

Please refer to your proposal to complete this information.

Plan Selection

Basic Employee Life and Accidental Death and Dismemberment

- Flat Amount—indicate level: \$ _____
- Salary Plan—options are 1x to 6x salary, rounded to the next highest \$1,000. Indicate salary level: _____ x Salary
- Position Schedule—classifications cannot exceed 2.5 times between each class and 10 times between the lowest and highest class.

Class	Description	Benefit Amount / Salary Factor
I	_____	_____
II	_____	_____
III	_____	_____
IV	_____	_____

Options: No AD&D (available only to group size 100+)

Basic Dependent Life: No Yes

If yes: \$10,000/\$5,000 \$5,000/\$2,500
Available only to employees enrolled for Basic Life.

Voluntary Employee Life: No Yes

If yes: AD&D No Yes

Voluntary Dependent Life: No Yes

Available only to employees enrolled for Voluntary Life.

Portability of coverage:

Groups 2-99: Included
Groups 100+: No Yes

Underwriting Requirements

- Basic Life coverage is available to employers with two or more enrolled employees.
- Voluntary life coverage is available to employers with five or more enrolled employees.
- If the only employees of a two-life group are husband and wife, each must enroll separately as an employee and maintain eligibility. The group is only eligible if a bona fide business entity exists.
- Minimum employer contribution toward employee premium is 50%. This minimum does not apply to voluntary coverage.
- Retirees are not eligible for life coverage.
- Excluded class options: hourly, salary, union, non-union, management, non-management.
- If you do not maintain eligibility, underwriting, and participation requirements, we will terminate your coverage.

Basic Term Life participation

- Non-contributory plans—100%
- Contributory plans—75%
- Single medical carrier: You must have 100% participation of all eligible employees for this coverage, regardless of whether they have medical coverage through their spouse for non-contributory plans. For contributory plans, 75% participation required; minimum employer contribution 50%.
- Multiple medical carrier: If you offer more than one medical carrier, you must enroll 100% of those employees who take our coverage regardless of the percentage of contribution paid by you.

Voluntary Term Life participation

- Five employees or 25%, whichever is greater.

Group Information

How much will you contribute to basic life premium? Employee _____% Dependent _____%

Thank you for choosing Humana.