

Carriers & Products

Coverage	Carriers	Products	#EEs
Small Group Medical	Aetna Aetna Medicare Advantage	PPO, Co-pay, HRA, HSA	2-50 1+ w/Aetna 2+ w/another carrier
	Assurant HealthPlus Humana	Co-pay, HRA, HSA PPO, HMO Co-pay, HSA, PCA (HRA), Coverage First	2-100 2-50 4-50
	IAC	PPO, Co-pay, HRA, HSA	2-50
	Individual Medical	Aetna Assurant HumanaOne IAC	PPO, HSA, Preventive Hospital Indemnity, PPO, HSA PPO, HSA PPO, HSA
Large Group Medical	Aetna Humana	PPO, Co-pay, HRA HSA PPO, Co-pay, HSA, PCA, Coverage First	51-250 51-299
	IAC	PPO, HSA, HRA	51-99
	Dental	Aetna AlwaysCare Assurant Delta Dental Humana IAC	PPO, DMO PPO Indemnity, PPO Indemnity, PPO Indemnity, PPO Indemnity, PPO (ER Sponsored or Voluntary)
Vision	AlwaysCare Humana IAC (Co-pay Plans) VSP Vision Plan		5+ 4-100+ 2-99 3-99
Life	Aetna AlwaysCare Assurant (Voluntary) Humana IAC		2-250 2+ 2-100 4-99 2-99
DI	AlwaysCare Assurant (STD only) Humana		10+ 2-100 20+
LTC	LifeSecure		1+

Carrier Commission Schedule

Carrier	Plan	#EEs	1 st Year	Renewals
Aetna	Individual Medical (Bronze) ¹		15% Flat	5% Flat
	Medical	2-50	5% Flat ²	Same
	Medical	51-250	3% DG ³	Same
	Dental	2-50	9% Flat ³	Same
	Medicare Advantage	1+	\$350/App.	\$108/App.
AlwaysCare	Dental (PPO)	2-49	10% Flat	Same
		50-99	8% Flat ⁶	Same
		100+	6% Flat ⁶	Same
	Vision	5+	10% ER Paid	Same
	STD		12% Voluntary	Same
	LTD		10% DG ER	Same
			11% DG Vol	Same
			15% DG	Same
Assurant	Individual Medical		20% Flat	4% Flat
	Medical	2-50	7% Flat	4% Flat
	Dental	51-250	7% Flat	4% Flat
	DI		40% Flat	6% DG
Delta Dental	Dental	2+	10% DG	Same
HealthPlus	Medical	2-50	5% Flat	Same
Humana	Individual Medical		20% Flat	5% Flat
	Medical	4-25	6% Flat	Same
	Medical	26-50	5% Flat	Same
	Medical	51-99	4% Flat	Same
	Medical	100+	Negotiated	Same
	Dental	4-99	10% DG ⁷	Same
	Voluntary Dental	4-99	10% Flat ⁸	Same
Life/DI	4-99 (20+ DI)	15% DG ⁸	Same	
IAC	Individual Medical		20% Flat ⁴	5% Flat
	Medical	2-50	8% DG ⁴	Same
	Dental	2-9	10% Flat	Same
	Dental	10-49	8% Flat	Same
	Dental	50-99	6% Flat	Same
	Life	2-50	8% of Prem.	Same
	Vision	2-50	10% Flat	Same ⁵
LifeSecure	Long Term Care		60% Flat	9% Flat
VSP	Vision	3-99	8% Flat	Same

¹ Silver: 18% 1st year, 5% renewal; Gold: 20% 1st year, 5% renewal

² 3% to \$35,000; \$35,001 - \$200,000: 5%; \$200,001 - \$400,000: 4%; \$400,001 - 1 million: 3%; 1 - 4 million: 2%; 4 million+: 1%

³ If sold with Medical, additional 1% first year only

⁴ 8% to \$25,000; \$25,001 - \$50,000: 7%; \$50,001 - \$75,000: 6%; \$75,001+: 5%

⁵ Commission rates may differ for individuals over 65 years of age and all multi-life cases.

⁶ May review on a case-by-case basis.

⁷ 10% to \$10K; 7.5% next 10K; 5% next 10K; 2.5% next 20K; 1.5% next 50K; 0.5% over 100K

⁸ 15% to \$5K; 10% next 20K; 7% next 25K; 3% next 50K; 2% next 100K; 1% over 200K