

## **Policy on Open Architecture on Insurance as Corporate Agent**

### **1. Background**

The purpose of this Policy is to define a framework for solicitation and servicing of insurance business and to define a control structure for supervision of these activities. This Policy shall also lay down the factors that need to be considered for adoption of the philosophy of Open Architecture as envisaged in Insurance Regulatory and Development Authority of India (IRDAI) (Registration of Corporate Agency Regulations), 2015 (hereinafter referred as "Regulations"), in line with the mission, vision and business strategy of KLM Axiva Finvest Limited (Company)

### **2. Insurance Arrangements**

The Company wishes to leverage upon the new concept of open architecture proposed by the insurance regulator and build relationships with well-known & customer centric Life Insurance Companies, General Insurance Companies & Health Insurance Companies for soliciting and promoting insurance business PAN India to its existing as well as new customers

### **3. New Open Architecture Policy on Insurance**

For the purpose of soliciting, procuring and servicing of insurance business of life insurers, general insurers and health insurers, the Company may make multiple corporate arrangements insurers in each sector as allowed by IRDAI. The senior management is authorised to decide about the number of corporate arrangements in each sector within the IRDAI guidelines. All corporate arrangements in insurance business is to be registered with IRDAI. Proper application form along with application and registration fee shall be submitted. The existing corporate arrangements also to be registered with IRDAI as per the guidelines. Any change in the arrangement with the insurance companies shall be done only with the prior approval of IRDAI. To have a high persistence level in premium collection, we have to follow up the premium payment by contacting each policy holder by telephone or E mail.

The Company shall conduct insurance business under Life Insurance, General Insurance and Health Insurance in a transparent, customer centric and need based - ethical solutions. The objective of the open architecture is to ensure that all Corporate Agents should solicit, procure and service insurance business to the general public in a timely and effective manner.

### **4. Insurance Partners**

Considering the scope of business and the opportunities available in the market, the Company will have the tie up with:

1. Maximum of Nine Life Insurers
2. Maximum of Nine Non Life Insurers



3. Maximum of Nine stand alone Health Insurers

**5. Criteria/parameters for selection of Insurance partners:**

- Market Size & Industry Growth Rates
- Market Share of existing players
- Product portfolio
- Product pricing
- Claim Settlement rates
- Grievance redressal establishment
- Payment of Maturity
- Claim settlement process (internal/external)
- Customer service experience
- Manpower support for business
- Retention ratios & process
- Unique customer Propositions
- Marketing supportBalance sheet/Profitability
- Growth rates
- Existing Market Share
- Brand Strength

**6. Records to be maintained:**

The Company shall maintain all records and furnish periodic reports/ returns to IRDAI as prescribed under the Regulations.

The Company shall provide all such information with the insurer, as may be required in relation to the insurance business undertaken by the Company.

- The Company shall maintain all records and furnishing periodic reports/returns to IRDAI as prescribed under the Regulations including KYC records of the clients, copy of proposal form, customer register, complaint register, SP/ PoSP register etc.
- The Company shall share all such information with the insurer, as may be required by regulator in relation to the insurance business undertaken by the Company.
- Copies of the correspondence exchanged with the Authority (IRDAI) shall be kept on record.
- The Company has to maintain records in the format specified by the Authority which shall capture policy-wise and SP/ PoSP -wise details wherein each policy solicited by the Company is tagged to the SP/ PoSP.
- The records can be maintained in electronic form as specified by Authority.
- All the books, records and documents maintained by the Company will be made available for inspection in case required by Authority or any of the insurers
- The Company shall submit periodical returns to IRDAI as specified by the Authority from time to time including half yearly submission of insurer wise business placed for Life, General & Health Insurers.



## 7. Redressal of Grievances

Company's customer grievance redressal mechanism would also involve handling of insurance related grievances. All grievances shall be addressed within the timelines as stipulated under the applicable regulations and adequate steps shall be taken for redressal of grievance of the policy holders. The details of grievances shall be reported in the format and manner specified by IRDAI.

Under grievance redressal mechanism, customer will be allowed to approach any of the offices of the Company to register a complaint. The offices of the company where complaints related to insurance products sold by the company are received, will acknowledge the complaint and facilitate redressal of the same within 14 days of the receipt of such complaint.

### **If a customer wants to make a compliant:**

#### **Step I.**

He/she can write to:

➤ Email at: <a href="mailto:thirdpartyproducts@klmaxiva.com">thirdpartyproducts@klmaxiva.com</a> / <a href="mailto:kk.shibu@klmaxiva.com">kk.shibu@klmaxiva.com</a>
➤ Call on Landline Number: 04844281166/161/162
➤ Third Party Products Department
KLM AXIVA FINVEST LIMITED, Corporate Office, KLM Grand Estate, Bypass Road, Edappally Ernakulam, Kerala - 682024
➤ He/ She can even approach the Company's branch where they have obtained the Policy from. (The letters/emails received by the branch to be sent to Third Party Products Department by an email within 2 days to the Company)
➤ The customers can alternatively contact the insurer directly.

#### **Step II.**

- If the resolution received by the customer does not meet the expectation, or has not received any response within 10 days from the date of raising the compliant, he/she can escalate the compliant to the Principal officer and the Principal Officer / Third Party Products Department shall also escalate and follow up with the insurer company for providing speedy resolution.

#### **Step III.**

If the customer is still not satisfied with the resolution received, he/she can to write to our CEO at [CEO@klmaxiva.com](mailto:CEO@klmaxiva.com) on day 11.



**Step IV.**

If customer is not satisfied with the reply provided by CEO, then he/she can write to the concerned insurance companies by obtaining the contact details from the website.

The Insurer & the Company will mutually co-ordinate for end to end closure of complaints raised and resolve with fair resolution to the Policy Holder within the above said 14 days. The Complaint register will be maintained by the Company and will be made available to IRDAI as and when demanded.

**Step V.**

In-case the customer is not satisfied with the resolution provided by the insurer/Company, at any point of time he/she can:

- Escalate the complaint online through Bima Bharosa Portal by logging into <https://bimabharosa.irdai.gov.in/>

Once the complaint is registered in to Bima Bharosa Portal, then details of complaint are passed on to respective insurance companies. Policy holder receives the confirmation email after registering the complaint along with IRDAI token no which helps in tracking of the complaint through Bima Bharosa Portal.

- or Call: Toll Free Number 155255 or 1800 4254 732

- or Email to [complaints@irdai.gov.in](mailto:complaints@irdai.gov.in)

- or write to General Manager, Insurance Regulatory and Development Authority of India (IRDAI), Policyholder's Protection & Grievance Redressal Department - Grievance Redressal Cell. Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad - 500 032.

**Step VI.**

In rare cases, in case the customer is not happy with the resolution provided by the above, then he/she may be guided to the Insurance Ombudsman.

**8. Designated Officials**

"Principal Officer" of a Corporate Agent means a director or a partner or any officer or employee so designated by it, and approved by the Authority, exclusively appointed to supervise the activities of Corporate Agent and who possesses the requisite qualifications and practical training and has passed examination as required under these Regulations.

"Specified Person" means an employee of a Corporate Agent who is responsible for soliciting and procuring insurance business on behalf of a corporate agent and shall have fulfilled the requirements of qualification, training and passing of examination as specified in these regulations.



## 9. Business Mix

The Company will continue to review along with its insurance partners about the best products that could be offered to its customers. The main focus of the Company shall be on retail and where it can provide best services and excellent customer experience.

## 10. Type of Insurance Products to be sold & serviced

The Company will solicit and service all types of products as stated below in Life, General and Health insurance segments subject to the compliance of IRDAI regulations and in line with agreements with various Insurers in this regard.

The Company would sell below listed categories of insurance products to its customers.

Category of Business	Type of products
Life	Protection plans, Annuity plans, Pension plans, investment plans like endowment, Unit Linked plans, etc. and a selection of riders attachable to the policies (individual and group, both)
General	Motor, Home Insurance for Individuals, Aviation, Fire, Marine, Construction & Engineering, Liability(individual and group, both)
Health	Health, personal accident, Group Health, Group Personal.

## 11. Manner of Soliciting and Servicing Insurance Products

### a. Solicitation

- Insurance shall be solicited only by the employees having a valid certificate issued by IRDAI
- The prospect/customer will not be compelled to buy an insurance product being offered along with the Company's products.
- Insurance product shall be offered on the basis of need analysis and financial assessment of the customer.
- All requisite information as per IRDAI regulation in respect of the insurance product being offered, shall be disseminated to the prospect/customer as also the list of insurers with whom the Company has arrangements to distribute the products.
- The Company shall endeavor to consistently enhance the skills of our SP/ PoSP and also increase the number of SP in line with business and customer requirements.
- The Specified person license is valid for a period of three years and the license is renewal regularly by the Company
- The Company shall issue a No Objection Certificate to the SP in case the SP resigns and wishes to switch over to another Corporate Agent

Sale of Insurance by tele-marketing mode and distance marketing activities.



- The Company can engage the services of a telemarketer or engage in distance marketing activities for the purpose of distribution of insurance products
- For the purpose of distribution of insurance products by tele-marketing mode and distance marketing activities, Company shall follow the instructions as laid down in Schedule VII as per the Regulation

**b. Servicing**

The Company is committed to service its customers during the entire period of the contract in accordance with the procedure defined and implemented by the Principal Officer.

Servicing of policies would include aspects like:

- assisting in payment of premium in accordance with Section 64VB of the Insurance Act, 1938,
- providing necessary assistance and guidance in the event of a claim,
- providing all other services and guidance on related issues,
- handling of customer requests, complaints and queries
- The above services will be met through service level agreement with Insurers for smooth operation.

**12. Policy and Interpretations**

The Company shall endeavor to reinforce the internal control system so that it can make appropriate solicitation in compliance with any laws and regulations that relate to the business and operations of the insurance related activities of the Company.

- The Company intends to provide customers with appropriate information through need analysis so that customers can conduct transactions with the Company with complete information and his/her own judgment.
- Upon adoption of this policy, all present arrangements and processes related to insurance business related activities such as solicitation, servicing, grievance management etc. shall be reviewed and either reaffirmed or discontinued, as the case may be.
- The above constitutes the entire policy on solicitation, servicing, grievance management, claims management and open architecture adopted by the Company. This policy shall be administered by the Principal Officer of the Company and owned by Sales & Distribution department.
- Interpretations of the above shall be the responsibility of the Principal Officer of the Company.

**13. Remuneration**

The Company shall receive or contract to receive remuneration from an insurance Company only in accordance with the Regulations notified by IRDAI in this regard from



time to time and shall disclose remuneration received from insurers as required under the Regulations.

None of the employees of the Company including designated Principal Officer and employee holding a valid certificate issued by IRDAI to act as Specified person, shall receive or contract to receive any incentive (cash or non cash) from any of the insurance companies.

#### **14. Review**

The policy will be reviewed for its effectiveness on an ongoing basis and be amended as required in case of change in regulatory requirements.



*Approved by the Board of Directors on February 08, 2024*  
*Reviewed by the Board of Directors on December 19, 2024*