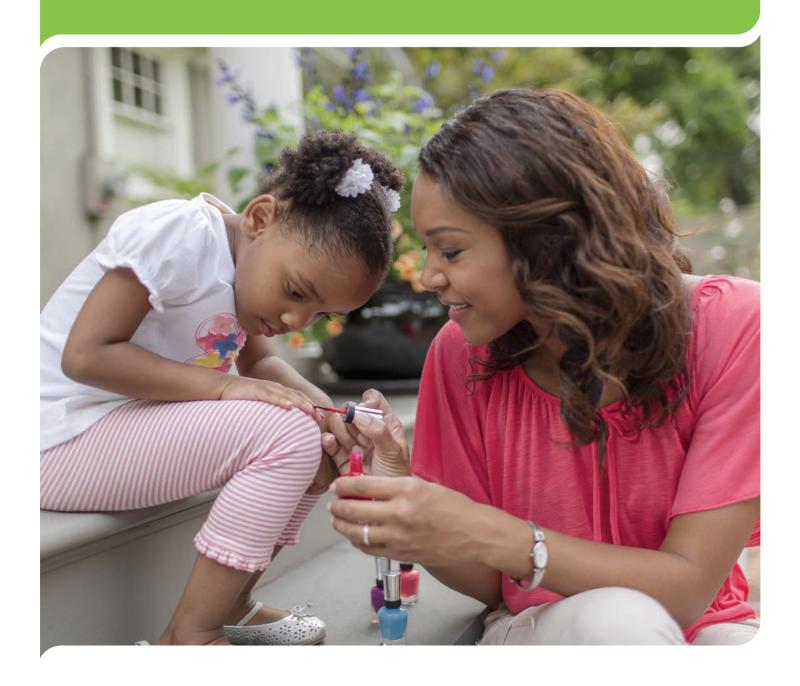
Humana Life

For groups with up to 99 employees







Who to contact

To best serve you, please mention your group or member identification number when you contact Humana.



Enrollment

EMPLOYEE CHANGES, ADDITIONS, AND TERMINATIONS

Employer secured section of Humana.com – Billing & Enrollment

Fax number: 1-866-584-9140

Phone: 1-800-232-2006

Address: Humana Life, P.O. Box 14209 Lexington, KY 40512-4209

ENROLLMENT FORMS

 Sign into Humana.com, select "Support & Resources",then choose "Application and Enrollment Forms"

• Phone: 1-800-232-2006

Administrative and billing

GROUP-LEVEL CHANGES

Update addresses, probationary periods, and contact information:

Humana.com

Email: beclericals@humana.com

Fax: 1-877-369-5615

Phone: 1-800-232-2006

Address: Humana Life, 1100 Employers Blvd, Green Bay, WI 54344

PREMIUMS

- Phone: 1-800-232-2006
- The premium payment address is on your monthly premium invoice.
- You can register to pay your invoice electronically on Humana.com under your secure Employer Self-Service account.
- If you mail your payment, send any new enrollment or terminations separately using the address noted on your invoice.

Customer care

- HumanaLife.com
- Phone: 1-800-233-4013
- Customer Care specialists are happy to help you Monday through Friday,
 8 a.m. to 6 p.m. CST. If you have a speech or hearing impairment and use a TTY, call 711.

Claims

- Phone: 1-800-233-4013
- Address: Group Life Claims, P.O. Box 10708, Green Bay, WI 54307-0708

Register on Humana.com

Administering your Humana plan online makes your job easier. To register for online access, go to humana.com, click "Sign In or Register" and follow the instructions. For online support questions, call 1-800-232-2006.

Contacting Humana after a death

We're here to help during this difficult time. Our representatives handle each claim individually and with compassion.

Please provide:

- Completed Group Life Claim Form
- Employer completes Part 1; beneficiary completes Part 2
- Certified death certificate
- Copy of the original enrollment form and any beneficiary changes
- Send to: Humana Inc., Group Life Claims, P.O. Box 10708, Green Bay, WI 54302-0708

If the death is due to an accident, we also need:

- Copy of final police report
- Copy of autopsy and toxicology results if done

If the beneficiary is a minor, we may request guardianship papers naming the legal guardian of the minor's estate. If the beneficiary is an estate, we require the Letters Testamentary or Letters of Administration appointing the personal representative of the estate.

Important deadlines

Timely applicant

Employees and dependents must enroll for coverage within 60 days before or 31 days after their eligibility date.

Premiums

You will receive your premium bill about two weeks before the due date. Your payment is due the first of the month.

Portability and conversion

Be sure to remind terminating employees that they have 31 days to convert their life coverage to a permanent insurance plan, and/or 31 days to port coverage if they have a voluntary life plan.

Plan changes

Underwriting must approve all voluntary life increases after initial enrollment or if the coverage amount requested exceeds your guaranteed acceptance limit. Employees who want life insurance for more than the guaranteed acceptance limit need to complete a health questionnaire and provide additional information that Underwriting may request.

