# Humana Workplace Voluntary Benefits

Group Lexington Fayette Urban County Government- Renewal with changes on Term Life offering

for dependents- Group # 850211

Sales Rep Jennifer Rumbaugh/ Robert Wlotko Underwriter Shirley Mixon

Offer Date 09/10/2014 Valid Through 11/10/2014

### **PLAN PROVISIONS**

Policy Humana Whole Life

Policy Form 00455

Availability Only / Not Available in AK, ME or NY

EE Guarantee Issue Amount \$125,000 ages 18-50; \$60,000 ages 51+
Stand-alone Spouse Coverage Contingent Guarantee Issue - Up to \$20,000
Stand-alone Child(ren) Coverage Contingent Guarantee Issue - Up to \$10,000

For child stand-alone coverage Humana Whole Life to age 65 is only plan available. Master application should indicate this

coverage, if elected.

Benefit Waiting Period - 12 month wait on Terminal Illness benefit.

Eligibility 20 hours per week

Number of Eligible Employees 2,701

Participation Requirement Participation will be waived for the 2015 enrollment.

Employer Service Waiting Period Will match the Employer's Service Waiting Period

Issue Ages May vary by product and by riders. Please refer to underwriting

guidelines for specific ages.

### PRODUCT QUALIFICATIONS AND CONTINGENCIES

- Total amount of life coverage cannot exceed 3 times the employee's salary and/or \$300,000.
- Minimum of 5 participants required to set up the product for the group.
- Participation is waived as long as enrollment conditions are met. Participation will be reviewed at next anniversary
  at which time participation is expected to be at least 15% of all eligible employees.

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#### PLAN PROVISIONS

Policy

**Humana Term Life** 

Policy Form

8013

Availability

**KY - Situs** 

EE Guarantee Issue Amount Term Duration

\$125,000 for Ages 18-50; \$60,000 for Ages 51+

10 or 20 Years

- Family Term

Simplified Issue

Spouse -

Contingent Guarantee Issue - Up to \$15,000

Simplified Issue - Up to \$50,000 Not to exceed Employee's amount

Child(ren) -

Contingent Guarantee Issue - Up to \$10,000

Simplified Issue - Up to \$25,000 Not to exceed Employee's amount

Eligibility

20 hours per week

Number of Eligible Employees

2,701

Participation Requirement

Participation will be waived for the 2015 enrollment.

**Employer Service Waiting Period** 

Will match the Employer's Service Waiting Period

Issue Age Rates

10 Term – 18-70 for Employee, 18-60 for Spouse, 14-24 for Child 20 Term – 18-60 for Employee, 18-60 for Spouse, 14-24 for Child

### PRODUCT QUALIFICATIONS AND CONTINGENCIES

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### Producer Agreement

- Develops an enrollment plan ensuring all eligible employees are presented plan benefits:
- Assists Employer with questions related to Humana's insurance plan and administrative practices:
- Provides billing instructions to person designated by the Employer as the plan administrator;
- Reviews account periodically for minimum requirements.
- This offer is valid contingent on the agent having a valid active license with Humana.
- SCA form is not required.

### Employer Agreement

- Makes available Humana's voluntary insurance plan to all eligible employees:
- Agrees to deduct premiums for voluntary insurance plan and remit to Humana in a timely manner.

#### **Enrollment Conditions**

- Mandatory enrollment will be face to face.
- The enrollment will be completed by Star Robbins and Company.
- It is expected that at least 75% of all eligible employees will be seen.

### PROPOSAL QUALIFICATIONS AND CONTINGENCIES

- All eligible employees must be actively at work at the time of enrollment.
- All employees are U.S. citizens or resident legal aliens.
- This offer excludes volunteer, temporary or seasonal employees.
- Unless otherwise noted, the Service Waiting Period will be waived for the initial enrollment.
- If more than one Workplace Voluntary Benefit is offered, participation will be set per product.
- Humana reserves the right to withdraw or modify this offer upon renewal. Factors such as, but not limited to, experience, non-adherence to offer terms or plan design, or availability of contract type could make this necessary.
- This offer may be renewed annually, at Humana's discretion, based on Humana's review of the plan design, persistency and overall success.
- Riders may only be added at issue, not at subsequent renewals.
- If the initial participation is achieved, this offer will be in effect for one year from the date of acceptance.

This offer is valid for a period of 60 calendar days. Applications will not be accepted under this offer until written acceptance of this offer and the Employer Agreement and Participation Request are received in Humana's New Business Department.

EMPLOYER		
	SIGNATURE OF OFFICER AND TITLE	
	DATE	<del></del>
AGENT OF RECORD		
	SIGNATURE OF OFFICER AND TITLE	
	DATE	