Broker Document Review Checklist

Broker Name: Contact Name:			Telephone Number:	
		Contact Email:		
Document t	o be			
reviev	wed:		_	
Document num	ber:			
*Please indic	ate location in document where citation	can be found, if i	none, indicate N/A here	
Г	IDOI USE OI	NI V		
	Review:	NLI		
	Original document(s)	Yes	No	
	Red-lined copy(s) New copy(s)	Yes Yes	No No	
	Does form meet regulation guidelines?	Yes	No No	
	Are there any items in question?	Yes	No	
	Comments:			
	Approved:			
	Admission Coordinator		Date	
	Admission Coordinator		Date	
of application		shan disclose the following	lowing information to the viator not later than the date	
	le alternatives to viatical settlement contracts, i ace policy.	ncluding accelerated	I benefits offered by the issuer of the life	
(2) Tax co	onsequences that may result from entering into	a viatical settlement	contract.	
	le interruption of assistance provided by medic al settlement contract.	al or public assistanc	ce programs as a consequence of entering into a	
(4) The vi	ator's right to rescind a viatical settlement cont	ract within rescission	n period	
(5) The an	nount of any fees paid by a viatical provider to	a broker.		
(6) A state	ement that proceeds of the viatical settlement co	ould be subject to cla	aims of creditors.	
	ement that a contract may cause other rights or um benefits, family riders, or coverage of a life			
(8) Proced	lures for method of contact. (ex US Mail)			
	ne proceeds of the viatical settlement will be tra nent provider's receipt.	ansferred to the viato	r within two (2) business days after the viatical	
(10) A star by a ident betwo	tement containing the following language: "All viatical settlement provider or viatical settlement ity of family members, a spouse, or a significate een the viator and the viatical settlement provides."	nt broker about an in nt other may be discl- ler. If you are asked rovided to someone	nsured, including the insured's identity or the osed as necessary to effect the viatical settlement to provide this information, you will be asked to who buys the policy or provides funds for the purchase	
(11) That health	the insured may be contacted by the viatical set h status of the insured one time every three more ear or one time every month for an insured with an insured must be made by mail unless the par	ttlement provider or nths for an insured w	viatical settlement broker to determine the vith a life expectancy of more than f not more than one year. Contacts made	

Form VB-4-2014 Page **1** of **2**

2.)	IC 27-8-19.8-23 (d) Broker
	A viatical settlement broker shall disclose to the viator, conspicuously displayed in the viatical settlement contract or in a separate document signed by the viatical settlement broker and the viator before a viatical settlement contract is signed, the amount and method of calculation of the viatical settlement broker's compensation.
3.)	760 IAC 1-61-3(b) Broker
	A viatical settlement broker is deemed to represent only the viator's interests and shall owe a fiduciary duty to the viator to act according to the viator's instructions and in the viator's best interests.
4.)	760 IAC 1-61-3 (c) Broker
	A viatical settlement broker may not seek or obtain any compensation from the viator without the written agreement of the viator obtained before the broker performs any services in connection with the viatical settlement transaction.
(5.)	760 IAC 1-61-7 (3) Disclosure forms (Rights & Benefits)
	The disclosure shall specifically address at least the following rights and benefits if available under the insurance policy. a) Guaranteed insurability options b) Accidental death or accidental death and dismemberment benefits c) Disability income or loss of income protection d) Conversion rights e) Waiver of premium benefits f) Family, spousal, or children's riders or benefits, and any other comparable coverage for a life other than the insured's.
6.	760 IAC 1-61-7 (4) Disclosure forms (Health status)
	The disclosure form shall set forth the procedures for contact with the insured in compliance with IC 27-8-19.8-24.9. The disclosure form shall contain a statement that contacts for the purposes of determining the health status of the insured must be made by mail unless the parties agree to another method. If the insured agrees to contact by a method other than mail, the alternative method or methods of contact must be included in the contract.
7.	760 IAC 1-61-7 (5) Disclosure forms (Personal information)
	The disclosure form shall contain the following or substantially similar language "All medical, financial, and personal information solicited or obtained by a viatical settlement agent, broker, or provider about a viator and an insured, including the identity of the viator and insured and the identity of their family members or significant other, is confidential. The information shall not be disclosed to any person unless disclosure is:
	(A) Necessary and the viator and insured have provided written consent to the disclosure(B) Provided in response to an investigation or examination by the commissioner or other governmental officer or agency.(C) In connection with a transfer of the contract or policy to another licensed provider or entity that provides financing to the contract under a written agreement with the provider."
(8.)	760 IAC 1-61-7 (6) Disclosure forms (Financial protection)

- The disclosure form shall contain the following or substantially similar language: "Your insurance policy provides financial protection to your beneficiaries. If you sell your policy to a viatical settlement provider, your beneficiaries will no longer have that protection. Before you sell your policy, you should consider whether that protection is needed. Other financial options may be available to you. Consult your financial advisor or insurance company for more information.
- **9** 760 IAC I-61-10 (f) Advertising
 - (1) Advertising related to the viatical settlement shall be truthful and not misleading by fact or implication.
 - (2) If the advertiser emphasizes the speed with which the viatication will occur, the advertising must disclose the average time frame from completed application to the date of offer and from acceptance of the offer to receipt of the funds by the viator.
 - (3) If the advertising emphasizes the dollar amounts available to viators, the advertising shall disclose the average purchase price as a percent of face value obtained by viators contracting with the advertiser during the previous six (6) months.

Form VB-4-2014 Page **2** of **2**