

[Date]

[Client Name]

[Client Address]

[City, State, Zip Code]

**Subject: Annual Workers' Compensation Policy Evaluation and Coverage Gap Analysis**

Dear [Client Contact Name],

We have completed the annual evaluation of your Workers' Compensation insurance policy (Policy #[Policy Number]). The purpose of this review is to ensure your classification codes are accurate, your payroll estimates align with current operations, and to identify any potential gaps in coverage.

**1. Policy Summary**

Current Carrier: [Carrier Name]

Policy Period: [Start Date] to [End Date]

Experience Modifier: [X.XX]

**2. Payroll and Classification Review**

Based on our review of your current staffing, we have noted the following:

- Current Estimated Annual Payroll: \$[Amount]

- Primary Class Codes: [List Codes]

[Identify any discrepancies found here, e.g., "The administrative payroll appears underestimated based on recent hires."]

**3. Identified Coverage Gaps and Recommendations**

During our analysis, we identified the following areas where your business may be exposed:

- **Subcontractor Certificates:** [Status/Action Needed]

- **Waiver of Subrogation:** [Status/Action Needed]

- **Multi-State Exposure:** [Status/Action Needed]

- **Employers' Liability Limits:** [Status/Action Needed]

**4. Action Required**

To ensure your coverage remains adequate and to avoid unexpected additional premiums during your year-end audit, please review the attached summary. We recommend the following adjustments:

- [Recommendation 1]

- [Recommendation 2]

Please contact us by [Date] to discuss these findings or to implement the recommended changes.

Sincerely,

[Agent Name]  
[Agency Name]  
[Phone Number]  
[Email Address]