BHINI Network Survey

1.	Your Company:
2.	In how many states are you licensed? (select one)
	1-10
	11-20
	21-30
	31-40
	41-50
3.	List your top three (3) states for revenue:
4.	What CRM do you use?
5.	Approximately what % of your company's income is generated by the following:
	Medicare:
	ACA:
	Life:
	Annuity:
	Employee Benefits:
	Ancillary:
6.	Have you participated in the Direct Health Walmart program within the last two years? (YES/NO)
7.	If yes, approximately how many stores did you staff?
8.	Do you staff other retail stores? (YES/NO)
9.	If yes, for what carrier/s?
10.	Approximately what percentage of your profit can be attributed to the following ancillary
	products?
	Critical Illness:
	Disability Income:
	Short Term:
	International medical:
	Dental:
	Other (please specify):
11.	About which markets do you want to know more and/or would consider starting to sell?
12.	What type of employee benefits do you sell? (select all that apply)
	None
	Small Group
	Large Group
	Voluntary Benefits
13.	What lead companies do you use?
14.	How much do you budget annually for agent leads? (select one)
	None
	Up to \$20K
	\$20K-\$50K
	\$50K-\$100K
	More than \$100K

15. Please rank in order of in importance (1 being the most important) your motivation for belonging to the Network.

Products

Networking with others in the industry

Knowledge sharing

Other (please specify)

16. Currently, BHINI membership dues are \$3,500 per year. I feel that membership dues are: (select one)

About right

Too high

Should be raised

- 17. Our biannual meetings have been streamlined to two half day sessions. Please provide feedback on the length and/or frequency of the meetings.
- 18. What topics or roundtable discussions would you like to see on the agenda for upcoming meetings?
- 19. Please indicate if you are willing to lead a discussion on a topic or area of expertise.
- 20. Please provide any other comments or feedback you have at this time.