



Group Benefits quoting requirements

Review the guidelines below when submitting a quote request for Humana Group Benefits – dental, vision, life and disability plans. For quick and seamless quote preparation, we'll need all the required information noted in this guide.

If you have any questions, please contact your Humana sales representative.

DENTAL, VISION & LIFE plans	2-299 eligible lives	300+ eligible lives
Agent / Humana Agency Number (SAN)		
Commission schedule		
Group information (legal name, legal address, ZIP, SIC)	Required	Required
Counts (payroll, FTE and eligible)		
Proposed effective date		
Census file in Excel (including DOB/age, gender, coverage levels, home ZIP code, current plans, working location ZIP codes and who is working at each location)	Required	Required
<ul style="list-style-type: none"> • For Life plans: Also include employees enrolled in contributory or voluntary plans 		
<ul style="list-style-type: none"> • For multiple working locations: Also include working location zip codes and who is working at each location 	Required	Preferred
Current plan design	Preferred	Required
Current rates by plan / tier	Preferred	Required
Current carrier		
Number of years with current carrier	Preferred	Preferred
Number of carriers within the past five years		
History including claims, premium, enrollment (2+ years):		
<ul style="list-style-type: none"> • Dental 300+ enrolled lives • Life 500+ enrolled lives (plus waiver claims) • Vision 1,000+ enrolled lives 	Preferred	Required
Renewal rates (required if within 30 days of renewal)	Preferred	Preferred

[See next page for Disability plans >](#)



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DISABILITY plans	2+ Short- and Long-Term Disability
Group information (legal name, legal address, SIC)	Required
Commission schedule	Required
Census file in Excel (including DOB, gender, home zip code, salary and salary mode)	Required
Plan-level data (inforce and/or requested plan design)	Required
Current carrier	Required
Number of years with current carrier	Preferred
Number of carriers within the past five years	
Class designation	Required when more than one employee class either inforce or requested
Date of hire	<ul style="list-style-type: none"> • Required when employee eligibility and/or employee classes are based on an employee's date of hire or length of service • Required for the following SIC Codes to ensure appropriate offsets are reflected in the LTS Manual Rate for an employer's participation in either the Public Employee Retirement System (PERS) or State Teacher Retirement System (STRS): <ul style="list-style-type: none"> > 8211-8299: Education Services > 9111-9721: Public Administration
Occupation	<ul style="list-style-type: none"> • Required when employee eligibility and/or employee classes are based in whole or in part by occupation • Required for the following SIC Codes given their potential occupational diversity: <ul style="list-style-type: none"> > 6712-6799: Holding and Other Investment Offices > 7361: Employment Agencies > 7363: Help Supply Services > 7389: Business Services, Not Elsewhere Classified (NEC) > 9111-9721: Public Administration > 9999: Non-Classifiable Establishments
Occupational specialty	<p>Required for the following SIC Codes in order to access the risk based on the mix and type(s) of occupational specialties:</p> <ul style="list-style-type: none"> > 8011-8049: Physicians and Dentists > 8062-8069: General and Specialty Hospitals > 8092: Kidney Dialysis Centers
Eligible vs. enrolled	Indicator required for contributory and voluntary plans to determine the current participation level
Salary vs. hourly	Actual salary and salary indicator required when employee eligibility and/or employee classes are based in whole or in part by exempt employee status

Disability plans continued on next page >

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DISABILITY plans	2+ Short- and Long-Term Disability
Work ZIP code	<ul style="list-style-type: none"> • Required to assign an appropriate Area Factor, particularly important for groups with employees working in multiple states or geographic regions. • Required if employees are working in one or more of the following statutory disability/paid medical leave states or U.S. territories to ensure appropriate offsets are reflected in the Manual Rate. <ul style="list-style-type: none"> > Statutory Disability: California, Hawaii, New Jersey, New York, Puerto Rico, Rhode Island > Paid Medical Leave: Colorado, Connecticut, Delaware, District of Columbia (D.C.), Maryland, Massachusetts, New Hampshire, Oregon, Vermont, Washington
Number of open and closed claims	Required*
Disabled life reserves (DLR)	Required†
Open claims listing	Required†
Closed claims listing	Required†

* **Short-term disability:** Requires two years of claims experience with groups of 150 or more enrolled lives (250 or more enrolled lives for CA situs).

* **Long-term disability:** Requires three years of claims experience with groups of 500 or more enrolled lives.

† **Long-term disability:** Require three years of claims experience with groups of 1,000 or more enrolled lives.

