

# LIFE INSURANCE

# LIFESTYLE CONTINUANCE

## **GEBA GROUP TERM LIFE INSURANCE**

**So your loved ones can continue their lifestyle.**

### **NEW HIRE OFFER**

- \$100,000 guaranteed group term life coverage
- \$50,000 guaranteed spouse/partner insurance
- \$20,000 dependent child coverage
- Covers Acts of War and Terrorism
- Coverage you can keep when you retire or leave the federal government

Must apply within 60 days of hire date and be age 55 or younger.



Underwritten by:  
New York Life  
Insurance Company

## Provide your Family with Peace of Mind.

No one wants to think about death, but if you avoid planning for it now, you may be forcing your family to abandon the plans you've dreamed of.

GEBA's Group Term Life Plan—with coverage issued by New York Life Insurance Company—was designed for a simple purpose: to provide money to help maintain your family's hopes and dreams for the future. It's money to pay the mortgage, so they can continue to live in the family home; or for the college education they deserve. It can be used for a wedding that your daughter will remember for the rest of her life, or to help ensure your spouse can retire in comfort. And with coverage available on your spouse/domestic partner, you'll be better prepared to meet your financial responsibilities if your loved one were to die. Coverage under the Group Term Life Plan can help ensure your family's financial future is protected.

### **Up to \$600,000 in Coverage is Available**

Term Life's affordable rates help to make the decision to apply an easier one. Please see the rate sheet provided to determine the cost for your coverage.

As your needs increase, you can simply apply for more coverage\*. Any death benefit paid is generally free from federal income tax, under current IRS rules (section code 101(a)). Please consult with a tax advisor.

### **Additional Benefits**

**Spouse/Domestic Partner Optional Coverage**—Members may apply for term life coverage for their spouse or domestic partner, if the spouse or domestic partner is under age 65. Coverage amounts up to \$300,000 are available or 100% of the member's coverage, whichever is less.

**Dependent Child Coverage**—GEBA members may insure their eligible children (from live birth to 26 years) for amounts of \$20,000 for every covered child.

**Accidental Death & Dismemberment Coverage (AD&D)**—AD&D coverage (equal to 50% of your life insurance amount) is included under the GEBA Group Term Life Plan for members for no additional charge.

### **This is an important benefit—don't pass it by.**

The GEBA Group Term Life Insurance can provide your family with money to keep your plans for the future on track. Plan features such as coverage amounts up to \$600,000 and affordable rates help make the Plan an important benefit. Additionally, money from the Accelerated Benefit Option<sup>†</sup> feature can be used for whatever purpose you wish following a terminal diagnosis—pay medical costs, pay off your mortgage or take a vacation of a lifetime with your family.

### **Applying for Coverage is Quick and Easy—**

You can now apply **online** at [www.GEBA.com/termlife](http://www.GEBA.com/termlife). Your information is protected.

For some coverage amounts, there may be no medical tests. Just answer a few health questions.

Many participating GEBA members rely on the GEBA Group Term Life Plan for the protection they need. Providing that protection to your family could be one of the most important things you ever do for them.

### **Term Life Plan Features:**

- Coverage amounts up to \$600,000 available
- Coverage that includes Acts of War and Terrorism
- Coverage you can keep when you retire or leave the Federal Government

### **Apply Today**

Applications can be submitted the following ways:

- Securely online at [www.GEBA.com/termlife](http://www.GEBA.com/termlife)
- Complete the enclosed application or download an application from [www.GEBA.com/termlife](http://www.GEBA.com/termlife)
  - Mail your completed application to:  
**GEBA**  
**P.O. Box 206**  
**Annapolis Junction, MD 20701**
  - Email your completed application to [geba@geba.com](mailto:geba@geba.com)
  - Fax your completed application to **(301) 688-6694**

**Please call GEBA at (800) 826-1126 with any questions you may have.**

## 30-day FREE Look:

Once Insured, you have 30 days to review your certificate summarizing your coverage. If you're not satisfied, return your certificate, without claims, and your coverage will be invalidated. You'll receive a prompt refund of your premium.

\*All requests for coverage are subject to New York Life underwriting and approval.  
†See Certificate of Insurance for explanations of the Accelerated Benefit Option.



**How much coverage should I consider?**

While individual financial and personal situations affect the coverage needed, this calculator provides a simple way to estimate the life insurance amount you may require.

**Income Replacement:** \_\_\_\_\_

**Mortgage/Debt owed:** + \_\_\_\_\_

**College Tuition** (# of children x \$50,000): + \_\_\_\_\_

**Life Insurance Needed:** = \_\_\_\_\_

**Additional Information**

**Eligibility—Now All** civilian Federal employees, Military or contractors assigned to NSA-W under the age of 65 who are U.S. citizens are eligible to apply for Group Term Life Insurance. Covered members may also apply to insure their spouses/domestic partners under age 65. Please **visit [www.GEBA.com/termLife](http://www.GEBA.com/termLife)** or call (800) 826-1126 for information on applying for spouse or domestic partner coverage.

The total amount of coverage an individual may have under all group life insurance plans underwritten by New York Life Insurance Company may not exceed \$2,000,000.

All coverage is subject to New York Life’s approval of satisfactory evidence of insurability.

**Evidence of Insurability**—Many members will apply for coverage without the need for medical exams or tests; they may only need to answer a few medical questions. Depending on the amount of coverage applied for, and the medical history disclosed in the application, it may be necessary for New York Life to order a physical exam, a blood test, an ECG, or medical records from your physician.

**Beneficiary**—The life insurance proceeds are payable to the designated beneficiary. If there is more than one beneficiary, proceeds may be divided into equal or unequal shares. The proceeds are usually paid in a single sum, but as an alternate method of payment, periodic income may be elected. Several other modes of settlement also are available. One of these may be selected by mutual agreement with New York Life.

**Accidental Death and Dismemberment (AD&D) Insurance**—Your AD&D Principal Sum benefit is equal to 50% of your life insurance face amount. The AD&D Benefit Schedule chart shows the percentage of AD&D Principal Sum payable for each covered accidental loss.

The total payment for any accident will not be more than the full amount of the AD&D insurance. Proceeds for loss of life are payable to the beneficiary. Proceeds for other losses are payable to the insured member, if living, otherwise to the beneficiary. The AD&D insurance proceeds are payable in addition to any other insurance, including any life insurance benefit payable under the Plan. The exclusions listed on the last page of this brochure apply. AD&D does not apply dependent life coverages.

<b>AD&amp;D Benefit Schedule</b>	
<b>Loss (including Loss of Use) of which occurs within 365 days of accident</b>	<b>% of Principal Sum</b>
<i>Life</i>	<b>100%</b>
<i>Both Hands or Both Feet</i>	<b>100%</b>
<i>Sight in Both Eyes</i>	<b>100%</b>
<i>One Hand and One Foot</i>	<b>100%</b>
<i>One Hand or One Foot, and Sight of One Eye</i>	<b>100%</b>
<i>One Hand or One Foot</i>	<b>50%</b>
<i>Sight of One Eye</i>	<b>50%</b>
<i>Speech</i>	<b>50%</b>
<i>Hearing in Both Ears</i>	<b>50%</b>
<i>Speech and Hearing in Both Ears</i>	<b>100%</b>
<i>Thumb and Index Finger of Same Hand</i>	<b>25%</b>
<i>Quadriplegia</i>	<b>100%</b>
<i>Paraplegia</i>	<b>75%</b>
<i>Hemiplegia</i>	<b>50%</b>
<i>Uniplegia</i>	<b>25%</b>
<i>Triplegia</i>	<b>75%</b>
<i>Coma</i>	<b>1%*</b>

(See Certificate of Insurance for explanations of AD&D Benefits.)

\*Per month, up to 100 months, less any other Principal Sum benefits paid after 31 days of continuous coma. Does not apply to residents of New York.



**Effective Date of Coverage:** Insurance will take effect on the first of the month on or following the date your application is approved by New York Life Insurance Company, provided the initial contribution is paid within 31 days after you are billed and any person to be insured is performing normal activities of a person in good health of like age on the day of approval. If any dependent proposed for coverage is not performing his/her normal activities as required, coverage will not take effect until he/she is performing such activities date and the person is still eligible.

## Other Provisions

**When the Life Insurance Terminates**—Coverage can stay in force until you or your spouse reach age 80, and for your insured dependents as long as they remain otherwise eligible, provided the Group Policy plan is not terminated or modified by the policyholder to end insurance for the group of insureds to which you belong, or no request is made to terminate insurance. In addition, dependent coverage will terminate when the dependent spouse or child ceases to be an eligible dependent. Upon your death, the Dependent Child Coverage may be continued with Spouse Life Insurance, provided the Spouse coverage is in effect at the time of the member's death, subject to the same termination provisions shown above.

**Group Conversion Privilege**—The plan provides conversion privileges under certain circumstances of involuntary termination as described in the Certificate of Insurance.

**Suicide Exclusion**—If death results from, or caused by, suicide, while sane or insane: (1) A death benefit is not payable if you or your spouse dies within two years of the date you become a Covered Person. New York Life will refund any premiums paid for you or on your Spouse Term Life Plan insurance under this Coverage. (2) The amount of any increase in you or your spouse's death benefit is not payable if you or your spouse die within two years of the date of the increase. New York Life will refund any premiums paid for that increase.

**AD&D Exclusions**—LOSSES NOT COVERED—A Loss is not covered if it results from any of these: (1) Suicide or attempted suicide, while sane or insane. (2) Intentionally self-inflicted injuries, or any attempt to inflict such injuries. (3) Sickness, whether the Loss results directly or indirectly from the Sickness. (4) Medical or surgical treatment of Sickness, whether the Loss results directly or indirectly from the treatment. (5) Any infection. But, this does not include: (a) a pyogenic infection resulting from an accidental cut or wound; or (b) a bacterial infection resulting from accidental ingestion of a contaminated substance. (6) War, or any act of war, whether declared or not, civil or international, for two years after the effective date of coverage. (7) War or act of war, whether declared or not, civil or international, which occurs in the United States or the insured's country of permanent residence. (8) Travel or flight in any vehicle used for aerial navigation. This includes getting in, out, on or off any such vehicle. This (8) applies only if: (a) the person is riding as a passenger in any aircraft not intended or licensed for the transportation of passengers; (b) the person is performing as a pilot or a crew member of any aircraft; or (c) you are riding as a passenger in an aircraft owned, leased or operated by the participating Association. (9) Commission of or attempt to commit a felony. (10) being legally intoxicated or under the influence of any narcotic unless administered or consumed on the advice of a Doctor.

## IMPORTANT NOTICE:

How New York Life Obtains Information and Underwrites Your Request For Group Term Life Insurance

In this notice, references to "you" and "your" include any person proposed for insurance. Information regarding insurability will be treated as confidential. In considering whether the person(s) in your request for insurance qualify for insurance, we will rely on the medical information you provide, and on the information you AUTHORIZE us to obtain from your physician, other medical practitioners and facilities, other insurance companies to which you have applied for insurance and MIB, Inc. ("MIB"). MIB is a not-for-profit organization of insurance companies, which operates an information exchange on behalf of its members. If you apply for life or health insurance coverage, a claim for benefits is submitted to an MIB member company, medical or non-medical information may be given to MIB, and such information may then be furnished by MIB, upon request, to a member company.

Your AUTHORIZATION may be used for a period of 24 months from the date you signed the application for insurance, unless sooner revoked. The AUTHORIZATION may be revoked at any time by notifying New York Life in writing at the address provided. Your revocation will not be effective to the extent New York Life or any other person already has disclosed or collected information or taken other action in reliance on it, or to the extent that New York Life has a legal right to contest a claim under an insurance certificate or the certificate itself. The information New York Life obtains through your AUTHORIZATION may become subject to further disclosure. For example, New York Life may be required to provide it to insurance, regulatory or other government agencies. In this case, the information may no longer be protected by the rules governing your AUTHORIZATION.

MIB and other insurance companies may also furnish New York Life, its subsidiaries or the Plan Administrator with non-medical information (such as driving records, past convictions, hazardous sport or aviation activity, use of alcohol or drugs, and other applications for insurance). The information provided may include information that may predate the time frame stated on the medical questions section, if any, on this application.

This information may be used during the underwriting and claims processes, where permitted by law.

New York Life may release this information to the Plan Administrator, other insurance companies to which you may apply for life and health insurance, or to which a claim for benefits may be submitted and to others whom you authorize in writing, however, this will not be done in connection with test results concerning Acquired Immune Deficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV). We may also make a brief report of your protected health information to MIB, but we will not disclose our underwriting decision

New York Life will not disclose such information to anyone except those you authorize or where required or permitted by law. Information in our files may be seen by New York Life and Plan Administrator employees, but only on a "need to know" basis in considering your request. Upon receipt of all requested information, we will make a determination as to whether your request for insurance can be approved.

If we cannot provide the coverage you requested, we will tell you why. If you feel our information is inaccurate, you will be given a chance to correct or complete the information in our files. Upon written request to New York Life or MIB, you will be provided with non-medical information. Generally, medical information will be given either directly to the proposed insured or to a medical professional designated by the proposed insured. Your request is handled in accordance with the Federal Fair Credit Reporting Act procedures. If you question the accuracy of the information provided by MIB, you may contact MIB and seek a correction. MIB's information office is: MIB, Inc., 50 Braintree Hill Park, Suite 400, Braintree, MA 02184-8734, telephone 866-692-6901 (TTY 866 346-3642). For Canadian residents, the address is: MIB Information Office, 330 University Avenue, Suite 501, Toronto, Ontario, Canada M5G 1R7, telephone 416-597-0590. Information for consumers about MIB may be obtained on its website at [www.mib.com](http://www.mib.com).

**For NM Residents: PROTECTED PERSONS<sup>1</sup> have a right of access to certain CONFIDENTIAL ABUSE INFORMATION<sup>2</sup> we maintain in our files and they may choose to receive such information directly. You have the right to register as a PROTECTED PERSON by sending a signed request to the Administrator at the address listed on the application. Please include your full name, date of birth and address.**

<sup>1</sup> **PROTECTED PERSON** means a victim of domestic abuse: who has notified us that he/she is or has been a victim of domestic abuse; and who is an insured person or prospective insured person.

<sup>2</sup> **CONFIDENTIAL ABUSE INFORMATION** means information about: acts of domestic abuse or abuse status; the work or home address or telephone number of a victim of domestic abuse; or the status of an applicant or insured as family member, employer or associate of a victim of domestic abuse or a person with whom an applicant or insured is known to have a direct, close, personal, family or abuse-related relationship.

**New York Life Insurance Company**

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This brochure is a summary of your benefits and may not include all policy provisions, exclusions and limitations. A certificate of insurance with policy information, including limitations and exclusions, will be provided once coverage is approved. If there is a discrepancy between this document and the certificate issued by New York Life, the terms of the certificate will govern.

This Group Term Life Insurance Plan is Underwritten by:  
New York Life Insurance Company  
51 Madison Ave, New York, NY 10010  
Under Group Policy No. G-29555-0  
On Policy Form GMR-FACE/G-29555-1