



5 capabilities required to transform group protection

As demand for integrated workplace health solutions grows and State support recedes, insurers must transform their group protection capabilities. This article outlines five platform-level capabilities that are critical for scaling, simplifying, and future-proofing group protection offerings.

With government support shrinking and workplace health needs rising, group insurers are under pressure to future-proof their administration, but legacy systems are holding them back. The need for employers to support their employees' well-being and health has never been greater and group insurance providers have a pivotal role to play.

In response to the Government's recent "Get Britain Working Review" first phase, GRiD (the industry body for the group risk sector - grouprisk.org.uk), says:

"The Group Risk industry is perfectly placed to support the next phase of the review. The vocational rehabilitation model, provided via group protection insurance, is designed to support people to return to work after absence because of ill-health. It provides start-to-end, tailored,

case-management support, with clinical and vocational experts, working with the employer and employee to make adjustments and support the employee back to work."

This highlights the convergence of pressures the group protection market faces: rising customer and broker expectations, regulatory scrutiny, the shift away from state welfare and growing demand for integrated health and well-being services. Insurers will need to go beyond product enhancements and address the longstanding structural constraints embedded in creaking administration platforms. With over 20 years of experience supporting insurers operating group protection, Lumera has identified the following five key critical capabilities to underpin successful and prudent revolution strategies:

1. Unified, workplace-centric systems

Current systems are often the result of incremental adaptations to legacy infrastructure, typically product-centric and administratively fragmented. What's needed now is a purpose-built platform designed around workplace delivery models, capable of supporting multiple group insurance types and associated health and well-being services using a unified data structure.

A central system delivering a single source of truth is essential for consistency, automation and enabling data insights. Without this, personalisation, regulatory reporting and operational scalability will remain out of reach, especially when serving the small and micro employer markets.

2. API-first architecture enabling ecosystem connectivity

The workplace market no longer exists in isolation. Employers, brokers and third-party providers require seamless integration with payroll systems, HR software, benefit platforms and digital engagement tools.

An API-first architecture is the only viable model for delivering real-time, automated and secure data exchange across this ecosystem. It enables insurers to participate in embedded benefit models and support existing and new distribution channels.

3. Support for product packaging

Employer demand is shifting toward bundled propositions that combine financial protection with health and wellbeing support, delivering a single view for customers. This requires insurers to package their own products with third-party

services, including mental health support, virtual GPs and rehabilitation services.

Platforms must support sustainable operating models that let insurers design, price and administer these combinations as integrated offerings — not as disconnected, siloed products stitched together on legacy systems.

4. Extensive automation of core administration processes

Operational inefficiency continues to be a barrier to scale and innovation. Many insurers still rely on manual workarounds for quotes, onboarding, claims, billing and reporting, all of which increases cost, delay and inconsistency.

Full automation of core processes is essential to lower cost-to-serve, reduce errors and free up capacity. This isn't just about productivity — it's the foundation for competing on both service and margin.

5. Multi-channel access for employers and intermediaries

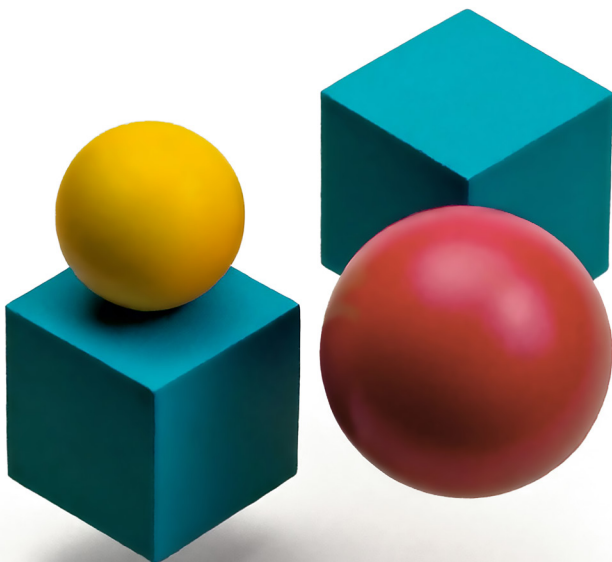
The modern employer client base is diverse: from micro-employers looking to self-serve using online “quote & buy”, to large corporates relying on intermediary advice where customisation and data insights are paramount.

Platforms must support all models — enabling direct employer access while also providing intermediaries with tools to manage schemes at scale. Achieving this without duplicating effort or fragmenting service requires configurable, role-based access and unified workflows across all channels.

Conclusion

As insurers reassess their group protection propositions in the light of rising demand, reducing State support and accelerating technological change, platform capability becomes an increasingly strategic necessity, not just an operational one. These capabilities define the baseline requirements for competitive sustainability in the next phase of workplace benefits.

They are not features; they are architectural imperatives.



About Lumera

Lumera is dedicated to the digital transformation of the European Life and Pensions industry. As insurtech innovators, we provide future-proof core technology for policy administration.

The Prudent Revolution is our mission – bridging technology and partnership to navigate the fastest, safest path through complex change for L&P providers.

We combine tech and industry expertise with relevant market experience to offer a broad range of consultancy and data services – from managing faultless legacy system migration to facilitating compelling end-user experiences.

Based in Stockholm, Lumera has significant presence with offices in the United Kingdom, the Netherlands, Norway, Sweden, India and Vietnam.

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