artificial Intelligence, specifically:

- Traditional Artificial Intelligence/Machine Learning (AI/ML): systems that analyze data and make predictions, including machine-learning models and predictive analytics.
- Generative AI (Gen AI): AI systems that learn patterns from data to generate content, such as text, images, and code.
- Agentic AI: autonomous AI systems that set goals, use tools, and execute multi-step workflows independently.

Insurers’ maturity

In the report, we calculated each firm’s AI maturity (trailblazers versus mainstream insurers) based on their self-assessment across:

- Stage of AI adoption, assessed across Gen AI and agentic AI.
- Maturity of the governance model for AI-driven decisions and progress in establishing AI safeguards such as override rules, feedback loops, explainability tools, escalation protocols, and periodic audits.

- Breadth of AI literacy and adoption readiness programs and practices implemented, including AI literacy programs, tool usage and judgement skills training, change management initiatives, adoption incentives, role-based readiness assessments, and hands-on pilots.
 - The degree to which AI skills are reflected in job descriptions, and how strong the link is between AI experimentation outcomes and compensation or recognition.
 - Progress across organizational changes including AI Centers of Excellence (CoE), role transformation, cross-functional KPIs, budget realignment, and leadership enablement.
 - Level of capabilities across cloud platforms, unified AI infrastructure, explainability solutions, data integration, and collaboration platforms.
 - Model of team organization for AI initiatives – from functional teams with independent KPIs, to coordinated functional teams with separate KPIs, to cross-functional teams with shared outcome KPIs.
 - Priority assigned to IT activity areas across solution procurement and implementation, custom application and platform development, orchestration and cross-functional enablement, system integration and data management, and maintenance and technical support.
- Benefits realized from Gen AI and agentic AI across goals including cost savings, workflow acceleration, revenue growth, customer experience improvement, faster time to market, and loss reduction and fraud prevention, assessed on whether expectations were below, met, or exceeded.

Our analysis indicated that the top 10%ile of firms (trailblazers) are leading AI transformation initiatives and are reaping related benefits.



Partner with Capgemini

Enterprise AI Transformation

Capgemini Invent works with top-tier insurers and their CXOs at the intersection of strategy, technology, and transformation. We bring vision and execution power to enable P&C insurers to embed AI at scale in their operating models. We help insurers break out of the AI purgatory by shifting from technology-first pilots towards a business-led transformation enabled by AI.

We align workforce, data, and process adaptation across the value chain to unlock the efficiency potential the industry has been promised but has yet to materialize. We ensure insurers evolve into organizations where human expertise is amplified by AI-empowered teams to make faster, sharper decisions with high confidence. The result? More intelligent operations, more proactive customer engagement, and a resilient competitive advantage.

Data & AI Estate Migration & Modernization

Insurers struggle with fragmented data estates, inconsistent governance, and limited AI readiness, making it essential to break down silos, build centralized data hubs, and enable secure federated governance to operationalize AI and agentic capabilities effectively. Our Data & AI Estate Migration & Modernization offering provides an

agent-enabled platform foundation, intelligent data and AI operations, a proven migration methodology, and industry-specific accelerators. This empowers insurers to modernize at scale, reduce complexity, and build autonomous, business-aligned data and AI ecosystems.

AI-Powered Customer Engagement Center for Insurance

Exceptional customer service is vital for insurers, as most post-purchase interactions revolve around servicing and claims. With customer acquisition far costlier than retention, delivering a superior experience is essential for profitable growth. However, many contact centers still depend on outdated processes, causing long wait times and inconsistent journeys, while self-service adoption remains low. Capgemini's AI-first solution transforms this landscape – centralizing engagement, empowering agents with Gen AI, and guiding customers to effective self-service. The outcome: seamless omni-channel support, higher satisfaction, and scalable cost efficiency.

AI-Powered Claims

Claims remain the most critical moment of truth for insurers and customers, yet today's operating models are fragmented, manual, and costly – creating friction, delays, and eroding trust. AI-Powered Claims is a timely, market-relevant offer that redefines how insurers manage claims through AI-driven decisioning, predictive analytics, and human-centered experiences. It introduces an intelligent, unified approach, enabling insurers to embrace the future claims operating model and improve total outcomes delivering speed, accuracy, and empathy at scale.

Ask the experts



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Julien Assouline is leading Financial Services for Capgemini Invent. He has more than 25 years of working experience in the industry. Both as a consultant but also as an exec in Banking. He supports his clients in defining and executing strategic transformation initiatives.



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Kiran Boosam leads Capgemini's Global Insurance Portfolio. A career P&C and Life insurance expert, Kiran assesses the industry dynamics, forecasts insurance CXOs' strategies, shapes fitting innovative portfolios, and enables key clients to leverage the power of the Capgemini Group, external ecosystems, and emerging technologies.



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Luca provides strategic insights for financial services to shape industry dialogue on transformation. Each year, he partners with 80+ C-suite leaders at global financial institutions, drawing on research across multiple markets to identify emerging patterns and translate them into strategic guidance.

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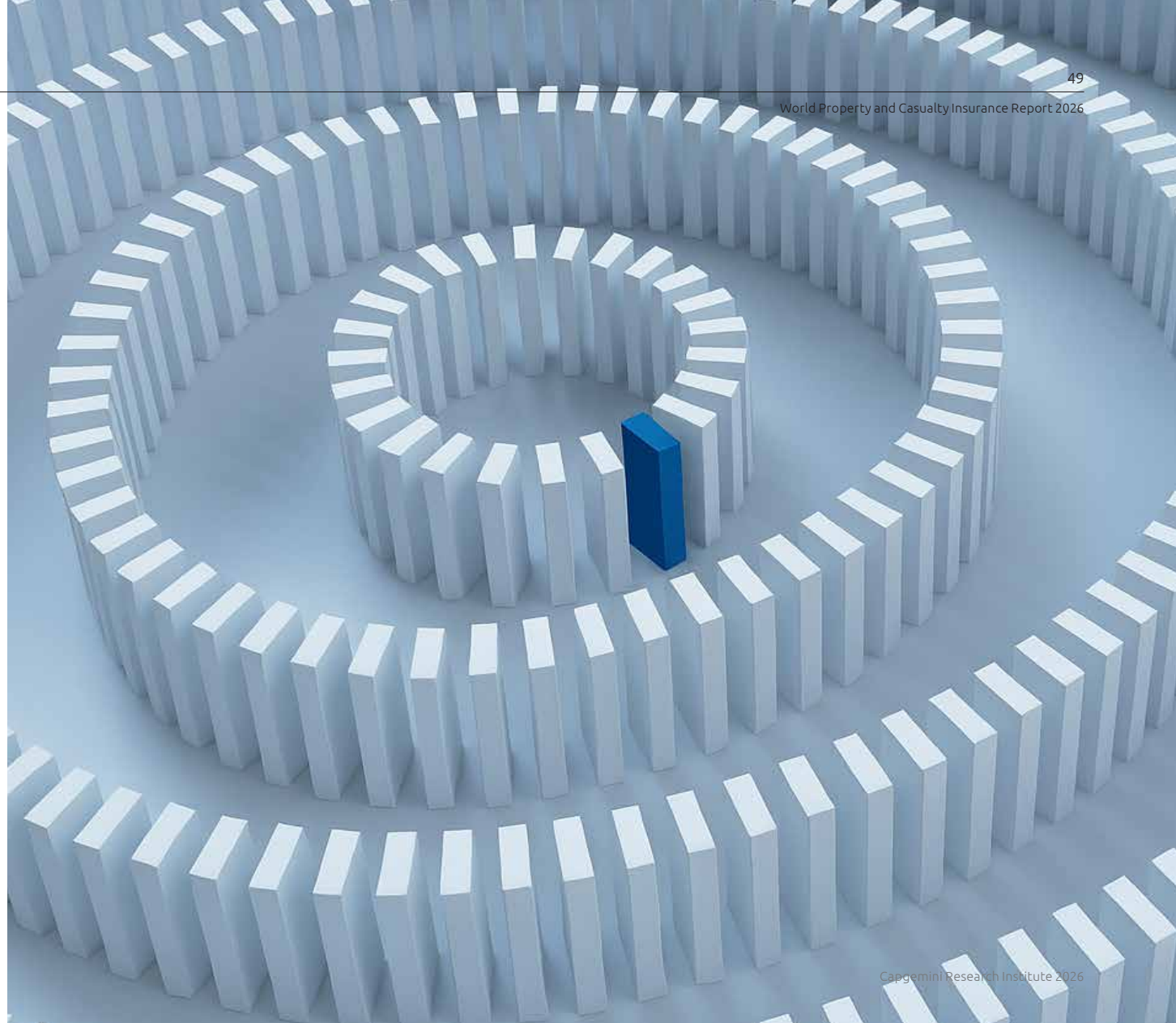


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