AISEVAK.IN · TOOL CATALOGUE

Insurance — 87 tools

All tools · at-a-glance descriptions · Generated 27 Aug 2026

This is the full list of AiSevak tools in this industry, each with a short description of what it produces. Open any tool on aisevak.in to run it.

COI Compliance

COI Review & Compliance Check

Checks a vendor/contractor Certificate of Insurance against your minimum requirements and flags every gap — coverage, limits, additional-insured status and expiry. Use it before you rely on a vendor's insurance. To first define what to require, use the COI Requirement Builder; to chase a fix, use the COI Deficiency Letter Generator.

COI Requirement Builder

Defines the insurance a business should require from a vendor by risk — cover types, minimum limits, endorsements and contract language. Use it before hiring a vendor/contractor. To then check a vendor's certificate against these, use the COI Review & Compliance Check.

Additional-Insured / Endorsement Checker

Checks whether the endorsements you require — additional insured, waiver of subrogation, primary & non-contributory — are actually present on a vendor certificate, and what to ask for if not. Use it to verify endorsements. For a full COI check, use the COI Review & Compliance Check.

Subcontractor Insurance Compliance

Builds a subcontractor insurance compliance framework — required covers, flow-down clause, a tracking matrix and the principal's liability if a sub is uninsured. Use it on a project with multiple subcontractors. For a single vendor certificate, use the COI Review & Compliance Check.

Tenant / Lease Insurance Verification

Verifies a tenant's insurance against the lease requirements — liability, contents and landlord-as-additional-insured — and flags deficiencies. Use it as a landlord before handover. For a general vendor certificate, use the COI Review & Compliance Check.

Event Insurance COI Check

Checks an event vendor's insurance — public liability, equipment, staff cover — against venue/host requirements and flags gaps. Use it before an event to avoid an uninsured vendor. For general vendor certificates, use the COI Review & Compliance Check.

COI Expiry / Renewal Monitor Guide

Designs a COI expiry/renewal monitoring process — tracking fields, reminder cadence and escalation on lapse — to prevent coverage gaps across your vendors. Use it to stop certificates lapsing unnoticed. To chase a specific gap, use the COI Deficiency Letter Generator.

COI Deficiency Letter Generator

Drafts a professional letter asking a vendor to cure a specific insurance deficiency by a deadline, with a hold on work/payment until cured. Use it after a COI check finds gaps. To find the gaps, use the COI Review & Compliance Check.

Certificate Holder Requirements Explainer

Decodes insurance requirements a client/certificate holder sent you into plain English, with how to comply, the likely cost impact and an action list for your broker. Use it when a client hands you a list of insurance requirements to meet.

Claims & Appeals

Claim Denial Appeal Letter

Drafts a firm, evidence-based appeal against a claim denial, citing IRDAI policyholder-protection regulations, the Ombudsman route and the specific defences to the exclusion applied. Use it when any insurance claim is wrongly denied. For a health pre-authorisation denial specifically, use the Pre-Authorization Denial Appeal.

Mediclaim Rejection Analyzer

Analyses a mediclaim rejection, assesses whether the denial is valid under typical IRDAI norms, and outlines your options and case strength. Use it to understand a health-claim denial before acting. To draft the actual appeal, use the Claim Denial Appeal Letter.

Pre-Authorization Denial Appeal

Drafts an appeal against a denied cashless pre-authorisation with a medical-necessity argument, supporting documents and an urgency note, plus the reimbursement fallback. Use it when cashless pre-auth is refused during admission. For a post-treatment denial, use the Claim Denial Appeal Letter.

TPA Escalation Letter

Drafts an escalation letter from an unhelpful TPA to the insurer's grievance cell / IRDAI IGMS, with the escalation path and documents. Use it when a TPA is delaying or ignoring you. To go to the Ombudsman, use the IRDAI Ombudsman Complaint Builder.

IRDAI Ombudsman Complaint Builder

Builds an Insurance Ombudsman complaint (after insurer grievance failure) — eligibility, a full complaint with facts and relief sought, documents and the filing process. Use it as the free, policyholder-friendly next step after a rejected grievance. To escalate a TPA first, use the TPA Escalation Letter.

Claim Documentation Checklist

Produces a documentation checklist for a clean health-insurance claim — cashless or reimbursement — with dos, don'ts and submission timeline. Use it to avoid a claim being returned for documents. To assemble the file, use the Reimbursement Claim Builder.

Reimbursement Claim Builder

Assembles a health reimbursement claim file — a covering letter, the right document order, an amount breakdown and common-deduction flags. Use it to submit a reimbursement claim that gets paid in full. For the checklist first, use the Claim Documentation Checklist.

Policy Exclusion Interpreter

Tests whether a cited policy exclusion genuinely applies to your facts, with the argument for why it may not and the evidence to gather. Use it when an insurer leans on an exclusion to deny. For a general plain-English list of exclusions, use the Exclusions Explainer.

Pre-Existing-Disease Dispute Guide

Guides challenging a pre-existing-disease denial using waiting-period completion, the genuine-unawareness argument and the 8-year moratorium rule under IRDAI. Use it when a claim is denied on PED grounds. To draft the formal appeal, use the Claim Denial Appeal Letter.

Coverage Gap

Policy Coverage Gap Analysis

Analyses the policies your business holds against its type and assets to find coverage gaps, underinsurance and recommended additions with priority. Use it for a full portfolio gap review. For a specific cover (cyber, D&O, marine), use the dedicated gap-check tools; for underinsurance maths, use the Underinsurance Calculator.

Business Insurance Needs Assessor

Recommends an insurance program for a business by type and risk profile — property, liability, people and specialty covers with priority and rationale. Use it to scope what to buy. For a gap review of policies you already hold, use the Policy Coverage Gap Analysis.

Underinsurance Calculator

Computes your underinsurance and the average-clause impact on claims (with a worked example) and the sum insured you should carry. Use it to avoid a proportionately reduced claim. To set property sum insured on the right basis, use the Property Sum-Insured Adequacy tool.

Cyber Insurance Gap Check

Assesses cyber-insurance needs and gaps — first-party and third-party exposures, DPDPA regulatory liability, incident response — and the cover elements to buy. Use it for cyber exposure. For a full portfolio review, use the Policy Coverage Gap Analysis.

D&O Coverage Assessor

Assesses directors and officers liability needs — why it matters, the Side A/B/C structure, key exclusions and how to size the limit. Use it when directors face personal-liability exposure or investors require D&O. For a full program, use the Business Insurance Needs Assessor.

Product Liability Gap Check

Assesses product-liability cover adequacy for a manufacturer/exporter — including export-market (US/EU) exposure, recall cover and territory extension. Use it if you make/sell products, especially abroad. For a full program, use the Business Insurance Needs Assessor.

Marine / Transit Cover Assessor

Assesses marine/transit insurance needs — inland transit, import/export, single-transit vs open policy and the right ICC clauses — and why relying on the transporter is risky. Use it if you move goods. For a full program, use the Business Insurance Needs Assessor.

Property Sum-Insured Adequacy

Guides setting property sum insured on reinstatement (new-for-old) value rather than book/market value, and warns of the average-clause risk of underinsurance. Use it before renewing property cover. For the shortfall maths, use the Underinsurance Calculator.

Personal Insurance Portfolio Review

Reviews an individual/family insurance portfolio for adequacy — term life, health, personal accident, critical illness and home — with priority actions. Use it for a personal cover health-check. For renewal upgrades to a health policy, use the Coverage Upgrade Recommender.

Commission Reconciliation

Commission Discrepancy Report

Analyses your commission statement to find missing payments, short-paid commissions and rate errors, with a total gap and recovery points. Use it to catch lost commission across a book. For a single carrier payout, use the Carrier Payout Audit; to demand recovery, use the Commission Recovery Letter.

Direct-Bill Statement Reconciliation

Reconciles a carrier direct-bill commission statement against expected commissions and flags shortfalls by policy with reasons. Use it to check a carrier statement. For a whole book, use the Commission Discrepancy Report; to demand recovery, use the Commission Recovery Letter.

Renewal Commission Tracker

Builds a renewal commission tracking framework so recurring commissions are not missed, with at-risk renewals and where leakage happens. Use it to protect renewal income. To reconcile actual payouts, use the Direct-Bill Statement Reconciliation.

Override / Contingent Commission Calc

Computes override and contingent/profit-share commissions from your volume and loss-ratio terms, showing eligibility against the threshold and the total additional payout. Use it to work out override/profit-share due. To reconcile base commission, use the Direct-Bill Statement Reconciliation.

Carrier Payout Audit

Audits a carrier commission payout for common errors — wrong rate, missing policies, wrong premium base, uncredited endorsements/cancellations — with the underpayment total and dispute points. Use it on a payout you suspect is short. To recover, use the Commission Recovery Letter.

Commission Recovery Letter

Drafts a professional letter to a carrier demanding short-paid commission, with the basis, computation and a policy-wise annexure. Use it after an audit finds a shortfall. To find the shortfall, use the Carrier Payout Audit or Commission Discrepancy Report.

WC Premium Audit

Workers Comp Class Code Audit

Analyses your job roles for likely misclassification under the Employees' Compensation Act rating and estimates the premium you could save by reclassifying low-risk staff. Use it when your WC premium looks high. To build the dispute, use the Class-Code Dispute Builder.

Workmen Comp Premium Calculator

Estimates Workmen Compensation / Employees Compensation Act insurance premium from wages and occupational risk class, showing the rating basis and factors. Use it to budget WC premium or sanity-check a quote. To catch misclassification, use the Payroll Classification Reviewer.

Payroll Classification Reviewer

Reviews whether employee roles are correctly classified for WC/premium rating and flags costly misclassifications (e.g. clerical staff lumped with factory workers). Use it to cut premium overpayment. To build the dispute, use the Class-Code Dispute Builder.

Experience-Mod / Claims-History Analyzer

Analyses your claims/loss history — loss ratios and trend — and its likely impact on renewal premium (loading or discount), with mitigations. Use it to anticipate a renewal hike. For a fair-premium view, use the Premium Benchmarking tool.

Premium Over-Rating Dispute Letter

Drafts a letter disputing an incorrectly rated premium — with the correct-classification argument, refund/adjustment sought and escalation path. Use it when the wrong hazard rate was applied. To first prove the misclassification, use the Payroll Classification Reviewer.

Statutory Cover Compliance Check

Checks which mandatory/statutory insurances apply to your business — EC Act WC, motor third-party, Public Liability Act cover and others — with the basis and consequence of missing each. Use it to confirm legal insurance compliance. For a full program, use the Business Insurance Needs Assessor.

Wholesale Submission

E&S Wholesale Submission Package

Produces a complete specialty/surplus-lines market submission — an underwriter risk narrative, supplemental Q&A, coverage specifications and a marketing strategy — for a hard-to-place risk. Use it to take a specialty risk to market. For the narrative alone, use the Risk Narrative Builder.

Risk Narrative Builder

Writes a compelling, honest underwriter-facing risk narrative — operations, controls, loss-history context and management quality — that presents the risk favourably for placement. Use it to strengthen a submission. For the full submission package, use the E&S Wholesale Submission Package.

Supplemental Application Filler

Guides completing a specialty-line supplemental application accurately and favourably — key sections, what to provide, tips and common pitfalls. Use it when an underwriter sends a supplemental questionnaire. For the whole package, use the E&S Wholesale Submission Package.

Loss-Run Summary Generator

Summarises a loss run into an underwriter-friendly view — frequency, severity, trend, open/closed and large-loss context with positive framing. Use it to present loss history well in a submission. For renewal analysis of the same data, use the Loss-Run Analysis.

Submission Quality Scorer

Scores an insurance submission for completeness and marketability and flags gaps that reduce underwriter response, with quick fixes. Use it to check a submission before sending to market. To fill gaps, use the E&S Wholesale Submission Package or Loss-Run Summary Generator.

Market / Carrier Matcher

Suggests the types of insurers/markets likely receptive to a risk and how to approach them, with positioning tips. Use it to plan where to place a risk. To prepare the submission first, use the E&S Wholesale Submission Package.

Policy Interpretation

Policy Plain-English Summary

Translates a complex policy document into plain English — what is covered, what is not, key exclusions, the claim process and answers to your questions. Use it to understand a policy you hold or are buying. For exclusions specifically, use the Exclusions Explainer; to compare two policies, use the Coverage Comparison tool.

Exclusions Explainer

Explains your policy exclusions in plain English with real-world examples of when each would bite and how to mitigate (add-ons/endorsements). Use it to understand what a policy will not pay. For the whole policy in plain English, use the Policy Plain-English Summary.

Coverage Comparison (2+ Policies)

Compares two or more policies feature by feature — sum insured, room rent, co-pay, waiting periods, exclusions, premium — and recommends by value. Use it to pick between policies. To understand one policy deeply, use the Policy Plain-English Summary.

Endorsement Impact Analyzer

Explains how an endorsement changes coverage — whether it broadens, restricts or is neutral — and its practical and premium impact, with an accept/query/negotiate call. Use it when your insurer sends an endorsement. For renewal-wide changes, use the Renewal Terms Change Detector.

Claim-Eligibility Pre-Check

Pre-checks whether an event is likely covered under your policy, flagging the relevant conditions and exclusions and what to do before claiming. Use it before filing a claim. If denied later, use the Policy Exclusion Interpreter or Claim Denial Appeal Letter.

Renewal Terms Change Detector

Detects and explains material changes between an expiring policy and its renewal offer — premium, deductible, sub-limits, exclusions, add-ons — flagging silent reductions in cover. Use it before accepting a renewal. To build negotiation leverage, use the Renewal Negotiation Brief.

Waiting-Period / Sub-Limit Explainer

Explains health-policy waiting periods and sub-limits in plain English and their impact on claims — room-rent caps, disease sub-limits and proportionate deduction. Use it to avoid nasty claim surprises. For the whole policy, use the Policy Plain-English Summary.

Premium Audit Defense

Premium Audit Dispute Letter

Drafts a formal letter disputing an insurer premium-audit finding — with your arguments, evidence checklist and escalation path. Use it when an audit wrongly inflates your premium. To first check the auditor's maths, use the Audit Worksheet Reviewer.

Audit Worksheet Reviewer

Reviews an insurer premium-audit worksheet for errors in exposure basis, classification, rate and computation, with the total overcharge and dispute grounds. Use it when an audit raises your premium. To then dispute, use the Premium Audit Dispute Letter.

Payroll / Exposure Reconciliation

Reconciles the exposure base (payroll/turnover) an insurer auditor used against your actual records and flags over-statement with the premium impact. Use it to prove the audit over-counted exposure. To draft the dispute, use the Premium Audit Dispute Letter.

Class-Code Dispute Builder

Builds a classification dispute case to move roles to the correct, lower-risk rating class, with evidence and the expected savings. Use it to correct a costly misclassification. To first identify it, use the Payroll Classification Reviewer or Workers Comp Class Code Audit.

Regulatory Compliance

Insurance Regulatory Compliance Checklist

Produces an IRDAI compliance checklist for an insurance entity — licence requirements, ongoing obligations with frequency and penalties, key regulations and prohibited activities. Use it to stay compliant as an intermediary/insurer. For licensing steps, use the IRDAI Agent / Broker Licensing Guide.

IRDAI Agent / Broker Licensing Guide

Guides IRDAI licensing for insurance agents/brokers — eligibility, exam/training, application, renewal and continuing-education cycle. Use it to get licensed. For ongoing obligations after licensing, use the Insurance Regulatory Compliance Checklist.

POSP Onboarding Compliance

Outlines POSP (Point of Sale Person) onboarding compliance under IRDAI — eligibility, the 15-hour training and exam, products allowed and the principal's obligations. Use it to onboard POSPs at scale. For the sponsoring entity's own compliance, use the Insurance Regulatory Compliance Checklist.

Policyholder Grievance Process

Designs an IRDAI-aligned policyholder grievance redressal process — Grievance Officer, turnaround times, IGMS/Bima Bharosa integration and Ombudsman escalation. Use it to build a compliant grievance mechanism. For the entity's broader obligations, use the Insurance Regulatory Compliance Checklist.

AML / KYC for Insurance

Outlines AML/KYC obligations for insurance under PMLA and IRDAI guidelines — CDD, risk categorisation, monitoring, STR/CTR reporting and record-keeping — with high-risk flags. Use it to build an AML program. For broader compliance, use the Insurance Regulatory Compliance Checklist.

Web-Aggregator / Outsourcing Compliance

Outlines IRDAI compliance for web aggregators / digital insurance distribution and outsourcing — registration, display norms, lead handling and outsourcing rules. Use it for an online insurance platform. For general obligations, use the Insurance Regulatory Compliance Checklist.

Product Filing (UIN) Guide

Outlines IRDAI product filing — the Use-and-File vs File-and-Use route by line, documentation, UIN allotment and timeline — for a new insurance product. Use it to understand the filing route. Actuarial and legal input is required alongside.

Renewal Management

Renewal Preparation Report

Drafts a renewal narrative and updated schedule of values for underwriter review — covering risk quality, changes since last year and loss history, with negotiation points. Use it to prepare a commercial renewal. To build negotiation leverage, use the Renewal Negotiation Brief.

Loss-Run Analysis

Analyses a loss run — loss ratio, frequency, severity and trend — and its renewal implications with improvement levers. Use it to understand your renewal outlook. For a fair-premium view, use the Premium Benchmarking tool.

Premium Benchmarking

Assesses whether a renewal premium is fair given the risk, claims and market, and suggests negotiation options. Use it to sanity-check a renewal quote. To turn it into leverage, use the Renewal Negotiation Brief.

Renewal Negotiation Brief

Builds a renewal negotiation brief — leverage points, benchmarks, target asks and BATNA — for an insured or broker. Use it to negotiate a renewal down. To judge if the quoted premium is fair first, use the Premium Benchmarking tool.

Renewal Reminder Calendar

Builds a renewal reminder calendar with lead-time actions to prevent lapses across your insurance portfolio, noting continuity impacts (waiting periods, NCB). Use it to avoid missed renewals. For upgrade ideas at renewal, use the Coverage Upgrade Recommender.

Coverage Upgrade Recommender

Recommends sensible coverage upgrades/add-ons at renewal — higher sum insured, super top-up, restoration, riders — with cost-benefit and priority. Use it to decide what to add at renewal. For a full personal review, use the Personal Insurance Portfolio Review.

Benefit Recovery

Unclaimed Life Insurance Guide

Gives step-by-step guidance to locate and claim unclaimed life insurance — using the IRDAI Unclaimed Amounts portal, insurer databases and LIC search — including the nominee/legal-heir claim process. Use it to trace a deceased relative's or lapsed policy. For a death-claim file, use the Death Claim Documentation Builder.

Lapsed Policy Revival Guide

Guides reviving a lapsed life-insurance policy — the revival window, arrears and interest, health declaration and special revival schemes. Use it to bring a lapsed policy back. To trace a policy you cannot find, use the Unclaimed Life Insurance Guide.

Maturity / Survival Benefit Claim

Guides claiming maturity/survival benefits on a life policy — discharge form, documents, timeline and the tax position under Section 10(10D). Use it as a policy matures. For a death claim, use the Death Claim Documentation Builder.

Death Claim Documentation Builder

Helps a nominee assemble a life-insurance death claim file — documents, process and the Section 45 / 3-year scrutiny note — sensitively. Use it to claim after a policyholder's death. If the policy cannot be found, use the Unclaimed Life Insurance Guide.

Nominee / Assignment Dispute Guide

Explains nominee vs legal-heir rights and how to resolve a life-insurance beneficiary dispute — beneficial nominee, MWP Act and assignment overriding nomination. Use it when heirs dispute the nominee. Contested cases still need a lawyer.

EPF / EPS Pension Claim Guide

Guides EPF withdrawal and EPS pension claims — the online UAN process, forms (10D/19/10C), pension eligibility and documents, including family claims after death. Use it to claim PF/pension benefits.

Agency Contracts

Agency & MGA Contract Review

Reviews an agency/MGA/carrier/TPA agreement, extracting key commercial terms with risk ratings, red flags, missing protections and negotiation priorities. Use it before signing a carrier or MGA contract. For a producer/sub-agent agreement, use the Producer Agreement Reviewer.

Producer Agreement Reviewer

Reviews a producer/sub-agent agreement, flagging commission, ownership-of-expirations, termination, non-solicit, chargeback and liability terms. Use it before signing a producer/sub-agent contract. For a carrier/MGA agreement, use the Agency & MGA Contract Review.

TPA Agreement Reviewer

Reviews a TPA agreement — service levels, claim TAT, fees, DPDPA data/privacy, liability, audit rights and termination — flagging weak terms. Use it before signing with a TPA. For a carrier/MGA agreement, use the Agency & MGA Contract Review.

Reinsurance Treaty Summary

Summarises a reinsurance treaty in plain English — type, retention, cession, limits, commissions and exclusions. Use it to quickly understand a treaty. Actuarial/legal review is still needed for the binding terms.

Carrier Appointment Checklist

Produces a carrier appointment/onboarding checklist for an intermediary — agreement, licensing, KYC, systems and commission schedule — with watch points. Use it when getting appointed with a new insurer. To scrutinise the commission schedule, use the Commission Schedule Analyzer.

Commission Schedule Analyzer

Analyses a carrier commission schedule — by product, new vs renewal, overrides and clawbacks — and flags the important terms and best-value lines. Use it before signing a carrier appointment. For the onboarding checklist, use the Carrier Appointment Checklist.

Client Advisory

Client Insurance Review Report

Produces a client coverage review for an agent/broker — adequacy assessment, gaps with priority and premium range, cross-sell opportunities and talking points for the review meeting. Use it to prepare a client review. For a whole book, use the Cross-Sell Opportunity Finder.

Cross-Sell Opportunity Finder

Identifies cross-sell/upsell opportunities across your client book with rationale, pitch angles and priority, plus a campaign idea. Use it to grow a book. For a single client's review, use the Client Insurance Review Report.

Risk Profile Questionnaire Builder

Builds a client risk-profiling questionnaire — across assets, operations, people, liability, cyber and financial — that surfaces insurance needs, with scoring guidance. Use it to profile clients systematically. To turn answers into a proposal, use the Coverage Recommendation Report.

Coverage Recommendation Report

Produces a tailored coverage recommendation report for a client — prioritised covers with limits and rationale, phasing and an indicative budget. Use it to advise a client on what to buy. To turn it into a client-facing quote comparison, use the Insurance Proposal Generator.

Insurance Proposal Generator

Generates a professional client-facing insurance proposal — needs, recommended cover, an options comparison across insurers and next steps. Use it to present quotes to a client. To first decide the recommended program, use the Coverage Recommendation Report.

Client Renewal Advisory

Drafts a client-friendly pre-renewal advisory note — what is changing, recommendations and actions needed. Use it to advise a client ahead of renewal. To build the insurer negotiation behind it, use the Renewal Negotiation Brief.