



**Andy Beshear**  
GOVERNOR

## PERSONNEL CABINET

Department of Employee Insurance  
501 High Street, 2<sup>nd</sup> Floor  
Frankfort, Kentucky 40601  
Phone: (502) 564-6534

**Mary Elizabeth Bailey**  
SECRETARY

April 1, 2024

«First\_Name» «Last\_Name»  
«Address\_1»  
«Address\_2»  
«City», «State» «ZIP\_Code»

Dear «First\_Name» «Last\_Name»:

A recent audit of dependent life insurance policies shows that you elected a dependent life insurance plan. You may have made this election when you were hired, or during a life insurance open enrollment period.

«Plan»

Only Qualified Dependents are eligible for dependent term life insurance coverage. A Qualified Dependent includes:

- Your spouse to whom you are legally married; or
- Your children which include your natural child, adopted child (including a child from the date of placement with the adopting parents until the legal adoption), unmarried foster child who resides with you and is supported by you or stepchild; and who, in each case, is under age 26.

For the purposes of determining who may become covered for insurance, the term does not include any person who:

- is on active duty in the military of any country or international authority; however, active duty for this purpose does not include weekend or summer training for the reserve forces of the United States, including the National Guard; or
- is insured under the Group Policy as an employee.

If you no longer have dependents who meet the definition of a Qualified Dependent as outlined above, please check the correct box on the next page, sign, date, and return to the address at the top of this letter. Your dependent life insurance plan will terminate the last day of the month from your signature date on this letter.

I no longer have a spouse who meets the definition of a Qualified Dependent and am requesting that my optional dependent life insurance be terminated.

I no longer have dependent children who meet the definition of a Qualified Dependent and am requesting that my optional dependent life insurance be terminated.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

«PERNR»

Please be sure to sign into KHRIS to ensure that you have a beneficiary designated for your free \$20,000 basic life insurance coverage.

Beneficiary means a person chosen to receive the insurance benefits. If there is a Beneficiary for the insurance under a coverage, the insurance benefit amount is payable to that Beneficiary.

To check your beneficiary: or to designate a beneficiary, follow these steps:

- Go to [khris.ky.gov](http://khris.ky.gov)
- Log in
  - Your KHRIS User ID and/or Password can be obtained by clicking the forgot KHRIS User ID link or Reset Password link
- Click on Life Insurance Beneficiary Change; a summary of your plans and beneficiaries display
- To make changes to your beneficiary, Click Next
- Click the Pencil Icon under Actions
- Make any necessary changes
- Click Next
- Click Save

If you have any questions, you may contact your local Insurance Coordinator at your benefits office, or call the Department of Employee Insurance, Optional Insurance Branch at 888-581-8834, option 5.