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STARS AND STRIPES®

JULY 30, 2026

# INSURANCE Guide

## MIND THE GAP:
UNDERSTANDING GUARANTEED ASSET PROTECTION

## TRICARE 101:
MILITARY HEALTH BENEFITS BASICS

PROTECT YOUR FAMILY WITH LIFE INSURANCE

## HOME INSURANCE RATES:
KEY FACTORS THAT IMPACT YOUR COSTS

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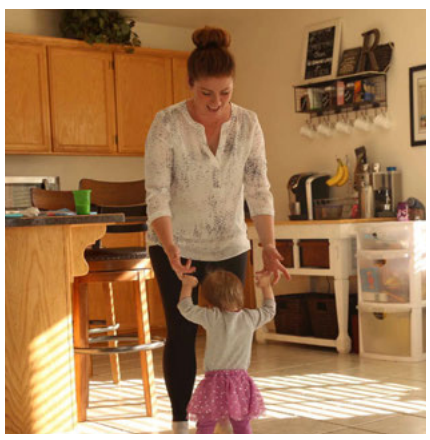


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HEALTH INSURANCE

# TRICARE Dental Program:
# GETTING COVERAGE FOR YOUR FAMILY MEMBERS

*Courtesy of* TRICARE Communications

**A winning smile needs maintenance–including dental care. If you're enrolled in the TRICARE Dental Program, you can get cost-effective, accessible dental services in the U.S. or abroad.**

"TRICARE offers a comprehensive dental benefit for military families," said U.S. Navy Cmdr. Xiang Li, dental program analyst at the Defense Health Agency. "Enrolling is easy, and there are many ways for families to use the coverage depending on their needs."

The TRICARE Dental Program (**TDP**) is a voluntary, premium-based dental plan administered by United Concordia. It's available for purchase by:

- Family of active-duty service members
- Family of National Guard and Reserve service members
- Non-activated National Guard and Reserve members, or those who aren't covered by the Transitional Assistance Management Program

Active-duty service members have separate and automatic dental coverage. They get their dental care at military dental clinics or through the Active Duty Dental Program.

## How to Get Coverage

Before you enroll in the TDP, check the Defense Enrollment Eligibility Reporting System at www.tricare.mil/deers to make sure your information is up to date. United Concordia might reject your enrollment if any information is missing or if the information in your enrollment request doesn't match what's in DEERS.

You can enroll in TDP any time, as long as your sponsor has at least 12 months remaining on their service commitment.

Here's how:

| | |
|---|---|
| **Online** | • **Log in to milConnect.**<br>• **Choose "Benefits," then "Beneficiary Web Enrollment."**<br>• **Choose the "Dental Enrollments" tab to enroll in a dental plan.**<br>***Note: This option isn't available overseas.*** |
| **Phone** | **CONUS: 844-653-4061**<br>**OCONUS (toll-free): 844-653-4060**<br>**OCONUS (toll): +1-717-888-7400** |
| **Mail** | **Download the TRICARE Dental Program Enrollment/Change Authorization Form at www.UCCITDP.com.**<br>**Mail it with your first monthly premium to:**<br>**United Concordia**<br>**TRICARE Dental Program**<br>**P.O. Box 645547**<br>**Pittsburgh, PA 15264-5253** |

## When Does Coverage Take Effect?

After United Concordia receives your enrollment form, they'll verify your family's eligibility in DEERS and check that your premium payment is correct before verifying your enrollment.

All your eligible family members need to enroll. If you have a family plan (two or more people), enrollment will be automatic for new babies on the first day of the month after they turn one.

Your effective date of coverage depends on the date United Concordia receives your enrollment application and first month's premium payment. If your enrollment is verified by the 20th of the month, your coverage starts on the first day of the next month. After the 20th of the month, your coverage starts on the first day of the following month. For example, an enrollment verified between Jan. 21 and Feb. 20 would take effect on Mar. 1.

**Important**: If you get any dental care before your coverage start date, you'll have to pay for the full cost of your care.

There's also a minimum enrollment period of 12 months. After that, you can cancel any time.

## Costs and Claims

Premiums and cost-shares vary depending on sponsor and member status, as described in the TRICARE Dental Program Brochure. You'll need to pay the first month's premium before your coverage takes effect. If your dentist is non-network and doesn't file claims with United Concordia, you can submit a claim directly to United Concordia.

## How to Find a Dentist

You can see any licensed and authorized dentist you choose in the CONUS service area, but staying in network saves you money and paperwork. To find a network dentist, you can:

- Use the Find a Dentist Tool at www.uccitdp.com
- Call United Concordia for help.

In OCONUS locations, dentists may ask you to pay for covered services up front. If you see a TRICARE OCONUS Preferred Dentist, the most you should pay at the time of your visit is the member cost-share portion of the covered service, and your dentist will file claims for you.

## What's Covered

TDP covers a wide range of dental services, from preventive care like cleanings and sealants, to fillings, oral surgeries, and dental implants or dentures. TDP also helps pay for orthodontic services like braces and retainers for members up to age 21, or 23, depending on eligibility.

## Other Things to Know

***Create an account with United Concordia***

After you enroll, you can create an account with United Concordia. You can use your account to:

- View dental coverage
- Check a claim
- View claims history
- View explanation of benefits
- Register a chronic condition, pregnancy, or special need
- Choose communication preferences (such as text, email, or mail)
- Access messages in a secure messaging center

## How to Get Help

TDP makes it easy to keep your family's smiles shining. For more details, check out the TRICARE Dental Program Handbook. Contact United Concordia with any questions.


# TRICARE 101:

## Military Health Benefits Basics in Five Minutes or Less

*Courtesy of Military OneSource*

**TRICARE is the healthcare program for almost 9.4 million service members, retirees and their families around the world that provides military health benefits and healthcare support to ensure mission readiness. Whether you already have TRICARE or are just starting the enrollment process, take the next five minutes to learn the basics, including how to navigate recent changes.**

### TRICARE Enrollment: Important Information Before getting started

There is a lot to know about the military healthcare program before you decide which plan is best for you and your family. TRICARE has implemented an open season for enrolling in its healthcare plans. Here are important items to know.

- TRICARE open enrollment dates run from the second week of November to the second week of December, and it is your only chance to change or update your TRICARE plan outside of a qualifying life event like PCS orders, births and deaths, and marriage and divorces.
- You or your service member sponsor will need to register the family in the Defense Enrollment Eligibility Reporting System, or DEERS. You should ensure your contact information remains current year round.
- The TRICARE beneficiary group, Group A or B, determines things like enrollment fees and out-of-pocket costs.
- Several factors go into just how much you'll pay for your military health benefits. Find your TRICARE costs, including copays, enrollment fees and payment options at www.tricare.mil.

### Available TRICARE Plans

There are many different TRICARE plans, but TRICARE Prime and TRICARE Select are the two primary options for active-duty service members and their families. TRICARE Prime Remote works like TRICARE Prime for active-duty service members and their families assigned to geographical regions where there is no military hospital or clinic nearby. In fact, all active-duty service members must enroll in TRICARE Prime—and will never pay out-of-pocket for any type of care within the network. Their family members and other beneficiaries, though, may choose other TRICARE plans and may incur out-of-pocket fees depending on the plan they choose.

See below for brief descriptions of the most common TRICARE plans available for service members, families and retirees. You can also visit the Plans & Eligibility section on TRICARE's website (www.tricare.mil) to find information on all TRICARE plans and to compare plans.

**➥ TRICARE Prime**

TRICARE Prime is a managed care option health plan, which is similar to a health maintenance organization, or HMO. This military health plan centers around receiving care within a given network of medical facilities and providers, called a Prime Service Area. You may incur additional costs if you seek care outside of the provider network.

**➥ TRICARE Select**

TRICARE Select is a fee-for-service health plan, which is similar to a preferred provider organization, or PPO. You'll pay a set fee (copayment) or percentage (cost-sharing) every time you go to the doctor, but it'll be less for in-network providers than out-of-network providers. Also, unlike TRICARE Prime, TRICARE Select does not require you to get a referral from your primary care physician for specialist treatment like surgeries or physical therapy.

**➥ TRICARE Young Adult**

TRICARE Young Adult (TYA) is a military premium-based health plan designed to cover qualified adult children who have aged out of their sponsor's regular TRICARE coverage at age 21—or 23 if attending college. TYA is available in either TRICARE Prime or TRICARE Select formats, depending on the option chosen at the time of enrollment. You can enroll in this benefit until age 26, or until you otherwise become ineligible.

**➥ TRICARE For Life**

TRICARE For Life is Medicare-wraparound coverage for those TRICARE beneficiaries who have Medicare Part A and B. You don't have to enroll in this, as it is an entitlement earned as part of military service. However, to be automatically enrolled by DEERS, you must be eligible for both Medicare Part A and B, and be paying Medicare Part B premiums.

**➥ TRICARE beneficiaries eligible for Federal Employee Dental and Vision Insurance Program (FEDVIP)**

TRICARE eligible retirees and their families are newly eligible to enroll in the Federal Dental and Vision Insurance Program, currently offered to all federal government employees. FEDVIP has its own open season for new enrollments that occurs at the same time as TRICARE open season in the second week of November to the second week of December. FEDVIP offers a choice of 10 dental insurance carriers. The singular TRICARE Retired Dental Program ended Dec. 31, 2018. And, for the first time ever, retirees and active-duty family members are eligible to purchase vision insurance from four carriers through FEDVIP. Beneficiaries must enroll during open season or after a qualifying life event at the official website.

**➥ TRICARE Reserve Select**

TRICARE Reserve Select is a premium-based plan for qualified selected reserve members and their families. When reserve service members go on active duty, they must enroll in TRICARE Prime, and their families may enroll, too. However, when leaving active duty, TRICARE Reserve Select can replace TRICARE Prime.

For a comprehensive list of plan details and changes to the TRICARE program, visit the main TRICARE website at www.tricare.mil and see how your healthcare may be impacted.

# Understanding TRICARE Deductables

*Courtesy of TRICARE Communications*

**Have you ever heard the word "deductible" and wondered what it means? You aren't alone. Healthcare cost terms can be tricky, but we're here to make them easy to understand.**

"A deductible is a set amount of money you must pay out of pocket before TRICARE starts to pay for your care," said Debra Fisher, TRICARE health system specialist, TRICARE Health Plan, at the Defense Health Agency. "Knowing your deductible is the first step in planning your family's healthcare budget."

## How a Deductible Works

Imagine your deductible is like an empty bucket. Every time you see a provider, you put money into the bucket. Once the bucket is full, your deductible is met.

After your bucket is full, TRICARE steps in to help pay your medical bills. You'll usually just pay a smaller amount, called a copayment or cost-share, for the rest of the year.

TRICARE uses a calendar year for tracking your deductible. That means your bucket empties out every Jan. 1, and you start filling it again.

## Which TRICARE Plans Have a Deductible?

TRICARE has many different plans. Some have a deductible, and some don't:

- **TRICARE Select:** If you use TRICARE Select, you have a yearly deductible. You must pay this set amount every calendar year before TRICARE benefits are payable.
- **Premium-based plans:** Premium-based plans, like TRICARE Reserve Select, TRICARE Retired Reserve, TRICARE Young Adult, and the Continued Healthcare Benefit Program, also have deductibles.
- **TRICARE Prime:** If you're enrolled in TRICARE Prime, you usually don't have a deductible. But be careful: If you have TRICARE Prime and see a provider outside your network without a referral, you'll use the point-of-service (POS) option. If you do this, you have a separate POS deductible, which is higher than standard cost-sharing.

## What Counts Towards Your Deductible?

Now, what money actually goes into your deductible bucket?

- **Doctor visits and hospital care:** When you pay for covered visits, those costs count. But remember, they only count up to the TRICARE-allowable charge. If a provider charges $200, but the TRICARE-allowable charge is only $100, only the $100 goes into your bucket.

## What Does NOT Count?

There are a few things that don't go into your bucket:

- **Monthly premiums:** If you pay a monthly premium, that money doesn't go into your deductible bucket.
- **Non-covered services:** If you buy something TRICARE doesn't cover, like a special non-medical comfort item, that extra money doesn't count toward your deductible.
- **Pharmacy costs:** The money you pay for your covered drugs at the pharmacy doesn't go toward your deductible.

## The Special Rules for TRICARE Select

If you're a Group B retiree with TRICARE Select, you need to pay close attention. You actually have two separate buckets. You have one deductible for providers in the TRICARE network, and a separate deductible for non-network providers. If you fill your network bucket, it doesn't fill your non-network bucket. You must pay the non-network deductible in addition to the in-network one if you choose to see non-network providers.

## How to Check Your Bucket

Do you want to know how close you are to filling your deductible bucket? Just look at your explanation of benefits (EOB) after a medical visit. Your EOB will have a line that shows exactly how much money was applied to your deductible.

Once you meet your deductible and pay your copayments and cost-shares, you also build up to your catastrophic cap. This is a limit on how much you pay out of pocket for your covered care in one year. Once you hit this cap, TRICARE pays 100% of your covered care.

## The Bottom Line

Understanding your deductible is the first step in managing your family's healthcare budget. By knowing whether you have a bucket to fill and tracking your progress through your EOBs, you can avoid surprises at your next medical visit.

Remember, once your deductible is met, TRICARE steps in to pay a large share of your healthcare costs—and the catastrophic cap is there to limit your out-of-pocket expenses.

If you have questions about your specific plan's deductible and copayments or cost-shares, visit the TRICARE Plan Finder at www.tricare.mil/plans/planfinder or log in to your regional contractor's portal to see your current balance.

# Take Charge of Your Health:
## Men's Preventative Services Covered by TRICARE

*Courtesy of* TRICARE Communications

**When's the last time you went to the doctor for a check-up? Now's a great time to check in on your health and learn about the men's health and preventive services that TRICARE covers. TRICARE covers a range of screenings and services designed to keep you healthy at every stage of life.**

"Men's health needs change at every stage of life, and preventive care is one of the best tools for staying ahead of potential issues," said Jeannine Pickrell, MS, RN, Director of Population Health, TRICARE Health Plan, at the Defense Health Agency. "TRICARE covers key screenings and services to make it easier for men to stay on top of their healthcare needs."

### Cancer Screenings

Catching cancer early gives you the best chance for successful treatment. TRICARE covers two key screenings for men.

**Prostate Cancer**

TRICARE covers annual digital rectal exams and prostate-specific antigen, or PSA, testing. You may qualify if you're:

- Age 50 or older with at least a 10-year life expectancy
- Age 45 or older with a father, brother, or son diagnosed with prostate cancer before age 65
- African American and age 45 or older, regardless of family history
- Age 40 or older with two or more family members who have had prostate cancer

Talk with your provider about whether PSA testing is right for you.

**Testicular Cancer**

TRICARE covers annual testicular cancer exams for men ages 13–39 who have a history of cryptorchidism, orchiopexy, or testicular atrophy.

### Mental Healthcare

Your mental health matters just as much as your physical health. TRICARE covers a range of mental health resources and services. These include support for suicide prevention. Visit www.tricare.mil/mentalhealth for additional information.

### Sexual Health

Sexual health is an important part of your overall well-being. TRICARE offers resources to help you stay informed and protected. Topics include:

- HIV/AIDS prevention and treatment
- Sexually transmitted infection prevention

### Surgical Sterilization

TRICARE covers vasectomies. TRICARE may also cover surgical sterilization reversal if your provider determines it's medically necessary due to a disease or injury.

### Take the Next Step

Don't wait for a problem to see your provider. Schedule your preventive screenings today.

HOMEOWNERS INSURANCE

# Factors that Affect Your Home Insurance Rates

*By Brookie Lutz, CFP, Courtesy of USAA*

**From the age of your home to its location and building materials, there are many factors that can impact your property insurance rates.**

**Depending on what part of the country you live in, homeowners insurance can be purchased for a reasonable annual cost. But if you live in a state that sees its fair share of natural disasters, the premium may be higher than other states.**

**Homeowners and renters insurance premiums consider a number of factors that determine the rates policyholders see. Not all providers use the same criteria to calculate your premium. But here are 20 things that could influence your property insurance rates.**

## 1. Rebuild or Replacement Cost

When insuring your home, one of the biggest factors is the rebuild or replacement cost. Many people confuse replacement cost with market value.

Replacement cost is the amount you'd have to spend to rebuild the same house in the same spot from the ground up. Think of a home wiped off its foundation in the aftermath of a tornado. That rebuild project would be concerned with replacement cost.

Market value is different. It involves more than just the value of your house. Market value also considers the value of the land and many factors that make your home attractive to potential buyers such as the view, the neighborhood, the school district and nearby amenities.

If you base your replacement cost solely on a higher market value, you may overestimate the amount of coverage you need. This is a common mistake that leads many homeowners to overpay for insurance.

Or, you may make the opposite mistake and underestimate replacement cost if you base it on a lower market value. If you only buy enough insurance to cover your mortgage, you could face serious financial consequences in the event of a loss.

## 2. Where Your Home is Located

Location can help your insurance company predict future claims and how much it'll cost to pay for them. For example, homeowners living in Tornado Alley—the area from North Texas to South Dakota—typically see insurance premiums that are up to 50% more than the national average. Conversely, homeowners in Hawaii generally have the least expensive premiums.

Large cities often have higher real estate values, leading to higher construction costs for repairs. Vacation and retirement areas where there is rapid economic growth have similar challenges. In addition, urban areas tend to have more crime, including theft and vandalism. That can lead to more insurance claims in your area.

Generally, regional weather patterns and natural disasters also lead to bigger claims. Frequent weather events or natural disasters can play a role in the overall risk that your location has. More on regional risks later on in this list.

Areas with lower growth, less crime and fewer major storms usually have lower insurance premiums.

## 3. Amount of Property Insurance Coverage

As with other types of insurance, you have some choice as to how much coverage you want and how much risk you're willing to take. Your homeowners policy may include many different types of protection, such as:

- Dwelling coverage
- Personal belongings
- Loss of use
- Personal liability
- Medical payments
- Other structures

Although homeowners insurance isn't required by law, lenders may require you to carry property insurance. You may need insurance for at least the amount of your mortgage until you pay off your home loan.

## 4. Size of Your Homeowners Insurance Deductible

Your deductible is the amount of money you pay out of pocket on a claim before your insurance kicks in. Deductibles can be offered as a flat dollar amount or a percentage of your home's insured value.

Choosing a higher deductible may reduce your yearly premium while a lower deductible may increase it. However, a higher deductible does mean you'll pay more in the event of a claim before your insurance will provide benefits.

Your deductible may be a big-ticket expense. For example, a 1% deductible on a $250,000 home is $2,500. Make sure to save for your deductible in an emergency fund to better protect yourself from the unexpected.

## 5. Credit History and Insurance Score

To calculate your premium, insurance providers may check your credit history, although it's not allowed in all states. A credit report contains information about how you manage your money, including:

- The number and types of accounts you have
- Your credit limits or loan amounts
- Current account balances

- The length of your credit history
- Any bankruptcies
- Any past-due accounts sent to a collections agency
- New applications for credit or service
- Your payment history including timeliness, amount paid, etc.

Credit bureaus use this information to calculate your credit score. Insurers can use it to create an insurance score. This score helps your insurance company predict losses, including how likely you are to file a claim or pay your premium on time.

## 6. Age and Condition of Your Home

Older, run-down homes may have higher insurance premiums than newer or well-maintained homes. Some insurers even offer a discount for newly built homes.

Insurance is all about risk for you and for your insurance company. Often, older homes aren't up to current plumbing, heating, wiring or roofing standards. That could increase the likelihood of a claim. The same is true if your home hasn't been properly cared for.

Some claims may not be covered if your insurance company determines the damage was a result of neglect.

## 7. Claims History

Looking at past claims can also help your insurer predict the likelihood of future claims. When an insurance company reviews claims history, they can approach it from multiple angles.

1. *Your history of making claims.* If you're a "frequent flyer" when it comes to theft, damage or liability claims, your insurer may choose to increase your rate. Going claims-free for an extended period of time could qualify you for a discount.
2. *The history of claims made on your property.* "Lemon laws" are only for cars, not homes. And while you may not be aware of claims history when buying a home, your insurance company might. If your house looks like a "lemon," it might affect your premium.
3. *Claims made in your area.* Another way that location may play into your insurance rate is the quantity of claims made in your area. However, some states prohibit the use of your ZIP code as a rating factor.

## 8. Materials Used to Build Your Home

Some building materials are made to last and are strong enough to withstand wind, fire, rain and decay. Others aren't. That's why homes built with brick or masonry often have lower premiums than wood frame homes.

Upgrades inside your home may also affect your rate if they have a significant impact on your home's replacement value.

## 9. Your Catastrophe Exposure

Natural disasters can also influence rates. Examples include hurricanes, earthquakes, flooding, hail, snowstorms, freezing rain, tornadoes, high winds and forest fires.

For example, if you live in the Southeast United States, your property is more susceptible to hurricane damage. Homeowners in Montana will have to worry about ice and snow from winter storms. Meanwhile, those in California may be more concerned about earthquakes and wildfires.

Insurers may even factor in the risk of riots and terrorist attacks in your area to calculate your premium.

Events like these can cause catastrophic damage to your property. So you'll likely pay more for insurance if they're common in your area.

You may be able to save on your premium by making your home more disaster resistant. Reinforcing your roof, adding storm shutters or retrofitting an older home to withstand earthquakes can help reduce the damage a disaster may cause to your property.

## 10. Distance From a Fire Station

When it comes to fires, every second counts. That's why your home's proximity to a fire department can affect your property insurance rate. The sooner you can get help in the event of a fire, the less damage it may cause—which means your claims may be smaller too.

## 11. Type of Pets You Have

Some insurers may also increase your premium or choose not to offer coverage based on certain dog breeds that could be considered higher risk breeds.

While your own four-legged friend may be a total sweetheart, your insurance company may still feel there's a risk. That's because liability claims for dog bites can be quite expensive, especially if there are legal fees involved.

## 12. Whether You Have a Pool or Other "Attractive Nuisances"

Turning your backyard into your own private oasis or your children's adventure zone is a lot of fun.

But pools, hot tubs, trampolines and play structures are what insurance companies like to call "attractive nuisances." No matter how enjoyable they are, they can still cause injuries to people on your property. And those injuries can turn into expensive liability claims.

Keep in mind that if you own a pool, your insurer may require a fence around the pool for it to be covered. Not only will this help prevent children from jumping into the pool unattended, it could also help protect you from legal fees and medical expenses if anyone gets injured.

## 13. Adding Optional Coverage

If you want more coverage than your base insurance policy includes, you may be able to purchase additional policies to enhance your overall protection.

**➥ Umbrella insurance**

A personal umbrella policy can offer extra liability coverage, so you have financial protection from additional damages and out-of-pocket legal expenses.

Umbrella insurance can also protect you against certain types of claims that aren't covered by your home insurance, like libel, slander and invasion of privacy.

**➥ Flood insurance**

Whether it's caused by hurricanes, rain, melting snow or other events most homeowners insurance policies don't cover flooding. You need additional coverage for floods.

If you live in a high-risk area, you may already know this. In fact, your mortgage company may have required you to get flood insurance before approving your loan. However, even low-risk areas, including deserts, can be impacted by floods, which means there may be financial risk if you're not covered by flood insurance.

**➥ Earthquake insurance**

As with flooding, standard homeowners and renters policies typically don't cover earthquakes. You'll need to purchase additional coverage to protect your property from the potentially catastrophic damage of a major quake.

**➥ Personal property extensions of coverage**

With many insurance policies, the contents of your home are covered as a flat percentage of your home's insured value. For example, if your contents coverage is 50% and your home is insured for $200,000, you would have $100,000 in coverage for the contents of your home.

But, if you own special, valuable items such as jewelry, cameras, musical instruments, firearms or fine art, you may want extra coverage on top of your homeowners or renters policy. Some insurers call this "extra contents" coverage. We call it Valuable Personal Property insurance, or VPP.

An added benefit of VPP is that it can also provide coverage if your items are accidentally damaged or lost, and there's no deductible. You should always check with your insurer to confirm the exact details of your coverage.

**➥ Home sharing coverage**

If you earn extra income by renting out a room in your home or the entire place, you may want to add home sharing coverage. Home sharing coverage is meant to help protect the property of the homeowner who is considered the primary resident. This coverage is unique for hosting people in your home. It is different from rental property insurance.

## 14. Roof Condition

Your roof is your home's front line of defense against the elements, including rain, wind, snow and more.

But if your roof is older or damaged, it may not be able to do its job of keeping moisture away from your home. And make no mistake, water damage can be a big problem for you and your insurance company.

The good news is, if you repair an older roof or get a brand new one, your insurance company may reduce your premium since it can help protect you from other, more expensive losses. For example, discounts may be available for roofs that are made with hail-resistant materials.

## 15. Home Safety and Protective Features

You can take steps to improve the safety of your home. Protect your family from major sources of risk by installing fire sprinklers and flood detection devices, adding deadbolts to your doors, and using security systems. As a result, your insurance provider may offer a discount on your home insurance premium.

## 16. Staying Loyal to Your Insurance Provider

Depending on the company, you may get better rates by staying with the same insurance provider for many consecutive years, rather than switching between providers from year to year.

## 17. Bundling Multiple Policies

Many providers will offer discounts on your home or renters coverage if you also carry an auto insurance policy. It's another way your insurance company can reward you for being a loyal member and it can help you manage your insurance policies all in one bundle.

## 18. Heating Your Home with a Wood Furnace or Wood Stove

Wood furnaces and stoves can be cozy, but they can also increase your insurance rate. That's because these types of fixtures are more likely to cause house fires than other heating systems.

Your insurance company may also require professional installation or an inspection before they provide coverage. If you choose to install the stove yourself and your home later burns down as a result of poor workmanship, your insurance provider may decide the damage is not covered.

## 19. Home Improvement or Renovation Projects

As we've already pointed out, older properties tend to have higher insurance rates, often because certain features of the home aren't up to modern building standards. If you choose to update those features, you may be able to decrease your premium by reducing the likelihood of a claim.

On the other hand, some home improvement projects—especially large-scale ones like putting on an addition or gutting the kitchen—could increase your home's value. If it'll cost your insurance company more to rebuild or replace your home, your premium will probably go up.

## 20. Age and Employment Status

Some insurance providers offer a discount for customers who are at least 55 years old and retired. Why? Because retirees tend to spend more time at home than working people. That means they have more time for home maintenance and are less likely to be burglarized.

## Get the Coverage You Need

There are many factors that impact property insurance rates, so it's important to understand what insurance companies look for. Talk about your options with your insurance provider so you'll make the best coverage decisions for you and your family.


# What You Need to Know When Filing an Insurance Claim for the First Time

Courtesy of USAA

**If you've never filed an insurance claim before, it can be confusing. Here's what to do after a car accident or home emergency, plus common issues to avoid.**

## Tips to Help You Understand the Claims Process

Car and house problems are no fun, especially when they're caused by theft, vandalism, a natural disaster or a collision. Fortunately, if you have the appropriate insurance policies in place, they can help with repairs and reduce the financial impact.

But let's be honest: All you want is to get your home or car back to normal and put the incident behind you. Whether you found a water leak in your home or you were involved in a car accident, it's easy to get confused while you're trying to figure out how to deal with the problem.

Do you call a vendor like a plumber or a tow company right away? Do you hit Google searching for contractors? At what point do you contact your insurance company?

If you plan to use your insurance benefits, you'll need to go through the claims process.

While insurance companies try to make claims as quick and painless as possible, sometimes things can get complicated. Between finding a trusted contractor to complete the repairs and receiving the payout from your insurance company, you might feel stuck in the middle.

Your insurance company may have a preferred provider or contractor network to help expedite your claim. Some states use assignment of benefits, or AOB, clauses to allow contractors like roofers and mechanics to work with insurance companies and spare policyholders from playing the middleman.

## What is a Preferred Repair Facility or Contractor Network?

Sometimes, it can be confusing to know what you're supposed to do first in the event of damage to your home or car. For example, let's say a pipe starts leaking in your home, damaging your ceiling. After you deal with the immediate problem by turning off the main water into your home, what next? Do you call a plumber? How do you deal with any mold issues? What's the process?

Contacting your insurance company before you call any service providers can be a good first step. Many insurance providers work with a network of trusted vendors, contractors and repair facilities, so they can help guide you through the repair process and make things go more smoothly.

But whether you elect to go with a preferred vendor or decide to use your own contractor, it's important to read and understand any estimates or agreements that are put in front of you.

Things like an assignment of benefits, or AOB, are often used to expedite claims, but there are important considerations that policyholders should know.

## How Does an Assignment of Benefits Clause Work?

If your insurance contract includes an AOB clause, you can allow a third party to "stand in your shoes" and seek payment from your insurance company.

An AOB is intended to make things quicker and easier on policyholders. Since insurance claims can get a little tricky, it can be challenging and time-consuming to navigate, especially if you've never previously filed a claim.

For a car claim, signing an AOB means you just drop off your ride to get repaired and pick it up when it's done. The vendor then sorts out the details of getting paid by your insurance. Pretty straightforward, right?

But there can still be problems using an AOB. This is why you should thoroughly read and understand any document put in front of you during a claim.

## AOB Challenges for Insurance Policyholders

While an AOB authorizes the third party to act, one problem with removing yourself from the claim process is that, well, now you're not part of the claim process. Not such a big deal if your repairs get done on time and to your satisfaction. But what if you have questions about your repairs? What if there's an unexpected delay?

When you sign an AOB for your insurance policy, the repair shop or contractor becomes the policy beneficiary for the claim, not you. As a result, you may lose transparency and control over your claim. Your insurance company may even be limited in what it can do to help.

This is why it's so important to know and understand what you are signing. It can impact your rights during a claim.

Let's say you had a leak in your home and begin work with a contractor to repair the damage and manage the claim on your behalf. Maybe the work stalled or you were presented with explanations of the scope of work. Something may seem fishy and you want to get to a resolution. Signing an AOB may limit what your insurance company can tell you or do to support you.

Unfortunately, AOBs have been associated with fraud and increased litigation in some states. And because of inflated claims costs and lawsuits, policyholders might ultimately see their premiums increase or have poor claims experiences.

## What Should You do When Filing a Claim?

First and foremost, contact your insurance company. They can provide next steps for your situation. Take pictures of your home or vehicle and document what happened as best as you are able. If you go directly to a vendor or contractor first, read and understand any documents that require your signature.

Second, know who you're doing business with. Find reputable vendors or seek direction from your insurance company if there is a preferred vendor to use. AOBs are legally binding, and they can give vendors power to exaggerate the scope of your claim, with or without your knowledge. So, it's important to work with a vendor you can trust.

Lastly, make sure you have a clear understanding of your policy and what you should expect during the claims process.

Always keep an eye out for AOB clauses on any document from a third-party vendor so you can weigh the pros and cons. Don't unknowingly sign away your rights or policy benefits.

Most insurance companies want to make it easy to file your own claims. They want to keep you as a happy customer. Filing your claim on your own can help you keep control of the policy benefits you pay for. And if you do elect to use an AOB, just make sure you fully understand it before you sign.

LIFE INSURANCE

# WHAT HAPPENS WHEN Term Life Insurance Expires?

*By Matt Lyon, Courtesy of USAA*

**What happens when your term life insurance expires? Explore your options: You can extend coverage, convert it to permanent insurance or shop for a new policy.**

Outliving your term life insurance policy sounds like a good thing—after all, you're still alive. But you might be wondering: What do I do now? What exactly is expiring?

Because you see, the word "expire" is sometimes misunderstood when it comes to term life insurance. Usually expiration means that the policy has reached its end date and you'll no longer be covered. But sometimes expiration just means the level premium period is going to end, leaving the policy owner with three common options:

1. Continue your current policy based on your carrier's stipulations and contract options.
2. Potentially convert your term policy to a permanent policy.
3. Shop for a new life insurance policy.

Let's review how the two main types of term insurance work to better understand how these options apply.

## Understanding Term Life Insurance

A term life insurance policy provides coverage for a set number of years or to a certain age limit. The premiums are set from a variety of factors, including the policy's value and your age, gender and health.

If you die while your term life policy is active, your beneficiaries will receive a payout from the insurance company. If you die after your term policy has expired, there's no payout for your beneficiaries.

There are two basic types of term life insurance:

**➥ Annual renewable term insurance**

These policies last until a certain age and have no specific level premium range. Instead, they renew every year—without a medical screening or application, usually at a fixed death benefit amount. But keep in mind that your policy premiums likely will increase from year to year as you age, which may eventually make the policy too expensive.

**➥ Level term insurance**

Usually covering a guaranteed period of 10 to 30 years, these policies offer fixed death benefits and fixed premiums. The premiums may start out higher than a comparable annual renewable policy. But over the course of the level period, you tend to save money with level premiums. When this premium guaranteed period ends a few things can happen.

1. The policy becomes a form of renewable coverage where the death benefit can stay the same, but the premiums increase every year.
2. The policy becomes a form of renewable coverage where you can choose a lower death benefit than the original policy. This effectively lowers the cost, with premiums that still increase every year.
3. The policy becomes a form of decreasing term protection where the premium stays level, without a guarantee, and the death benefit decreases each year.
4. The policy becomes a combination of types, experiencing reoccurring premium increases and yearly death benefit decreases.
5. The policy expires.

These changes after the guaranteed period are just some common examples of what can happen depending on your life insurance carrier and contract.

## What Are my Options for Different Scenarios?

Depending on your personal needs, you have several choices if you've aged out of your policy or the level guaranteed period is going away.

**➥ Extend your current term life coverage.**

You've officially outlived your term policy when you reach the age that your life insurance policy expires. For most policies, this age is in the 80s or 90s, but some policies without a medical exam expire at a much younger age.

If your policy is an annual renewable term, keeping the term policy past the age limit isn't usually an option. But if you have a level term policy where you've outlived the level period, your policy may allow you to extend coverage.

If this is a choice, some policies automatically switch into an annual renewable policy. This means your coverage will now expire at a certain age, your premiums are no longer guaranteed and your coverage amount may change. As you can imagine, this can cause an unpleasant surprise after 20 or 30 years of steady, consistent premiums and protection.

On the one hand, the extended coverage rates could become unaffordable very quickly. And if not, they can be met with coverage amounts that decrease each year.

You may still want to consider extending your coverage depending on the policy specifics, your personal needs and your ability to qualify for new coverage. For example, maybe you still need life insurance but know that you're uninsurable.

Extending your coverage may let you keep your policy without requiring underwriting or a health screening. Some policies also allow you to decrease your death benefit amount, which can help make the extended coverage more affordable.

It's important to plan ahead and review the details of your existing policy with your life insurance company. They'll be able to give you specifics on the maximum premium, anticipated cost and benefit changes when keeping the policy.

**➥ Convert your term life policy into a permanent life insurance policy.**

Whether you have a level term policy or a yearly renewable policy, you likely have what's known as a conversion privilege. During this period, you're allowed to convert part or all of your term policy into a permanent life insurance policy.

This could be beneficial for many reasons. For one, converting doesn't require a new medical exam or health screening. This is beneficial if your health situation has changed since your original life insurance approval. The new policy may also include a cash value benefit.

Conversion is helpful if you've experienced a change in your life insurance needs. Maybe you have fewer financial obligations, or your budget has increased. This choice gives you a permanent, long-term protection solution.

Keep in mind that the premiums are likely to increase. They may not be affordable compared to the death benefit that you need.

**➥ Shop for a new policy.**

If you've reached the end of your annual renewable policy, shopping for new coverage may be your only choice. A new policy often requires underwriting and may be more expensive than your original premium based on age alone.

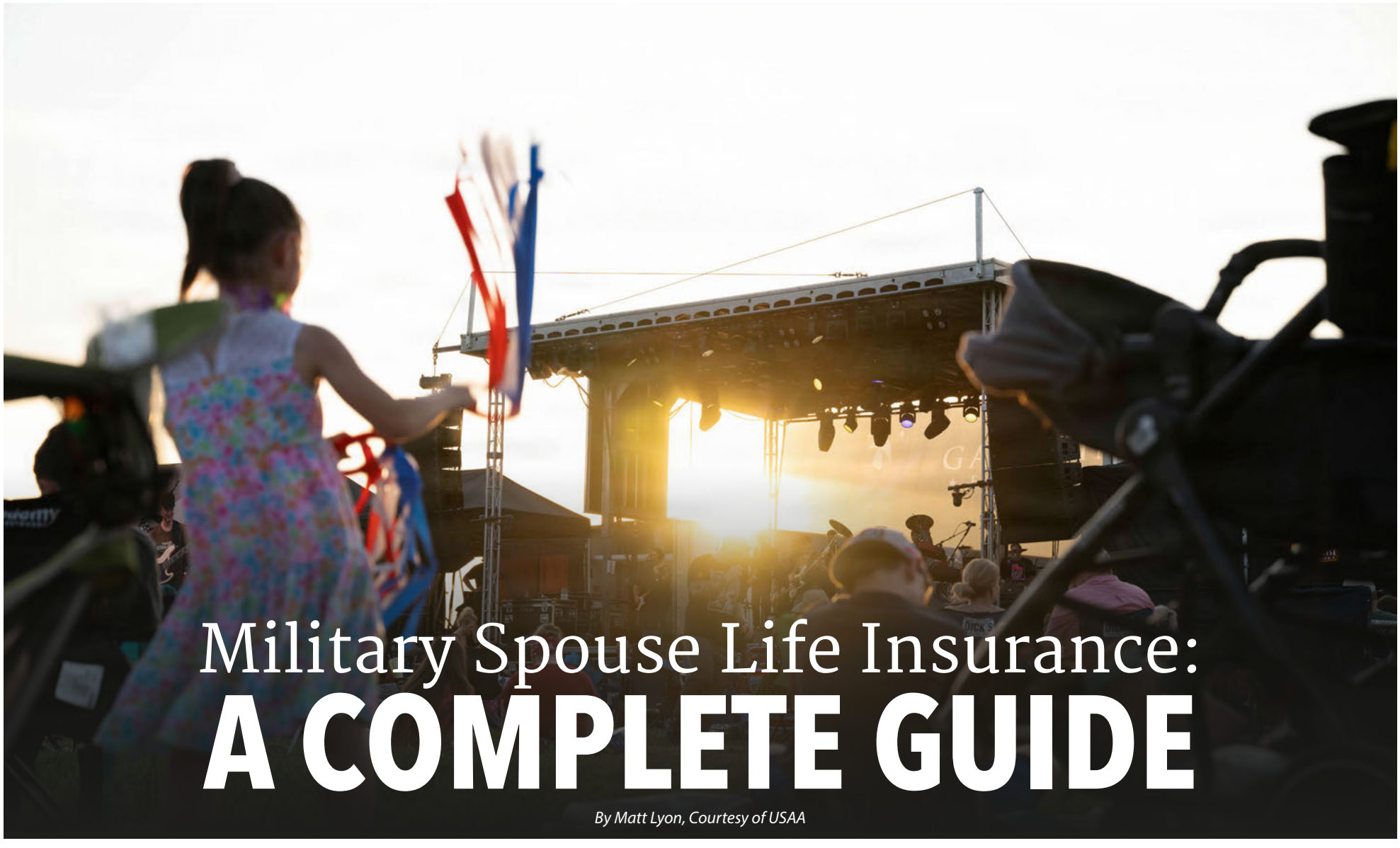
But if you're still in good health, it might make sense to apply for a brand-new life insurance policy. This is also something to consider if your needs have changed, and you want to increase your coverage to match.

You may find that you can lock in another fair term rate for a set period. Don't just assume that a new policy will be unaffordable because you're older. But depending on age or health, you may want to consider permanent insurance or a guaranteed issue policy.

## What To Do When Your Term Life Insurance is Expiring: The Bottom Line

Buying term life insurance is an effective way to make sure your loved ones are financially secure after you're gone. And because the premium is based on your age, health and life expectancy, you might be able to lock in a fair rate for the life of the policy.

You'll want to keep in mind your policy's end date to avoid any gaps in coverage. You also want to have plenty of time to weigh the pros and cons of all your life insurance options. With a little planning, you can avoid any unexpected premium increases if your policy automatically converts to a yearly renewable policy.



# Military Spouse Life Insurance: A COMPLETE GUIDE

*By Matt Lyon, Courtesy of USAA*

## Learn about spousal life insurance coverage provided by the military and what options there are to supplement your policy if FSGLI isn't enough.

We understand that military life can be challenging—not only for those on duty but for their spouses and loved ones as well. One of those challenges comes in the form of financial management. Whether it's managing day-to-day expenses or future financial planning, this responsibility often falls on the shoulders of a military spouse.

Acting as the household CFO is just one of many contributions. From managing the home during a service member's deployment to caring for children to planning moves and working: Your contributions as a military spouse are vital to family stability. If something were to happen to you, the effect on your family would be devastating.

While your family can't replace your value emotionally, there would be a cost financially. That's why life insurance is an important tool in your financial toolkit. As a military spouse, you should take the time to review the valuable options you have available for life insurance.

### Understanding Family Servicemembers' Group Life Insurance

Being connected to military service has its perks, one of which is the benefits package. And while life insurance policies offered through the military are like most group life policies, they're also designed with the military in mind.

For example, there's no medical exam when you sign up for a life insurance policy through the military, and there's a specific benefit available in case of traumatic injury.

Because of the fair cost of coverage and risks associated with military service, we recommend that active-duty service members accept the full amount of life insurance offered through the Department of Veterans Affairs' Servicemembers' Group Life Insurance, or SGLI, program.

As a military spouse whose partner is enrolled in full-time SGLI, you have the option to enroll in FSGLI, also known as Family Servicemembers' Group Life Insurance. In addition to protecting military spouses, FSGLI covers service members' dependent children.

SGLI and FSGLI help ensure that surviving spouses receive a death benefit to help with living and dependent care expenses. Life insurance can provide your family with a sense of financial security and help you build sound financial readiness.

### Who's Eligible for FSGLI?

FSGLI is open to a service member's spouse and dependent children. The service member must be either:

- On active duty and covered by full-time SGLI, or
- A member of the National Guard or Ready Reserves and covered by full-time SGLI.

If your spouse has SGLI coverage, you may be eligible for FSGLI, regardless of your own military status.

### How Does FSGLI Work?

FSGLI coverage works like most group life insurance policies in that premiums are automatically withdrawn from the service member's paycheck. FSGLI is free for children. Prices for spouses vary based on coverage and age range.

### What Happens After Military Separation?

Unlike most group policies, FSGLI offers an option to transfer coverage to an individual insurance policy upon certain qualifying events. This window opens within 120 days from one of the following:

- Service member's separation from the military
- Divorce
- Written instruction from service member to end SGLI or FSGLI
- Death of the service member

During the 120-day window, you can convert your FSGLI coverage to a permanent policy with participating companies. Keep in mind that while these types of policies offer lifelong coverage, the premiums can be higher.

### What if FSGLI isn't Enough?

In terms of total life insurance protection, at a minimum, consider securing enough life insurance to pay off all your debts and replace five years of income, according to our guidance.

With children, a mortgage, college loans, car payments and other expenses, the payout from FSGLI could fall short of what your family needs. In fact, that's a common occurrence with general coverage through group life insurance.

If you stay at home with children and don't work outside the home, it may be hard to determine how much income your family might need to replace. But don't overlook the value you bring to your family's finances.

According to recent surveys, the yearly salary for a stay-at-home parent is about $184,820, based on their daily jobs and responsibilities. That's a big impact that life insurance can help preserve.

If you've determined FSGLI isn't enough, consider private, supplemental insurance. This coverage can remain in effect after your spouse separates from the military.

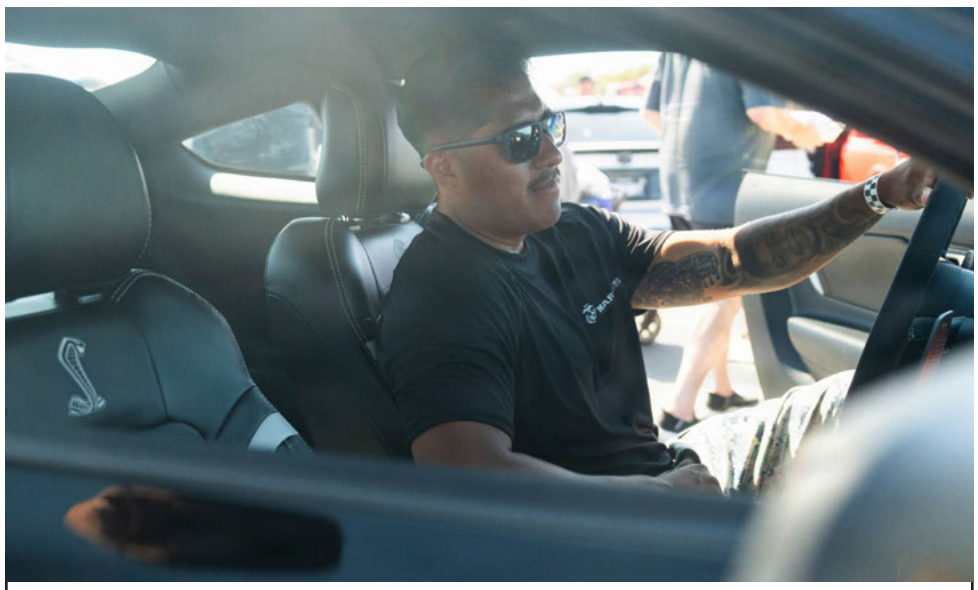
### Supplemental Life Insurance Options

Whether your spouse is active or Reserve duty, deploying or leaving the service, your family might consider our level term life insurance policies. They provide supplemental coverage and features for you and your spouse. They include expedited coverage for deployment, coverage during wartime and severe injury benefits.

You also may have heard about a military future insurability rider. This is a unique rider offered to service members and their families that's called Military Protection Plus. This benefit is available through our level term life insurances. It gives policyholders the option to replace some or all SGLI and FSGLI lost after the service member leaves the military. This allows a seamless transition from military coverage to civilian coverage.

We recognize what it means to serve and the importance of products tailored for the military. If you have questions, financial planning resources for military life are available in the Advice Center at www.usaa.com/advice/advice-center.

AUTO INSURANCE



# Your Guide to GAP Insurance

*Courtesy of the Consumer Financial Protection Bureau*

## What is Guaranteed Asset Protection (GAP) insurance?

GAP is an optional product that is intended to cover the difference between the amount you owe on your auto loan and the amount the insurance company pays if your car is stolen or totaled. Standard auto insurance only pays an amount up to the value of your vehicle. GAP is supposed to cover the loss you would suffer if your loan balance is higher than the value of the vehicle.

GAP is one of several optional add-on products—such as extended warranties or credit insurance—that a dealer will likely offer to you when purchasing or leasing a car. The cost of the product will be rolled into the loan amount. The products often have eligibility restrictions and based on a consumer's individual circumstances, may not provide value.

The price of this product can vary greatly. Your own auto insurance company may offer a GAP policy, and some direct lenders also offer GAP policies. It is important to compare prices and coverage before you buy. If you choose to finance a GAP policy into your loan, it will add to your total loan amount, which ultimately increases what you'll pay in total interest over time.

## Am I Required to Purchase an Extended Warranty, GAP Insurance, or Credit Insurance from a Lender or Dealer to Get an Auto Loan?

Generally you cannot be required to buy an extended warranty, GAP insurance, or credit insurance. In most situations, they are optional.

You have the right to walk away and look for a different dealer or lender if they are pressuring you to purchase optional products or services for your loan.

## What if a Dealer or Lender Makes it Hard for Me to Turn Down Optional Products on My Auto Loan?

Extended warranties, GAP insurance, and credit insurance are optional when you take out an auto loan. And, if an add-on product is optional and you decide to add it to your loan, you have the right to cancel it during the term of the loan, which can save you money.

An extended warranty or service contract on your vehicle pays the costs of some repairs, above what the manufacturer's warranty covers or after the manufacturer's warranty ends. GAP insurance covers the difference (or gap) between the amount you owe on your auto loan and what your insurance pays if your vehicle is stolen, damaged, or totaled. Credit insurance is coverage that makes your auto loan payments if you are not able to.

Before you sign the loan papers, ask the lender whether the loan includes charges for optional products.

If you are told you must purchase GAP to qualify for financing, ask where the sales contract says that, or contact the lender yourself to find out if that is true. If it is true, the cost of the GAP insurance must be included in the finance charge and reflected in the disclosed annual percentage rate (APR). If it's optional, you can decline it.

Also, you may be entitled to a refund if you sell, refinance, or prepay your auto loan. If you do not have your paperwork, check with your lender, the provider, or the dealer you bought the car from.

You have the right to cancel these optional add-on products at any time and reduce your costs.

If you are turned down for a loan because you refuse to buy optional products, you can submit a complaint with the CFPB. You can also file a complaint with the Federal Trade Commission (FTC) and with your state attorney general or state consumer protection office . If you're in the military, you should report this to your installation Judge Advocate General (JAG) immediately. Use the locator at www.legalassistance.law.af.mil to find your JAG Legal Assistance Office.

# WHAT KIND OF AUTO INSURANCE OPTIONS ARE AVAILABLE WHEN FINANCING A CAR?

*Courtesy of the Consumer Financial Protection Bureau*

**You should shop and compare insurance options before buying a car or vehicle. You may encounter a variety of insurance and credit protection products when financing a vehicle.**

Almost all states require insurance when you purchase or lease a car or vehicle. Like shopping for a car, it's helpful to shop around with multiple providers to get the best deal.

## Purchasing Auto Insurance

If you don't already have insurance for other risks, consider shopping for automobile insurance before you shop for a car or vehicle. You should compare coverages as well as costs.

If you already have other types of insurance, such as home insurance, your current insurer can tell you what options they offer or how to add any new vehicle to your policy and how much it will cost. However, you should still see how their rates compare to others.

## Other Kinds of Insurance or Credit Protection Products You May Encounter or May be Offered When Financing A Vehicle

### Force-placed Insurance

If you don't have insurance when purchasing your vehicle or if your insurance lapses, the lender can acquire force-placed insurance to cover the vehicle if anything were to happen. Keep in mind, this coverage protects the lender and vehicle, but not you.

### Vendor's Single Interest (VSI) Insurance

VSI insurance protects the lender if your vehicle is damaged or destroyed. The cost of the insurance may be passed on to you in the overall cost of your loan or may appear as a separately itemized charge. Check to see if this can be waived or canceled later by getting your own insurance.

### GAP Insurance

GAP is an optional add-on product that promises to cover some or all of the difference between a car's cash value and the remaining balance on your loan or lease (for example, when the car's value is below your loan balance) if the car is stolen or totaled.

### Credit Insurance

Credit insurance is an optional product that ensures your auto loan payments continue if you die, lose your job, or become disabled.

### Know What is Negotiable

Did you know that you can negotiate the terms of your auto loan? Negotiating can save you hundreds or even thousands of dollars over the life of your loan.

Find out more about negotiating loan basics at www.consumerfinance.gov.

ADVERTORIAL

# 8 VEHICLE-INSURANCE MYTHS — BUSTED

*By MIRASCON*

Bringing, buying, and registering a vehicle in Germany involves rules that differ significantly from those in the United States. Assumptions about stateside coverage, authorized drivers, registration documents, and European travel can result in a failed registration appointment—or leave a driver uninsured when an accident occurs.

Here are ten of the most important and frequently encountered vehicle-insurance myths for U.S. service members and their families in Germany.

## Myth #1: "My U.S. auto policy automatically covers me in Germany."

A policy issued for driving in the United States does not automatically satisfy German or USAREUR-AF requirements. Vehicles based in Germany must have qualifying third-party motor-liability insurance, and USAREUR-AF registration requires confirmation from an authorized insurer.

Before shipping, purchasing, or registering a vehicle, contact the insurer and specifically confirm that the policy provides coverage in Germany and can issue the insurance confirmation required by the USAREUR-AF registration system. German law requires vehicle owners to obtain and maintain motor-liability insurance.

## Myth #2: "As long as I have some liability coverage, I'm compliant."

Having liability coverage is not enough if the policy does not meet the applicable minimum requirements. Germany's required liability limits are much higher than the minimum limits in many U.S. states.

## Myth #3: "Insurance and vehicle registration are completely separate."

The processes are directly connected. The USAREUR-AF Vehicle Registration Office cannot complete a registration or issue plates until qualifying insurance has been confirmed.

Depending on the insurer, confirmation may be transmitted electronically or provided through an Insurance Confirmation Card, commonly called a "white card" or "double white card." The coverage must already be effective at the time of registration; future-dated confirmation is not accepted. Electronic confirmation may also take up to 24 hours to appear in the system.

If you want to insure a vehicle in Europe, MIRASCON (mirascon.com) is a trusted insurance partner for the U.S. military community, providing fast and efficient service to help you register your privately owned vehicle (POV), whether through the USAREUR-AF registration, or such as under the German civilian registration system.

## Myth #4: "I always need to carry a paper insurance card in the car."

Usually false. Germany does not generally require drivers of properly registered vehicles to carry a separate stateside-style insurance card. Drivers must carry their valid driver's license and the original vehicle registration document.

There are exceptions. For example, visitors independently operating a USAREUR-AF-plated vehicle under a customs authorization must carry the authorization, registration, proof of insurance, passport, and appropriate driving permit.

## Myth #5: "German law requires full coverage."

The legally required coverage is third-party-liability insurance, known as ***Kfz-Haftpflichtversicherung***. It pays valid claims resulting from injuries or property damage caused to other people.

Collision and comprehensive insurance—comparable to German ***Vollkasko*** and ***Teilkasko*** coverage—are generally optional under the law. However, a bank, leasing company, or vehicle-financing agreement may often require them.

## Myth #6: "Mandatory liability insurance will repair my own car."

Liability coverage protects third parties. It generally covers injuries and property damage you cause to others, but not the cost of repairing or replacing your own vehicle. Protection against collision damage, theft, vandalism, weather damage, or broken glass depends on the optional coverage included in the individual policy.

## Myth #7: "My spouse is automatically covered."

This is false as a general assumption. Marriage alone does not resolve every insurance and registration issue. Whether a spouse is permitted to drive depends on the policy terms, so regular household drivers should be confirmed with the insurer.

The registration paperwork must also be consistent. USAREUR-AF guidance states that the name on the Insurance Confirmation Card must match the registered owner. Other registration guidance specifies that the policyholder must appear on the registration. MIRASCON Insurance (mirascon.com) offers coverage for multiple drivers at no additional cost.

## Myth #8: "Any visiting friend or relative can drive my vehicle if I give them permission—and a European driver's license is all they need."

Personal permission isn't enough, and a European (or German) license alone doesn't authorize someone to drive a USAREUR-AF-plated vehicle. Because USAREUR-AF registration comes with tax and customs privileges, U.S. Forces customs rules govern who can get behind the wheel. Visitors generally need a customs "Exception to Policy" authorization, along with their passport, an International Driving Permit (or certified translation of their license), and the vehicle registration—valid for up to 90 days within a six-month period, and it doesn't extend to AAFES/ESSO fuel privileges. The one shortcut: prior authorization isn't required if an eligible household member with a USAREUR license stays in the vehicle while the guest drives.

## The Bottom Line

When it comes to vehicle insurance in Germany, don't rely on what you know from back home.

Insurance requirements, registration procedures, and customs regulations can differ significantly from those in the United States—and even small misunderstandings can lead to registration delays or unexpected costs after an accident.

Before registering, lending, selling, storing, or taking your vehicle outside Germany, check the current requirements with your insurer (for example MIRASCON), your local USAREUR-AF Vehicle Registration Office, and U.S. Forces Customs.


## Military service is a family affair.

Through every PCS and deployment, those you love stand with you. Honor their sacrifice by giving them the gift of a more secure future.

Note: The overall maximum coverage for each Member/Associate Member is $750,000 under all USBA-sponsored Group Life Insurance Policies.

Uniformed Services Benefit Association® (USBA®) makes it simple with up to **$750,000 in Group Term or Group Whole Life Insurance** designed exclusively for military life.

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