AGENTIC AI INSURANCE SERVICES

Report & Manual Writer

Spend your time advising clients — not re-typing schedules.

An AI-assisted tool for insurance brokers and authorised representatives. Build v0.6.1 · Australia

THE PROBLEM

Renewal timing is the sector's biggest compliance problem

~50%

of all Code breaches reported across the sector are renewal-timeframe breaches — three years running

2,077

breaches of s 7.2(a) — engaging the client at least 14 days before expiry

38%

of all reported breaches came from that single commitment, the most-breached in the Code

The causes the Committee names: renewal processes not followed, manual error, system limitations, and resourcing pressure at peak periods.

Every one of those is a process problem, not a knowledge problem — which is what makes it addressable.

IBCCC 2025 Annual Data Report · 414 broker submissions, calendar year 2025. Sector-wide trends, not the performance of any individual broker.

HOW IT WORKS

Insurer documents in, client-ready report out

1 **Intake gate**

Every source document classified by class, type and period. Scanned schedules OCR'd. Insurer documents take precedence over last year's manual.

2 **Extract**

Insurer, policy number, period, limits, sub-limits, excesses and premiums pulled into a structured record — each figure carrying its source.

3 **Reconcile**

Diffed against the prior period. Every change recorded as “(prior X — replaced)”. Movements and status badges computed.

4 **Generate**

Program summary, plain-English dictionaries, uninsured risks, interested-parties register, pre-renewal schedule. Triggered red flags surface.

5 **Render & gate**

Word master and PDF delivery copy. A blocking preflight check stands between the draft and delivery.

THE OUTPUT

What the client receives

Insurance Program Summary

Every class on one page — limits, excess, current and prior premium, status badge, totals.

A page per policy class

Insurer, policy number, period, next renewal, limits, excesses, key inclusions and exclusions.

Claims experience

Insurer loss runs normalised per class, cross-added, with the class-correct party heading.

Interested parties & certificates

Whether each noted interest is automatic under the policy or endorsement-only.

Key uninsured risks

The exposures a standard program will not answer — surfaced, never implied as covered.

Pre-renewal schedule

A review date set at least three months before every renewal date.

Word master with a faithful PDF delivery copy. Certificates of currency and the structured program record are emitted from the same build.

DEFENSIBLE BY DESIGN

The insurer's document wins — every time

1	Insurer policy schedule	The binding statement of limits, excesses, premium and endorsements for the current period.
2	PDS / policy wording	Terms, conditions, exclusions and definitions.
3	Endorsement schedules	Amendments to the schedule, in the order issued.
4	Prior manual	Carried-forward context only. Never overrides 1–3.
5	Program spreadsheet	Reconciliation and premium history.

A figure that cannot be sourced is marked for confirmation — never estimated, never carried forward without a source.

WHAT IT CATCHES

Red flags surface only when they fire

URGENT

Retroactive date advanced

URGENT

Cover not bound past its renewal date

URGENT

Interested-party endorsement unconfirmed

URGENT

Endorsement without an insurer document

REVIEW

Premium movement beyond threshold

REVIEW

Adverse claims experience at renewal

REVIEW

Sub-limit below benchmark

REVIEW

Sum insured not indexed or escalated

NOTE

Schedule outstanding or figure unverified

Only triggered flags appear in the report. A clean program produces a clean page.

THE NEEDS ANALYSIS

Business Interruption, sized properly

What it computes

- Insurable gross profit on both the difference and addition bases, reconciled against each other
- The recommended declared value or sum insured, sized against the indemnity period
- Adequacy against cover currently held — under-insurance, over-declaration, and what average would do to a claim
- Whether the indemnity period is long enough to rebuild and regain market share

Why it matters

Business Interruption is the cover clients most often carry at the wrong figure, and the one where being wrong is most expensive.

An under-declared value reduces recovery. An under-insured sum invites average. Neither shows up until the claim.

It informs your recommendation. It does not set a bound figure.

An advisory sizing aid. Verify against the client's financial records before relying on it.

STAGES

One engine, four documents

1

Pre-renewal report

Ahead of the renewal conversation — what is coming up, what moved, what needs a decision.

2

Renewal report

The full picture at renewal, reconciled against the prior year.

3

Insurance manual

The standing reference the client keeps, updated as each policy renews across the year.

4

New business proposal

Options compared, with the basis of recommendation documented for compliance.

Same source data, same house style, same reconciliation — four different documents from the one build.

WHITE LABEL

Your firm's brand, configured once

`config / broker-profile.yaml`

One file. Legal and trading name, ABN, AFSL and AR number, address, contacts, logo, house colours and signatory.

No source-code edits

Every report title block, header, footer and credential line is composed from that one file.

Ships with placeholders

No vendor name, ABN, AFSL or AR number is carried in the licensed build.

The gate enforces it

Preflight fails the run while an unresolved placeholder would reach a delivered report.

Your smallest client gets the same standard of document as your largest.

COMMERCIAL

Availability

Territory	Australia only
Licence	Perpetual, version-pinned, single named user; supplied as-is
Included	Twelve months of point releases from the delivery date
Requirement	The licensee holds their own Claude subscription
Environment	Claude desktop app, Cowork mode
Boundary	General advice only — not legal advice, not personal financial advice

Cover is defined by the insurer's policy schedule, PDS and wording, which prevail over any summary the software produces.

What it comes down to

The figures come from the insurer's document — not a keyboard.

Hours back on every client. Fewer input errors. A renewal date that is never the thing you missed. And a documented, file-ready record behind the advice you gave.