

Agency back-office automation checklist

Twenty-eight questions across certificates, policy checks, carrier paperwork, compliance and the places a person must stay in the loop. Tick what is true today. Every blank box is a place to look for the first workflow worth automating, with us or without us.

1 Certificates of insurance

- ☐ Every certificate request arrives in one place, not scattered across inboxes and phone messages.
- ☐ The holder name, address and wording requirements are stored once and reused, not retyped.
- ☐ Each holder has a template, and the template matches the limits and endorsements on the current policy.
- ☐ Additional insured and waiver wording is checked against the policy forms before a certificate goes out.
- ☐ There is a log of what was sent, to whom and when, that anyone on the team can search.
- ☐ Renewals trigger re-issued certificates for holders who need them, without waiting for a request.

2 Policy checks

- ☐ The issued policy is compared to the binder and the application, line by line, on every new and renewal policy.
- ☐ Limits, deductibles and named insureds are checked against what the client agreed to.
- ☐ Endorsements are tracked from request to issuance, and nobody has to remember to chase them.
- ☐ Coverage gaps and exclusions are flagged for a licensed person, not discovered at claim time.
- ☐ Premium changes at renewal are compared to expiring and the variance is explained before the client is called.
- ☐ Differences between versions of the same policy are highlighted rather than found by reading both.

3 Carrier paperwork

- ☐ Downloads from carrier portals run on a set cadence, not whenever someone has a spare hour.
- ☐ Each downloaded document is matched to the right client and policy automatically or with one check.
- ☐ Files follow a naming convention that someone outside the team could follow.
- ☐ Documents are attached to the record in your agency management system, not left in a downloads folder.
- ☐ Cancellation notices, audits and endorsement confirmations land in a queue with an owner and a due date.
- ☐ When a carrier portal changes, someone is told what broke instead of finding out a week later.

4 Compliance and audit trail

- ☐ You can show who approved each client-facing document, when, and what they were looking at.
- ☐ The points where an error could become an E&O claim are written down and each has a second pair of eyes.
- ☐ Document retention follows your state's rules and is applied the same way every time.
- ☐ Access to client files is limited by role and reviewed on a schedule.
- ☐ Anything that touches client documents is covered by a written data agreement.

5 Where a human must stay in the loop

- ☐ Coverage decisions and recommendations are always made by a licensed person, never by a system.
- ☐ Anything sent to a client, a holder or a carrier is seen by a named approver first.
- ☐ Exceptions, odd requests and anything the system is unsure about go to a person with the source documents attached.
- ☐ Staff can reject or amend a draft in one step, and the change is recorded.
- ☐ Your E&O carrier or counsel has seen how the review step works.

How to use this: pick the section with the most blank boxes and the highest weekly volume. That is usually where the first automated workflow pays for the time it takes to build. Automation here drafts and compares; your licensed staff approve.