



Humana Life plans

BASIC GROUP TERM LIFE

Available for 2+ size groups. Provides basic coverage to employees while giving them the opportunity to purchase Voluntary Term Life. You can change the amount of basic life coverage once a year, on the anniversary date, by making the request to underwriting.

EMPLOYEE Basic Term Life

Available coverage	<ul style="list-style-type: none"> • Flat amounts in \$1,000 increments • Multiples of salary rounded to the next \$1,000 • Class schedules: No more than 2.5 times between the classes and 10 times between the highest and lowest classes
Minimum	\$15,000
Maximum	Lesser of seven times annual salary or \$1 million, combined with voluntary life.

DEPENDENT Basic Term Life ¹	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6
Spouses ²	\$20,000	\$10,000	\$5,000	\$20,000	\$10,000	\$10,000
Dependent child:						
• Ages 6 months to 26 years	\$5,000	\$2,500	\$1,000	\$10,000	\$5,000	\$10,000
• Ages 15 days to 6 months	\$1,000	\$500	\$500	\$1,000	\$1,000	\$1,000
• Birth through 14 days	No benefit	No benefit	No benefit	No benefit	No benefit	No benefit

- 1) Option 1 & 4 are available for groups with five or more eligible lives. Options 2, 3, 5 & 6 are available for groups with two or more eligible lives.
- 2) Guarantee issue amounts for spouse/children coverage are equal to the benefit selected. Coverage and eligibility terminates at age 70.



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Guaranteed Issue (GI) amounts

Humana guarantees that eligible employees, spouses, and dependent children will receive a specified amount of life coverage without medical underwriting. Amounts vary with the number of full-time eligible employees.

GI amounts default to higher of the two: GI by lives or GI by volume with ability to enter any GI value (with Underwriting approval).

Eligible lives	Guaranteed issue amounts*
2 - 4	Up to \$25,000
5 - 9	Up to \$50,000
10 - 24	Up to \$100,000
25 - 49	Up to \$175,000
50 - 74	Up to \$200,000
75 - 99	Up to \$250,000
100 - 149	Up to \$350,000
150 - 199	Up to \$400,000
200 - 249	Up to \$450,000
250 - 349	Up to \$500,000
350 - 399	Up to \$550,000
400 - 499	Up to \$600,000
500 - 749	Up to \$650,000
750 - 999	Up to \$725,000
1,000 - 1,249	Up to \$812,500
1,250 - 1,499	Up to \$875,000
1,500 - 1,999	Up to \$937,500
2,000 - 2,999	Up to \$1,030,000
3,000 - 3,999	Up to \$1,125,000
4,000+	Up to \$1,250,000

* Group may be eligible for higher GI amount based on premium volume.

Minimum participation requirements

The minimum employer contribution for groups with two or more eligible employees is 50% of premium.

Employer contribution	Participation
100% of premium	100%
50 - 99% premium	Five enrolled employees or 50%, whichever is greater when written as stand-alone coverage. Two enrolled employees or 50%, whichever is greater when written with Dental.

Retirees: May be available on 100+ Life cases.



Humana Life plans

VOLUNTARY TERM LIFE

Available to groups with five or more eligible employees. Employees receive group rates and pay premiums through payroll deductions.

EMPLOYEE Voluntary Term Life

Available coverage	Flat amounts in \$1,000 increments
Minimum	\$15,000
Maximum	<ul style="list-style-type: none"> • \$250,000 for groups with 5 to 50 employees • \$500,000 for groups with 51 or more employees¹ • \$1 million, combined with Basic Term Life

DEPENDENT Voluntary Term Life

Spouses:¹	
• Available coverage	\$1,000 increments up to 50% of employee amount
• Minimum coverage	\$5,000
• Maximum coverage	\$250,000
Dependent child:	
• Ages 6 months to 26 years	\$5,000 and/or \$10,000
• Ages 15 days to 6 months	\$500
• Birth through 14 days	No benefit

1) Other options available upon underwriting approval.

Seat belt, airbag, helmet benefit

- **Seat belt benefit** – paid after death as a result of an auto accident while properly using a seat belt
- **Airbag** – paid after death as a result of an auto accident while driving a vehicle with a properly functioning airbag
- **Helmet** – paid after death as a result of a motorcycle accident while wearing a properly fitted and fastened motorcycle helmet

Guaranteed issue amounts

Amounts are based on the number of full-time eligible employees. Guaranteed issue does not apply to employees age 70 and older or spouses age 65 and older.

Eligible lives	Employee	Spouse
2 – 9	None	None
10 – 24	Up to \$50,000	Up to \$25,000
25 – 49	Up to \$75,000	Up to \$35,000
50 – 149	Up to \$100,000	Up to \$35,000
150 – 199	Up to \$120,000	Up to \$50,000
200 – 249	Up to \$150,000	Up to \$50,000
250 – 349	Up to \$200,000	Up to \$100,000
350 – 399	Up to \$220,000	Up to \$100,000
400 – 499	Up to \$230,000	Up to \$100,000
500 – 749	Up to \$250,000	Up to \$100,000
750 – 999	Up to \$300,000	Up to \$100,000
1,000 – 1,249	Up to \$350,000	Up to \$100,000
1,250 – 1,499	Up to \$375,000	Up to \$100,000
1,500 – 1,999	Up to \$400,000	Up to \$100,000
2,000 – 2,999	Up to \$450,000	Up to \$100,000
3,000 – 3,999	Up to \$550,000	Up to \$100,000
4,000 – 4,999	Up to \$650,000	Up to \$100,000
5,000+	Up to \$750,000	Up to \$100,000

* Group may be eligible for higher GI amount based on premium volume.

Minimum participation requirements:

Five enrolled employees or 25%, whichever is greater.

Retirees: Voluntary Term Life is not available to retired employees.



Humana Life plans

PLAN PROVISIONS

Rate guarantee

Rates guaranteed to not change for two years (three years, if offered).

Age reduction options

Choose one of the schedules at time of sale. Beginning at age 65 or age 70 (Schedule 3), the employee's life coverage is reduced based on the benefit amount in force on their 64th or 69th (Schedule 3) birthday. This also applies to AD&D.

Age	Schedule 1	Schedule 2	Schedule 3	Schedule 4
65	35%	35%	No reduction	
70	55%	50%	50%	Choose any % amount in 5% increments (and including 33%). Limited to 5 reduction levels.
75	70%			
80	80%	No further reduction		
85	85%			

Waiver of premium:

- Employees who are disabled for at least six consecutive months before age 60 can continue life insurance coverage and waive the premium.
- Employee is covered until age 65 if they remain totally disabled.

Conversion:

- If employee or dependent loses coverage due to the employee's loss of employment, loss of eligibility, or reduction for age, the coverage can be converted to an individual whole life insurance policy
- Maximum amounts to be converted vary based on the certificate
- If group coverage ends due to termination of the policy, conversion is available when the member's coverage has been in effect for at least three years. Voluntary ported coverage also can be converted when the policy is issued without evidence of insurability and must be applied and paid for within 31 days of coverage termination.

Accelerated death benefit:

- An employee diagnosed with a terminal illness that is expected to result in death within 24 months, based on the plan offered, can receive a portion of the insurance benefit.
- Amount payable is between 50%-80% in 5% increments and up to \$800,000.
- The advanced amount will reduce the life insurance benefit at the time of death.
- Humana must approve the benefit application.

This accelerated life benefit does not and is not intended to qualify as long-term care insurance under Washington state law. Washington state law prevents this accelerated life benefit from being marketed or sold as long-term care insurance or as providing long-term care benefits.

Portability of voluntary life:

- An active eligible employee who leaves the group can continue voluntary life insurance by paying annual premiums to Humana if they are not yet age 70
- Only coverage in-force or a lesser amount can be ported
- Employee must exercise portability option with 31 days of termination
- Employees will be charged Humana's current portability rates when they leave



Humana Life plans

ACCIDENTAL DEATH & DISMEMBERMENT BENEFITS (AD&D)

AD&D is available to purchase with life benefits for employees (dependent children are not eligible for AD&D). AD&D provides a death benefit based on the life schedule amount and includes the following features:

AD&D provisions for employees and spouse*

If death or the following losses occur within 180 days of an accident, the following benefit will be paid:

Loss	Benefit amount equal to	Common carrier accident
Life	Full amount	200%
Both hands & both feet	Full amount	200%
Sight in both eyes	Full amount	200%
One hand & one foot	Full amount	200%
One hand or one foot & sight in one eye	Full amount	200%
One hand	50% of full amount	200%
One foot	50% of full amount	100%
Loss of sight in one eye	50% of full amount	100%
Loss of thumb & index finger on same hand	25% of full amount	50%
Quadriplegia	Full amount	200%
Paraplegia or hemiplegia	50% of full amount	100%

* Please consult your policy for details.

Common carrier benefit

Paid after a covered accidental bodily injury sustained while riding as a fare-paying passenger in a common carrier. A common carrier is any land, air, or water vehicle operated with a valid license to transport passengers for hire.

Seat belt, airbag, helmet benefit

- **Seat belt benefit** – paid after death as a result of an auto accident while properly using a seat belt
- **Airbag** – paid after death as a result of an auto accident while driving a vehicle with a properly functioning airbag
- **Helmet** – paid after death as a result of a motorcycle accident while wearing a properly fitted and fastened motorcycle helmet

Education benefit

Provides financial assistance for dependent children's higher education in the event of a covered parent's death.

Childcare benefit

Provides financial assistance for expenses for dependent children's childcare in the event of covered spouse's death.

Spouse training benefit

Provides financial assistance for spouse's studies at an accredited school in the event of covered spouse's death.

Coma benefit

Paid if covered person is in a qualifying coma condition.

Repatriation benefit

Provides financial assistance for transportation of the employee's body in the event of accidental death. Contract will establish mileage requirements from principal place of residence.



Humana Life plans

Life plans insured by Humana Insurance Company. In Kentucky, life plans insured by Humana Insurance Company of Kentucky.

Plans not available in California and New York.

This communication provides a general description of certain identified insurance or non-insurance benefits provided under one or more of our benefit plans. Our benefit plans have exclusions and limitations and terms under which the coverage may be continued in force or discontinued. For costs and complete details of the coverage, refer to the plan document or call or write your Humana insurance agent or the company. In the event of any disagreement between this communication and the plan document, the plan document will control.

Humana[®]

Policy numbers: ICC22-GN-70050-07 EM POLICY et.al., ND-70050-07 EM POLICY et.al.,
SD-70050-07 EM POLICY et.al., GN-70050-07 EM POLICY et.al.