

AMERITAS INDIVIDUAL

Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
DENTAL	All Ages	Base Premium	10.00%	10.00%
VISION	All Ages	Base Premium	12.00%	12.00%

INDIVIDUAL COMMISSION SCHEDULE - EFFECTIVE 1/1/2018

The schedule shown above is provided by the carrier and is subject to revision as necessary.

PLEASE NOTE! PORTABILITY POLICIES DO NOT PAY COMMISSIONS.

BCBS OF AZ

Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
MEDICAL - INDIVIDUAL - Coconino, Cochise, Mohave, Yavapai, Yuma only	All Ages	Base Premium	\$8.33	\$6.25
MEDICAL - FAMILY - Coconino, Cochise, Mohave, Yavapai, Yuma regions only	All Ages	Base Premium	\$16.66	\$12.50

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DELTA DENTAL

Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
Dental	All Ages	Base Premium	10.00%	10.00%

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EDS				
Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
Dental	All Ages	Base Premium	10.00%	8.00%

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IHC HEALTH SOLUTIONS

Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
Secure STM - Secure Ltte STM	All Ages	Base Premium	18.00%	N/A
DENTAL			10.00%	10.00%
RX - Pay Card			25.00%	25.00%
CARE ACCESS PLAN			20.00%	5.00%
CRITICAL ILLNESS CASH PLAN			50.00%	
TELEMEDICINE			40.00%	N/A
METAL GAP I			1-24 apps	
METAL GAP I	25+ apps		20.00%	10.00%
METAL GAP II	1-24 apps		15.00%	4.00%
METAL GAP II	25+ apps		20.00%	4.00%

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INTERNATIONAL MEDICAL GROUP				
Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
PATRIOT SERIES	All Ages	Base Premium	10.00%	N/A
GLOBAL SERIES	All Ages	Base Premium	15.00%	5.00%
ITRAVELINSURED SERIES - LX PLAN *	All Ages		\$37.50	N/A
ITRAVELINSURED SERIES - SE PLAN *	All Ages		\$18	N/A
ITRAVELINSURED SERIES - LITE PLAN*	All Ages		\$15	N/A

*THIS ONLY PAYS AS A ONE TIME REFERRAL FEE

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NATIONAL GENERAL

Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
MEDICAL - STM	All Ages	Base Premium	20.00%	N/A

*** GUARANTEED ISSUE COMMISSIONS ARE 50% LESS THAN STANDARD COMMISSIONS.**

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TOTAL DENTAL

Type of Plan / Plan name	AGES	Annual Premium	Broker Commissions	Broker Commission at Renewal
DENTAL - HMO PLAN	All Ages	Base Premium	10.00%	10.00%
DENTAL - PPO PLAN	All Ages	Base Premium	10.00%	10.00%
DENTAL - ECLIPSE PLAN	All Ages	Base Premium	20.00%	20.00%

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UNITEDHEALTH ONE/GOLDEN RULE (PRIOR 10/2/18)

Type of Plan / Plan name	# of Lives	Annual Premium	Broker Commissions	Broker Commission at Renewal
MEDICAL - SHORT TERM - ELITE	All Ages	Base Premium	25.00%	N/A
MEDICAL - SHORT TERM - PLUS & COPAY	All Ages	Base Premium	22.00%	N/A
MEDICAL - SHORT TERM - VALUE	All Ages	Base Premium	27.00%	N/A
DENTAL - STANDALONE INCLUDING RIDERS	All Ages	Base Premium	12.00%	12.00%
DENTAL- PRIMARY INCLUDING RIDERS - (UHCLIC)	All Ages	Base Premium	20.00%	4.00%
DENTAL - PREMIER INCLUDING RIDERS - (UHCLIC)	All Ages	Base Premium	40.00%	4.00%

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UNITEDHEALTH ONE/GOLDEN RULE (PRIOR 10/2/18)

Type of Plan / Plan name	# of Lives	Annual Premium	Broker Commissions	Broker Commission at Renewal
ACCIDENT - SAFEGUARD PREMIER	age 18-59	Base Premium	40.00%	8.00%
ACCIDENT - SAFEGUARD PREMIER	age 60-64	Base Premium	8.00%	8.00%
ACCIDENT - SAFEGUARD	age 18-59	Base Premium	35.00%	8.00%
ACCIDENT - SAFEGUARD	age 60-64	Base Premium	8.00%	8.00%
TERM LIFE	All Ages	Base Premium	80.00%	5.00%
HOSPITAL - SAFEGUARD	age 60-64	Base Premium	10.00%	10.00%
HOSPITAL - SAFEGUARD	age 18-59	Base Premium	30.00%	10.00%
CRITICAL ILLNESS	All Ages	Base Premium	50.00%	10% - 2-10 ; 5% - 11+ yrs
DISABILITY INCOME	All Ages	Base Premium	50.00%	10% - 2-10 ; 5% - 11+ yrs

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UNITEDHEALTH ONE/GOLDEN RULE (EFF 10/2/18)

Type of Plan / Plan name	# of Lives	Annual Premium	Broker Commissions	Broker Commission at Renewal
SHORT TERM MEDICAL- COPAY SELECT A, PLUS SELECT A, PLUS ELITE A, VALUE SELECT A	All Ages	Base Premium	24.00%	N/A
SHORT TERM MEDICAL - COPAY SELECT, PLUS SELECT, PLUS ELITE II, VALUE SELECT	All Ages	Base Premium	20.00%	N/A
MEDICAL - SHORT TERM - VALUE	All Ages	Base Premium	24.00%	N/A
DENTAL - GEN INCLUDING RIDERS	All Ages	Base Premium	30.00%	5.00%
DENTAL 50+ INCLUDING RIDERS	All Ages	Base Premium	30.00%	5.00%
DENTAL - PREMIER INCLUDING RIDERS - (UHCLIC)	All Ages	Base Premium	40.00%	4.00%
DENTAL - PRIMARY INCLUDING RIDERS	All Ages	Base Premium	20.00%	4.00%
DENTAL - ESSENTIAL INCLUDING RIDERS	All Ages	Base Premium	4.00%	4.00%

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UNITEDHEALTH ONE/GOLDEN RULE

Type of Plan / Plan name	# of Lives	Annual Premium	Broker Commissions	Broker Commission at Renewal
VISION - STANDALONE	All Ages	Base Premium	25.00%	8.00%
ACCIDENT - SAFEGUARD PREMIER	age 18-59	Base Premium	40.00%	8.00%
ACCIDENT - SAFEGUARD PREMIER	age 60-64	Base Premium	8.00%	8.00%
ACCIDENT - SAFEGUARD	age 18-59	Base Premium	35.00%	8.00%
ACCIDENT - SAFEGUARD	age 60-64	Base Premium	8.00%	8.00%
ACCIDENT - PRO GAP, PRO GUARD, EXPENSE GUARD	All Ages	Base Premium	35.00%	8.00%
TERM LIFE	All Ages	Base Premium	80.00%	5.00%
HEALTH PROTECTOR GUARD	age 18-59	Base Premium	35.00%	12.00%
HEALTH PROTECTOR GUARD	age 60-64	Base Premium	12.00%	12.00%
HOSPITAL SAFEGUARD	age 18-59	Base Premium	30.00%	10.00%
HOPITAL SAFEGUARD	age 60-64	Base Premium	10.00%	10.00%
CRITICAL ILLNESS	All Ages	Base Premium	50.00%	10% - 2-10 ; 5% - 11+ yrs
DISABILITY INCOME	All Ages	Base Premium	50.00%	10% - 2-10 ; 5% - 11+ yrs

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