

LARGE GROUP PRODUCTS & BROKER COMMISSIONS

CARRIER / PLAN	GROUP SIZE	COMMISSION
Aetna		
Medical, Dental and Vision, EAP	101+	Contact your Word & Brown representative
Aflac (Group Platform Plans)		
Creative Solutions	101+ Policy holders	Begins at 12% commission and increases with agent involvement and production
Ameritas		
Dental	100-199	10% Level Simple Add-Ons - 10%
Vision	100+	10% Level Simple Add-Ons - 10%
Anthem Blue Cross		
Medical, Dental, Vision, Life and Disability	101-500	4% Medical; Dental HMO 10%; Dental PPO 10%; Vision 10%; Life & Disability 10%
BEST Life and Health Insurance Company		
Dental	100+	Negotiable ²
Voluntary Dental	100+	Negotiable ²
Vision	100+	10%
Life and AD&D	100+	15%
Blue Shield of California		
Medical	101-299	Blue Shield has transitioned to a Producer Service Fee model. Contact your Word & Brown representative
Dental	101-299	7%
Vision	101-299	7%
Life	101-299	10%
CalCPA		
Medical (Anthem Blue Cross)	101+	5%
Dental (Delta Dental)	101+	10%
Vision (VSP)	101+	10%
California Dental Network		
Dental	101+	Negotiable ¹
Camden		
Vision	101+	10% Level
ChoiceBuilder®		
Dental, Vision, Life and Chiropractic	101-199	10%
CIGNA		
Medical	101-250	5% Standard (negotiable) ²
Dental	101-250	10% Standard (negotiable) ²
Vision, Life and Disability	101-250	Contact your Word & Brown representative as we will need to co-broker
Colonial Life (Individual and Small Group Voluntary Plans)		
Dental, Life, Disability, Accident, Critical Illness, Cancer and Hospital Confinement Indemnity	101+	Varies by product

CARRIER / PLAN	GROUP SIZE	COMMISSION
CompNet		
Creative Solutions	101+	1st year: 4% Renewal: 3%
E.D.I.S.		
Freedom Dental	101+	3.75%
Group Term Life	2+	10%
EDHP Hybrid, RBP and Buy Up Plans	2+	\$6 PEPM, and the below % of both the specific and aggregate premium. <ul style="list-style-type: none"> 8% if spec deductible is \$10,000 9% if spec deductible is \$20,000 10% if spec deductible is \$30,000 or higher
EDHP MVP Plan	2+	\$10 PEPM
MEC Plans	2+	\$5 PEPM
Evolved Benefits		
Staff Benefits Management and Administrators (SBMA)	101+	Basic - \$10 Virtual - \$10 Ultra - \$15 Ultimate - \$15
Transamerica/ TransConnect	101+	HP45 - 18%
Guardian		
Dental, Vision, Life, STD, LTD, Accident, Critical Illness, Hospital Indemnity, Cancer	101-999	Contact your Word & Brown representative
Health Net		
Medical	101-500	5%
Dental / Vision	101-500	10%
Life	101-500	0-10,000 = 10% 10,001 - 20,000 = 8% 20,001 - 30,000 = 5% 30,001 - 50,000 = 4% 50,001 - 150,000 = 2% 150,001+ = 1%
HealthiestYou		
TeleHeath	1+	15%
Humana		
Dental and Vision	101+	First \$10,000: 10% Next \$10,000: 7.5% Next \$10,000: 5% Next \$20,000: 2.5% Over \$50,000: 1.5%
Employer-Sponsored Group Life & AD&D	101+	First \$5,000: 15% Next \$20,000: 10% Next \$25,000: 7% Next \$50,000: 3% Next \$100,000: 2% Over \$200,000: 1%
Voluntary Group Life and AD&D	101+	15%
International Medical Group (IMG)		
Alternative Solutions	101+	Varies

(Continued)

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- ³ For groups 101-299, please contact your Word & Brown representative.

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Kaiser Permanente**		
Medical	101-300	5%
Landmark Healthplan		
Chiropractic/ Acupuncture	2+	20% commission on 1st year's paid premiums; 10% thereafter
Liberty Dental		
Dental (HMO)	101-300	10% [for all years]
Lincoln Financial Group		
Dental	100+	First \$10,000 - 10.00% Next \$10,000 - 8.00% Next \$10,000 - 4.00% Next \$20,000 - 2.00% Next \$50,000 - 1.50% Next \$150,000 - 0.25% Next \$250,000 - 0.15% Above \$500,000 - 0.15% -Flat commission % is negotiable; contact your Word & Brown representative
Vision	100+	10%
LTD	100+	First \$15,000 - 15.00% Next \$10,000 - 10.00% Next \$25,000 - 5.00% Next \$50,000 - 1.00% Above \$100,000 - 0.50% -Flat commission % is negotiable; contact your Word & Brown representative
Life AD&D and STD	100+	First \$2,000 - 15.00% Next \$3,000 - 12.00% Next \$5,000 - 11.00% Next \$5,000 - 8.00% Next \$5,000 - 7.00% Next \$5,000 - 6.00% Next \$5,000 - 5.00% Next \$20,000 - 2.00% Next \$50,000 - 1.50% Next \$50,000 - 1.00% Next \$350,000 - 0.75% Above \$500,000 - 0.50% -Flat commission % is negotiable; contact your Word & Brown representative
MediExcel Health Plan		
Medical	101+	5%
Dental ⁴	101+	10%
MetLife		
HMO Dental	101-499	10% Level - Commissions are paid on the actual enrollment of the group
Dental PPO Options	101+	10% Graded ¹ - Commissions are paid on the actual enrollment of the group
Vol. PPO Options	101+	10% Graded ¹ - Commissions are paid on the actual enrollment of the group
Vision	101+	10% Level - Commissions are paid on the actual enrollment of the group
Life	10+	15% Graded ¹ - Commissions are paid on the actual enrollment of the group
Disability	10+	Varies - Commissions are paid on the actual enrollment of the group
Creative Solutions	200+	Varies - Commissions are paid on the actual enrollment of the group
NationCare PPO Presented by Sharp Health Plan		
Medical	101+	5%
National General		
Self-Funded Medical	101+	5%

** Please note Kaiser Permanente summary information is contained herein but Kaiser Permanente has not reviewed the information contained within this guide and Word & Brown therefore cannot guarantee its accuracy. Please contact your Word & Brown sales representative in the event of any discrepancies. The information provided in this guide is not intended to describe all of the benefits included in each plan, nor is it designed to serve as the "Evidence of Coverage" or "Certificate of Insurance." The KHFP Evidence of Coverage and the KPIC Certificate of Insurance contain a complete explanation of benefits, exclusions, and limitations.

CARRIER / PLAN	GROUP SIZE	COMMISSION
Nippon Life Benefits		
Medical	101-300	First \$1,000: 6.50% Next \$4,000: 4.70% Next \$5,000: 2.85% Next \$10,000: 2.60% Next \$10,000: 2.35% Next \$20,000: 1.85% Next \$200,000: 1.15% Next \$500,000: 0.55% Next \$1,250,000: 0.28% Over \$2,000,000: 0.10% -Flat commission % is negotiable, contact your Word & Brown representative
Dental	101-300	\$0 - \$10,000 = 10% \$10,001 - \$15,000 = 7.5% \$15,001 - \$20,000 = 7.5% \$20,001 - \$25,000 = 5.0% \$25,001 - \$50,000 = 5.0% \$50,001 - \$100,000 = 2.5% \$100,001+ = 1.0%
Vision	101-300	\$0 - \$10,000 = 10% \$10,001 - \$15,000 = 7.5% \$15,001 - \$20,000 = 7.5% \$20,001 - \$25,000 = 5.0% \$25,001 - \$50,000 = 5.0% \$50,001 - \$100,000 = 2.5% \$100,001+ = 1.0%
Life	101-300	\$0 - \$10,000 = 15% \$10,001 - \$15,000 = 10% \$15,001 - \$20,000 = 10% \$20,001 - \$25,000 = 7.5% \$25,001 - \$50,000 = 7.5% \$50,001 - \$100,000 = 5% \$100,001+ = 2.5%
STD	101-300	\$0 - \$10,000 = 10% \$10,001 - \$15,000 = 7.5% \$15,001 - \$20,000 = 7.5% \$20,001 - \$25,000 = 5.0% \$25,001 - \$50,000 = 5.0% \$50,001 - \$100,000 = 2.5% \$100,001+ = 1.0%
LTD	101-300	\$0 - \$10,000 = 15% \$10,001 - \$15,000 = 15% \$15,001 - \$20,000 = 12.5% \$20,001 - \$25,000 = 12.5% \$25,001 - \$50,000 = 10% \$50,001 - \$100,000 = 10% \$100,001+ = 5%
Premier Access		
Dental	101+	Contact your Word & Brown representative
Premium Saver		
Creative Solutions	101+	Zero to 15%. Contact your Word & Brown representative
Principal		
Dental	101-999	First \$5,000: 10% Next \$5,000: 8% Next \$15,000: 6% Next \$25,000: 4% Next \$100,000: 3% Next \$350,000: 2.5% Over \$500,000: 1.6% Commissions payable at a flat percentage are available for all group coverages.

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² Contact your Word & Brown representative for details.

³ For groups 101-299, please contact your Word & Brown representative.

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CARRIER / PLAN	GROUP SIZE	COMMISSION
Principal (Cont.)		
Vision	101+	First \$5,000: 10% Next \$5,000: 8% Next \$15,000: 6% Next \$25,000: 4% Next \$100,000: 3% Next \$350,000: 2.5% Over \$500,000: 1.6% Commissions payable at a flat percentage are available for all group coverages.
Life	101+	First \$5,000: 10% Next \$5,000: 8% Next \$15,000: 6% Next \$25,000: 4% Next \$100,000: 3% Next \$350,000: 2.5% Over \$500,000: 1.6% Commissions payable at a flat percentage are available for all group coverages.
Disability	101+	STD: First \$5,000: 10% Next \$5,000: 8% Next \$15,000: 6% Next \$25,000: 4% Next \$100,000: 3% Next \$350,000: 2.5% Over \$500,000: 1.6% LTD: First \$15,000: 15% Next \$10,000: 10% Next \$25,000: 5% Next \$50,000: 2% Next \$100,000: 1% Next \$300,000: 0.6% Next \$500,000: 0.3% Over \$1,000,000: 0.1% Commissions payable at a flat percentage are available for all group coverages.
Reliance Standard		
Dental, Vision	20+	Contact your Word & Brown representative
Life	20+	Contact your Word & Brown representative
Disability	20+	Contact your Word & Brown representative
Creative Solutions	20+	Contact your Word & Brown representative
Seniors Choice		
Medical	101+	8%
Part D (RX)	101+	5%
Sharp Health Plan¹		
Medical (HMO)	101+	Contact your Word & Brown representative
SIMNSA¹		
Medical	101+	7%
SmileSaver/MetLife DHMO		
Dental	101-999	SmileSaver DHMO: 10% Level
The Holman Group		
Alternative Solutions (EAP)	100+	% is broker directed
Total Benefits Solutions¹		
Medical (International)	2+	5% first year and renewal
United Concordia		
Dental	2+	10% but is negotiable

CARRIER / PLAN	GROUP SIZE	COMMISSION
UnitedHealthcare		
Medical	101+	Contact your Word & Brown representative
Dental, Vision, Life and Disability	101+	Contact your Word & Brown representative
Unum		
Dental	10+	10%
Group Term Life and AD&D	2+	First \$15K - 10% Next \$10K - 7% Next \$25K - 5% Next \$50K - 1% \$100K+ - 0.5%
Group Term Life and AD&D Voluntary	10+	15%
LTD	2+	First \$15K - 15% Next \$10K - 10% Next \$25K - 5% \$50K+ - 1%
STD	10+	First \$15K - 10% Next \$10K - 7% Next \$25K - 5% Next \$50K - 1% \$100K - 0.5%
LTD Voluntary and STD Voluntary	10+	15%
Vision Plan of America		
HMO Plan 1 + Vol; HMO Plan 2 + Vol; HMO Plan 3	101+	12%
M-Plus Plan	101+	15%
VSP		
Vision (Voluntary)	10+	10% Graded
Vision (Employer Paid)	5+	10% Graded
Western Health Advantage¹		
Medical, Dental and Vision	101+	Contact your Word & Brown representative

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