

KENTUCKY

Anderson County Board of Education

Employee \$10,000 increm. up to \$500,000 **Spouse** \$5,000 increm. 50% of EE up to \$250,000 **Child** Newborn \$500 Child \$10,000
Guarantee Issue Amounts **Employee** \$150,000 **Spouse** \$50,000 **Child** \$10,000

Coverage	Loss	Benefit
Life Insurance	Death	Your beneficiary will receive the benefit amount selected.
Accidental death or bodily injury (AD&D)* (available if employer selects this option) Benefit doubles if employee is a fare-paying passenger in a common carrier accident	Death as the result of an accident As the result of an accident, loss of: both hands or feet; sight of both eyes; one hand and one foot; one hand or one foot and sight of one eye; complete paralysis (quadriplegia). As the result of an accident, loss of: one hand; one foot; sight of one eye; loss of thumb and index finger of same hand; partial paralysis (paraplegia and hemiplegia).	Your beneficiary will receive the life amount selected. You will receive the life amount selected. You will receive 50 percent of the life benefit amount.
Accelerated benefit	Terminal illness with a life-expectancy of 24 months or less. You must have continuous coverage a minimum of six months in order to qualify.	Amount payable is 50 percent to a maximum benefit of \$250,000. Life insurance benefit at time of death will be reduced by the advanced amount. (This may vary because it is subject to state regulations.)
Seat belt-airbag-helmet benefit	Death as the result of an auto accident while properly using a seat belt, or wearing a properly fitted and fastened motorcycle helmet in a motorcycle accident.	Amount of your accidental death benefit increases by 10 percent, but not less than \$1,000 or more than \$10,000. In addition, we will increase your accidental death benefit by 5 percent, to a maximum of \$5,000 but no less than \$500, for a properly functioning airbag.
Education benefit	Death	Actual expense to a maximum of \$5,000 or 5 percent of death benefit. Payable up to four years for employee's dependent children or until age 25. Dependent must be a full-time student beyond 12th grade at a college, university or vocational school on the date of the employee's death or within 365 days after the death.
Childcare benefit	Death	Actual expense to a maximum of \$5,000 or 5 percent of death benefit. For a dependent in a licensed childcare center up to four consecutive years after the employee's death, or until the child's 13th birthday.

Coverage	Loss	Benefit
Spouse training benefit	Death	Actual expense to a maximum of \$5,000 or 5 percent of death benefit for one year after the employee's death. Survivor must be enrolled as a student in an accredited school on the date of the employee's death or within 365 days after the death.
Coma benefit	Employee is in a coma caused by a body injury, the coma begins within 365 days after the accident; and the person remains in a coma for more than 31 consecutive days.	One time payment of 5 percent of the employee's benefit, subject to a maximum of \$5,000.
Repatriation benefit	Death	Actual expenses to a maximum of \$5,000 if employee dies as a result of an accidental death at least 150 miles from his/her principal place of resident, and there are expenses for preparing and transporting the employee's body to a mortuary.
Dependent insurance	Death of spouse Death of dependent child	You will receive the coverage amount selected.
Portability[±]	Termination of employment.	Continue coverage by paying premiums directly to Humana.
Global Emergency Services Provided by Assist America®		Provides medical emergency travel assistance to people traveling 100 miles or more away from home 24-hours per day, 7 days per week, including (but not limited to): medical consultation & referral, medical monitoring, prescription assistance, and hospital admission guarantee.

* The total benefit for all losses resulting from the same accident will be limited to the one type of loss which provides the greatest benefit.

± Portability is state-specific and is not available in Minnesota.

Questions?

Check out **Humana.com**
Call 1-800-233-4013 anytime for automated information
line or 8 a.m. to 6 p.m. for a customer service representative.

Voluntary term life provisions

Rate guarantee

Rate is guaranteed not to change for two years.

Eligibility to participate

Active, full-time employees are eligible for coverage.

Waiver of premium

If you are totally disabled for at least six consecutive months prior to age 60, you can continue life insurance coverage and waive the premium.

Conversion privilege

If your employment ends, you may convert your coverage to a whole life insurance plan.

Age reduction schedule

Beginning at age 65 (or age 70 in schedule three), your life coverage will reduce based on the benefit amount in force on your 64th birthday (or age 69 in schedule three).

Age Schedule 2

65	35 percent
70	45 percent
75	30 percent

Dependent delayed effective date

The dependent's effective date of coverage will be delayed if the dependent is:

- confined to a hospital or qualified treatment facility.
- receiving home health care or hospice benefits.

The dependent's coverage will be effective on the day after:

- discharge from confinement -- discharge must be certified by a qualified practitioner.
- a qualified practitioner certifies that home health care is no longer needed.

If dependent coverage is in force, or applied for within 31 days of a newborn child's date of birth, the Dependent Delayed Effective Date provision will not apply to the newborn child on the child's date of birth.

How much life insurance do you need?

The real question is: How much will your loved ones need for short- and long-term expenses?

According to the American Council of Life Insurers (ACLI), a guideline is a life insurance amount equal to five to seven times your annual income. No rule applies to everyone, however, because financial situations and goals vary from person to person and family to family. Use our simple online life insurance calculator at **Humana.com** to help determine your life insurance needs.

HUMANA.
Specialty Benefits

Insured by Humana Insurance Company, Humana Insurance Company of Kentucky,
or Kanawha Insurance Company.

This is not a complete disclosure of plan qualifications and limitations. Please review your Certificate of Insurance for a complete list of benefits. The Certificate of Insurance is the document upon which eligibility and benefit payment will be determined. Your agent/broker will provide you with specific limitations and exclusions as contained in the regulatory and Technical Information Guide. Please review this information before applying for coverage.