Specialty Benefits

Group Products
Underwritten by Dearborn Life Insurance Company

Third Party Administrator Questionnaire

Administrative Offices: Lombard, Illinois I Richardson, Texas

1.	Name of the Entity:
2.	Address of the Entity: Address: / City: / State: / Zip:
3.	Primary Contact Information
	Name: / Title:
	Address: / City: / State: / Zip:
	Email: / Phone: / Fax:
	Secondary Contact Information
	Name: / Title:
	Address: / City: / State: / Zip:
	Email: / Phone: / Fax:

4.	Tax ID Number of the Entity:	5.	State of domicile of Entity:	6.	Formal structure of the Entity (i.e., S-Corp, C-Corp, Partnership, etc.):	7.	State of incorporation:

8.	Is Entity owned in whole or in part by another business entity or is Entity a stand alone company?
9.	What percentage of Entity business is administrative support? (i.e. are Entity TPA capabilities a primary or secondary business of corporation) %
10.	In what states does Entity administer business?
11.	Is Entity licensed as a TPA in each state that it administers business? ☐ Yes ☐ No If not, please explain:
12.	Has Entity TPA license been revoked or put in probationary status, in any state, in the past 10 years? ☐ Yes ☐ No If yes, please explain and state current status:
13.	Does Entity post a bond? ☐ Yes ☐ No If so, please describe type, amount and issuer:
14.	Who are your general liability, excess liability and E&O carriers? (Please provide certificates of insurance)
15.	What insurance carriers does Entity perform administrative services for?
16.	What is the Entity target market for administrative services?
17.	How many employers and members does Entity administer?
18.	What lines of coverage does Entity administer?
19.	How long has Entity supported Life, Disability and Dental lines of coverage? Life____________ Disability____________ Dental____________
20.	How much premium does Entity handle on a monthly, quarterly, or annual basis for all TPA-related duties and functions for groups Entity administers specific to Life, Disability and Dental lines of coverage?

21.	What TPA functions does Entity perform? (Check all that apply) ☐ Membership Changes / Additions ☐ Premium Collection ☐ Term for Non-Payment of Premium ☐ Delinquency Notices ☐ Eligibility Determinations ☐ Commission Payments ☐ Prep and Mailing of Schedule A ☐ Reinstatements ☐ Renewals ☐ Claims Receipt ☐ Notification of Approval/Denial ☐ Delivery of Certificates ☐ Privacy Notices / Record Keeping ☐ Eligibility Determinations ☐ Field Underwriting ☐ Producer Contracting ☐ Other
22.	State the functions you will perform on behalf of Dearborn Life Insurance Company: ☐ Membership Changes / Additions ☐ Premium Collections ☐ Term for Non-Payment of Premium* ☐ Delinquency Notices ☐ Eligibility Determinations ☐ Commission Payments ☐ Prep & Mailing of Schedule A Info* ☐ Reinstatements* ☐ Renewals ☐ Claims Receipt ☐ Notification of Approval/Denial* ☐ Delivery of Certificates ☐ Privacy Notices / Recordkeeping* ☐ Other________________________ *For all asterisked items, please provide copies of notices, policies and procedures and any other documents.*
23.	Describe the process for identifying and communicating with delinquent groups.
24.	Does Entity charge the certificate holder or group any fees for Entity-related duties and functions? ☐ Yes ☐ No If so, please explain:
25.	Describe the process for remitting full file data and eligibility feeds with specificity as to how Entity manages and accounts for employee additions and deletions (i.e. electronic or manual process).
26.	How does Entity provide census information, i.e. format and frequency?
27.	Will Entity send feeds: ☐ weekly for dental ☐ monthly for life and disability
28.	Describe your data security transmission process:
29.	Is Entity able to send 834 file feeds and is the format currently Anxy 5010 compliant? ☐ Yes ☐ No If Entity is not Anxy 5010 compliant, what is the target date for meeting this regulatory requirement?
30.	Does Entity have a formal training process for new employees relative to the TPA duties the Entity will be performing on behalf of Dearborn Life Insurance Company? ☐ Yes ☐ No If so, please describe.
31.	Do written desk procedures exist for all TPA duties the Entity will be performing on behalf of Dearborn Life Insurance Company, for example, billing, membership administration, premium remittance and commissions?☐ Yes ☐ No If so, please describe.
32.	Describe Entity's policies and procedures for: Privacy Notifications, Disaster Recovery, Security of Customer Information, Record Retention (attach additional sheet if necessary).

33.	If Entity takes receipt of premium, would you maintain a fiduciary account on behalf of Dearborn Life Insurance Company? ☐ Yes ☐ No If so, please name the financial institution(s) where the account(s) would be maintained.
34.	Are other funds co-mingled or placed in the fiduciary account?
35.	Describe how Entity reconciles monthly premium including, if applicable, how monies are withheld and accounted for if premium is remitted net of fees?