

## How to Get the Best Quote

To receive the best quote available for all policyholders, please provide (1) the nature of the business, (2) the SIC code and (3) the current booklet, or plan summary if booklet is unavailable, at the time of the quote.

### Required Data Elements for 51+ Employer Groups

|                              |   |
|------------------------------|---|
| <b>Basic Life</b>            | <ul style="list-style-type: none"> <li>• Census with gender, date of birth, class indicator if applicable and salary if a salary-based plan is requested</li> <li>• Plan design and requested benefits, including current certificate booklet for in-force coverage (includes employer contributions)</li> <li>• Premium and claim experience for the last 60 months with monthly enrolled lives (groups over 500 lives)</li> </ul>                       |
| <b>Voluntary Life</b>        | <ul style="list-style-type: none"> <li>• Census with gender, date of birth, current participation with benefit amount for employee and dependent</li> <li>• Plan design and requested benefits, including current certificate booklet for in-force coverage (includes employer contributions)</li> <li>• Prior carrier bill</li> <li>• Premium and claim experience for the last 60 months with monthly enrolled lives (groups over 500 lives)</li> </ul> |
| <b>Short-Term Disability</b> | <ul style="list-style-type: none"> <li>• Census with gender, date of birth, salary, class indicator if applicable and employee zip code</li> <li>• Plan design and requested benefits, including current certificate booklet for in-force coverage (includes employer contributions)</li> <li>• Premium and claim experience for the last 36 months with monthly enrolled lives (groups over 100 lives)</li> </ul>  |
| <b>Long-Term Disability</b>  | <ul style="list-style-type: none"> <li>• Census with gender, date of birth, occupations, salary, and class indicator if applicable</li> <li>• Plan design and requested benefits, including current certificate booklet for in-force coverage (includes employer contributions)</li> <li>• Premium, claims and reserve experience with current valuation date and monthly enrolled lives for the last 60 months (groups over 500 lives)</li> </ul>        |
| <b>Critical Illness</b>      | <ul style="list-style-type: none"> <li>• Census with gender and date of birth</li> <li>• Employer contribution level</li> <li>• Current plan design</li> </ul>  |
| <b>Accident</b>              | <ul style="list-style-type: none"> <li>• Census with gender and date of birth</li> <li>• Employer contribution level</li> <li>• Current plan design</li> </ul>  |

Dearborn Life Insurance Company's group insurance products are offered as Specialty Benefits in cooperation with Blue Cross Blue Shield of Michigan.

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## Where to Submit Proposal Requests

Proposal requests can be submitted via email to [GSB\\_RFPS@groupspecialtybenefits.com](mailto:GSB_RFPS@groupspecialtybenefits.com).

To receive the best proposal for existing coverage, please include the following:

- Census in Excel format with password (if protected)
- Current rates, renewal rates and rate history
- Participation on census
- Current carrier bill
- Current and requested commissions

**If you have any questions about how to get the best quote, please contact your specialty benefits representative at Blue Cross Blue Shield of Michigan.**