

KANSAS CITY LIFE INSURANCE COMPANY

PRODUCT GUIDE FOR GROUPS WITH 5 OR MORE EMPLOYEES

Products and options may not be available in all states.

Please contact your Kansas City Life Group sales representative for more information.

TRUE GROUP COVERAGE

Standard requirements/provisions	<ul style="list-style-type: none"> • Minimum group size is 5 employees. • Group must be in business at least one year. • Employees must be performing the essential duties of their occupation 30 or more hours per week. • If employer contributes 100% to the cost, 100% employee participation is required. • If employer contributes less than 100% to the cost, 75% employee participation is required. • Applicable waiting periods may apply. 				
	LIFE	STD	LTD	DENTAL	VISION
Elimination periods/co-insurance/co-payments	N/A	0/7/14/30 day for accident; 7/14/30 day for sickness	90 or 180 days	Standard plan In network: 100/90/60/50 Out of network: 100/80/50/50	\$0 / \$10 / \$25
Maximum benefits	Varies by group	60% of weekly earnings; maximum of \$500 up to \$1,500	60% of monthly earnings; maximum of \$6,000 up to \$15,000	Range from \$500 to \$2,500	N/A
Benefit duration	Benefits reduce by: 35% at age 65 55% at age 70 70% at age 75 80% at age 80 Terminates at retirement	Between 9 and 52 weeks	Social Security Normal Retirement Age	N/A	12 or 24 months
Options and/or features	Spouse and dependent coverage; AD&D; Accelerated Death Benefit; Conversion	Recurrent disability; Vocational rehabilitation	Cost of living freeze; Return to work; Recurrent disability; Employee Assistance Program	Orthodontia; Implants; Cosmetic Services*; Endodontics, Periodontics and Oral Surgery moved between Type II and III services; Dental Reserve Account	In and out of network benefits/ Lens replacement

VOLUNTARY COVERAGE

**Available with PJ/CJ143 only.*

Standard requirements/provisions	<ul style="list-style-type: none"> • Group must be in business at least two years. • Employees must be performing the essential duties of their occupation 30 or more hours per week. • A minimum of 10 lives or 25% (20% for Life) of employees, whichever is greater, must participate. Vision requires a minimum of two lives enrolled. • Applicable waiting periods may apply. 				
	LIFE	STD	LTD	DENTAL	VISION
Elimination periods/co-insurance/co-payments	N/A	0/7/14/30 day for accident; 7/14/30 day for sickness	90 or 180 days	Standard plan In network: 100/90/60/50 Out of network: 100/80/50/50	\$0 / \$10 / \$25
Maximum benefits	\$500,000 or 5 times annual earnings, whichever is less	60% of weekly earnings; maximum of \$100 up to \$1,500	60% of monthly earnings; maximum of \$1,000 up to \$6,000	Range from \$500 to \$2,500	N/A
Benefit duration	Benefits reduce by: 35% at age 65 55% at age 70 70% at age 75 80% at age 80; Terminates at retirement	13 or 26 weeks; 52 weeks available with approval	Social Security Normal Retirement Age	N/A	12 or 24 months
Options and/or features	Spouse and dependent coverage; AD&D; Accelerated Death Benefit; Conversion and Portability; Guarantee issue is \$100,000 for employees, \$50,000 for spouses	Recurrent disability; Vocational rehabilitation	Cost of living freeze; Return to work; Recurrent disability; Employee Assistance Program	Orthodontia; Implants; Cosmetic Services*; Endodontics, Periodontics and Oral Surgery moved between Type II and III services; Dental Reserve Account	In and out of network benefits/ Lens replacement

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