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Insurance Guide

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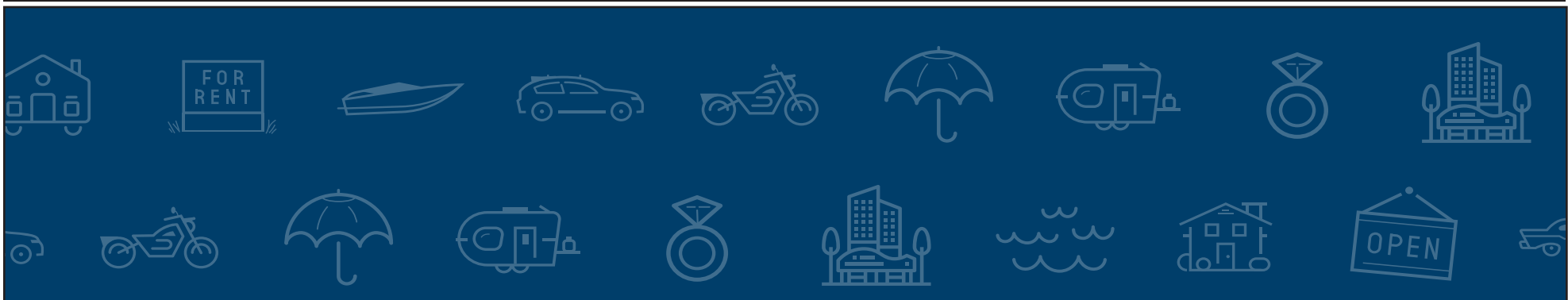
HOW TO KNOW
IF IT'S ENOUGH

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TRICARE
HEALTH
TERMS
TO KNOW

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INSURANCE**
BE PREPARED IF
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What is Social Security Disability Insurance?

Courtesy of Military OneSource

Social Security Disability Insurance (SSDI) is a payroll tax-funded, federal insurance program administered by the Social Security Administration that provides supplemental income to people whose disability prevents them from procuring employment or staying employed. The SSDI can be paid on a temporary or permanent basis, depending on whether the disability is temporary or permanent.

Military families with a family member with special needs or a family member with a military-connected disability may receive temporary or permanent supplemental

income through SSDI.

To learn more about SSDI or to apply, visit ssa.gov/disability. Contact your installation Military Family Support Center or a Military OneSource special needs consultant if you have questions or concerns about:

- Insurance
- Supplemental Security Income
- Medicare
- Medicaid

- Uniform Federal Accessibility Standards
- Managing Family Life with Adult-onset Chronic Disease

Review the Long-Term and Financial Planning checklist in the EFMP & Me tool at efmpandme.militaryonesource.mil for help navigating the network of available services and support, including SSDI. For even more information listen to the Legal and Long-Term Financial Planning Part 1 and Part 2 episodes of the Office of Special Needs EFMP podcast series at militaryonesource.mil. ■



10 TRICARE

health terms you should know

Courtesy of TRICARE Communications

Have you recently come across a health care term and weren't quite sure what it meant? You aren't alone. Health care coverage is full of terms you may not know. To help you better understand your TRICARE benefit, here's a list of commonly used health care terms and definitions.

"Having a basic knowledge of common health care terms that you may encounter as a TRICARE beneficiary will go a long way toward helping you make decisions that will benefit you and your family," said TRICARE Health Plan Deputy Chief Curt Prichard.

Remember, there are different types of TRICARE health plans. So, depending on your plan, some of these terms may not apply. If you have questions, you should reach out to your health care provider or TRICARE contractor.

1. Network provider

This is any TRICARE-authorized provider that has signed a contract with one of the TRICARE regional contractors. Network providers have agreed to accept the contracted rate as payment in full for covered health care services and file claims for you. The TRICARE contractors have established provider networks in each region.

2. Non-network provider

This is a TRICARE-authorized provider who doesn't have an agreement with TRICARE and may not file claims for you. There are two types of non-network providers: *participating* and *nonparticipating*. Participating providers may choose to participate on a claim-by-claim basis. They've agreed to accept payment directly from TRICARE. They've also agreed to accept the TRICARE-allowable charge (minus any applicable patient costs) as payment in full.

Nonparticipating providers haven't agreed to file your claim. You may have to pay upfront for services rendered and file your own claim. These providers also have a legal right to charge up to 15% above the TRICARE-allowable charge for services. You're responsible for paying this amount, in addition to any applicable patient costs.

3. Primary care manager

With a TRICARE Prime plan, your health care is managed by a primary care manager (PCM). Your PCM is responsible for providing and coordinating a range of health care services—routine, nonemergency, and urgent health care—for you. Your PCM can be a provider at a military hospital or clinic or civilian TRICARE network provider. Or you could have a primary care provider under the US Family Health Plan.

4. Referral

This is when your PCM sends you to another provider for care. If you're enrolled in a TRICARE Prime plan, you need a referral from your PCM to seek most specialty care. Your PCM will send a referral request to your regional contractor, who will process the referral. If you don't get a referral from your PCM to visit a specialist, your care will be under the point-of-service (POS) option. By using the POS option, you'll pay higher out-of-pocket-costs. Some TRICARE plans, including TRICARE Select, don't require referrals for most health care services.

5. Pre-authorization

Sometimes, your TRICARE contractor must review a requested health care service or

prescription drug to see if it's medically necessary and appropriate, and is a TRICARE covered benefit. This is a pre-authorization and is different from a referral. Some health care services require pre-authorization before you receive them, regardless of your TRICARE plan. You can check for services that need pre-authorization on the TRICARE website or your regional contractor's website. Without this approval, you could be responsible for the full cost of your care. Active duty service members need pre-authorizations for all inpatient and outpatient specialty services.

6. Medically necessary

TRICARE covers services or supplies that are medically necessary. Medically necessary refers to health care services or supplies that qualified medical professionals accept to be appropriate, reasonable, and adequate for the diagnosis and treatment of your condition. For care to be considered medically necessary, it must also be proven safe and effective, which must be established through reliable clinical trials, formal technology assessments, or positions from national medical organizations.

7. Covered services

Covered services are the medical services or supplies that you're eligible to receive under TRICARE. All medical services or supplies must be medically necessary and appropriate for the condition being treated. There are some services and supplies that aren't covered under a health plan. These are known as exclusions.

8. TRICARE open season

This is the annual period when you can enroll in or change your TRICARE health

care coverage for the following year. Open season occurs each fall, beginning on the Monday of the second full week in November to the Monday of the second full week in December.

9. Qualifying life event

This is a certain change in your life that makes you eligible to enroll or change your TRICARE health plan outside of open season. As outlined in the TRICARE Qualifying Life Events Fact Sheet, examples of Qualifying Life Events (QLEs) include moving, retiring from active duty, getting married, and having a baby. These QLEs open a 90-day period for you and your family to make enrollment changes.

10. Other health insurance

This is any health insurance you have besides TRICARE. Other health insurance (OHI) can be through your employer or a private insurance program. TRICARE pays after most OHI. This means your OHI processes your claim first. Then, you or your doctor files a claim with TRICARE. By law, TRICARE pays after all other health insurance, except for Medicaid, TRICARE supplements, State Victims of Crime Compensation programs, or other federal government programs (for example, Indian Health Service). Tell your TRICARE contractor and doctors when you have other health insurance.

Want to learn more about health care? Understanding your medical costs is important, too. Check the Cost Terms page on TRICARE.mil for a breakdown of costs terms and definitions. Remember, always ask if you don't understand something your health care provider says or follow up with your TRICARE contractor. ■

How Does TRICARE Change When You Retire From Active Duty?

Courtesy of TRICARE Communications

Many active duty service members (ADSMs) may eventually retire from their branch of the uniformed services. If you're an ADSM, are you prepared to make the transition to civilian life? If you retire, you and your family will still qualify for TRICARE. But, it's important to note you must actively enroll into a TRICARE health plan if you want coverage for civilian care. By learning about the TRICARE health plans available to retirees and their family members, you will be ready to make arrangements for ongoing health care coverage when it's time.

"The date of your retirement counts as a Qualifying Life Event," said Dr. Danita Hunter, chief of TRICARE Policy and Programs. "This gives you a 90-day window to enroll in a new TRICARE plan. If you don't enroll in a health plan, you're only eligible for care at a military hospital or clinic if space is available."

What stays the same with your TRICARE coverage when you retire? While you remain eligible to get care at a military hospital or clinic, you and your family have a lower priority for access than when you were on active duty. Capacity at military hospitals and clinics varies by location. You can still use the military pharmacy to fill your prescription drugs and use other pharmacy options through the TRICARE Pharmacy Program. Keep in mind, most retirees and their family members are required to fill certain maintenance drugs through TRICARE Pharmacy Home Delivery. Also, your TRICARE coverage goes with you when you move or travel.

So, what changes about TRICARE with your retirement? See some changes you should know below.

New Status

After retirement, your TRICARE status changes. First, you and each of your eligible family members will need to get a new Uniform Services ID card to reflect your retiree status. You'll also need to update contact information for you and your family members in the Defense Enrollment Eligibility Reporting System (DEERS). Also, if your uniformed service doesn't update your retired status in DEERS, you can't re-enroll in TRICARE.

If you qualify for premium-free Medicare Part A, you'll need to sign up for Medicare Part B before you retire to keep TRICARE coverage.

TRICARE Health Plans

All ADSMs are enrolled in TRICARE Prime. Once you're retired, you can re-enroll in TRICARE Prime if you live in certain areas stateside called a Prime Service Area, where TRICARE Prime is offered. However, TRICARE

doesn't offer TRICARE Prime Remote, TRICARE Prime Overseas, and TRICARE Prime Remote Overseas to retirees and family members.

TRICARE health plans available to you and your family might include:

- TRICARE Prime (where offered stateside)
- US Family Health Plan (where offered stateside)
- TRICARE Select or TRICARE Select Overseas
- TRICARE Plus (limited availability)
- TRICARE For Life (if you have Medicare Part A and Part B)

Check out the TRICARE Plan Finder to learn more about which plans you may qualify for. You can also reach out to your TRICARE contractor with any enrollment questions. If you don't enroll into a TRICARE health plan within 90 days of your retirement date, you may request a retroactive enrollment up to 12 months after your retirement date.

New Costs

Once enrolled into a TRICARE health plan, you'll pay retiree costs. This includes ongoing enrollment fees or monthly premiums. All enrollment fees or monthly premiums must be paid retroactive to your retirement date for continuous coverage. Also, copayments and cost-shares will apply if you get care from a civilian TRICARE network provider.

New Dental and Vision Plan Options

As a retiree, you no longer qualify for active duty dental benefits, and your family no longer qualifies for dental coverage through the TRICARE Dental Program. Retired service members and family members may purchase dental coverage from the Federal Employees Dental and Vision Insurance Program (FEDVIP), administered by the U.S. Office of Personnel Management. If you're enrolled in a TRICARE health plan, you may purchase one of the vision plans offered by FEDVIP.

Where can you learn more about how your TRICARE changes when you retire from active duty? Go to the Retiring page on the TRICARE website.

Are you retiring from the National Guard or Reserve? A key difference to remember is that you and your family don't qualify for TRICARE by law until you reach age 60, even if you begin to draw retired pay earlier than age 60.

Remaining informed about the best health plan options for you and your family as you prepare for retirement is important to ensure there's no interruption in your health care coverage. ■



CHAMPVA Program Overview

Courtesy of the Department of Veterans Affairs and Benefits.gov

The Civilian Health and Medical Program of the Department of Veterans Affairs (VA) (CHAMPVA) is a comprehensive health care benefits program in which the VA shares the cost of covered health care services and supplies with eligible beneficiaries. The program is administered by the Chief Business Office Purchased Care located in Denver, Colorado.

Due to the similarity between CHAMPVA and the TRICARE program (sometimes referred to by its old name, CHAMPUS) the two are often mistaken for each other. CHAMPVA is a VA program, whereas TRICARE is a DoD regionally-managed health care program for active duty and retired members of the uniformed services, their families, and survivors.

In some cases a person may appear eligible for either program. However, anyone eligible for TRICARE is not eligible for CHAMPVA.

Who is eligible for CHAMPVA?

To be eligible for CHAMPVA, you cannot be eligible for TRICARE/CHAMPUS, and you must be in one of these categories:

- The spouse or child of a Veteran who has been rated permanently and totally disabled for a service-connected disability by a VA regional office OR
- The surviving spouse or child of a Veteran who died from a VA-rated service connected disability OR
- The surviving spouse or child of a Veteran who was at the time of death rated permanently and totally disabled from a service connected disability OR
- The surviving spouse or child of a military member who died in the line of duty, not due to misconduct (in most of these cases, these family members are eligible for TRICARE, not CHAMPVA).

A service-connected disability is a disability that we've concluded was caused—or made worse—by the Veteran's active-duty service. A

permanent disability is one that's not expected to improve.

Note: A Veteran who's the qualifying CHAMPVA sponsor for their family may also qualify for the VA health care program based on their own Veteran status. If two spouses are both Veterans who qualify as CHAMPVA sponsors for their family, they both may now qualify for CHAMPVA benefits. Each time they need medical care, they may choose to get care through the VA health care program or using their CHAMPVA coverage.

There are other factors that may affect whether you or other family members qualify for CHAMPVA. Visit www.va.gov/health-care/family-caregiver-benefits/champva/ to learn more.

Benefits

In general, CHAMPVA covers most health care services and supplies that are medically and psychologically necessary. Upon confirmation of eligibility, you will receive a CHAMPVA Program Guide that specifically addresses covered and non-covered services and supplies. For a complete listing of non-covered services and supplies, consult the CHAMPVA Policy Manual.

CHAMPVA has an outpatient deductible (\$50 per beneficiary per calendar year or a maximum of \$100 per family per calendar year) and a patient cost share of 25% of our allowable amount up to the catastrophic cap (\$3,000 per calendar year). If the patient has other health insurance, then CHAMPVA pays the lesser of either 75% of the allowable amount after the \$50 calendar year deductible is satisfied, or the remainder of the charges and the beneficiary will normally have no cost share.

How to Apply for CHAMPVA

For detailed information on CHAMPVA eligibility and for instructions on how to apply for CHAMPVA, visit www.va.gov/health-care/family-caregiver-benefits/champva/. ■

Help protect your family with Term 90 Plus life insurance.

Term 90 Plus life insurance offers rates that let you start getting protection more affordably.

The military trained you to be ready for anything. At Military Benefit Association (MBA), we think you should be just as ready when it comes to your family's financial protection. It all starts with life insurance — one of the smartest and simplest ways to help protect your loved ones.

Life insurance that makes protecting your family easy.

MBA Term 90 Plus life insurance offers solid protection — whether you want to add to your SGLI or are looking for an affordable alternative to VGLI.

MBA Term 90 Plus life insurance features:

- Rates start at just \$2.50/month for \$50,000 coverage*
- Affordable alternative to VGLI
- Coverage up to \$1,000,000
- Coverage up to age 90
- Coverage available to non-military spouses
- Eligible children may be covered up to \$12,500 at no

additional cost

- Plans can go with you when you enter civilian life
- No limitations on aviation-related deaths
- No war clause

Who is eligible?

Level Term life insurance is available to Active Duty and Retired service members, Reservists, National Guard members, Veterans and all spouses of military personnel.

Monthly rates per \$50,000 of life insurance coverage:

Age	Non-Tobacco User Premium	Tobacco User Premium
up to age 29	\$2.50	\$5.00
30-34	\$2.90	\$5.80
35-39	\$3.10	\$6.20
40-44	\$4.00	\$8.00
45-49	\$5.00	\$10.00
50-54	\$8.50	\$17.00
55-59	\$15.50	\$31.00
60-64	\$23.79	\$47.58



Insured members qualify for non-tobacco discount if they have not used tobacco products during the past 12 months. Rates increase at 5-year intervals until age 90. Coverage reduces at age 70 and again at age 80, and terminates at age 90

The benefits of membership.

Joining MBA is free. We have resources to safeguard your economic welfare, including financial education on life events, video seminars, market analysis, financial calculators and more.

MBA membership comes with these added benefits:

- Free will preparation services and power of attorney services¹ (insured members)
- Free estate resolution service

(insured members)

- Savings on auto and home coverage²
- Generous scholarship program

Give your family the financial readiness they deserve. Call 1 877-MBA-1020 or visit us at militarybenefit.org

* The \$2.50 rate is non-tobacco user rate for members up to age 29 for \$50,000 (1 unit) of coverage.

¹ Provided by MetLife Legal Plans, Inc.

² Coverage provided by Liberty Mutual Insurance. Not affiliated with MLIC.

Like most insurance policies, MetLife's policies contain exclusions, limitations,

reductions of benefits and terms for keeping them in force. Coverage not available in all states. Offer for Term 90 Plus only; certain eligibility restrictions apply. For complete plan costs and details contact MBA.

Your application is subject to review and approval by MetLife based upon its underwriting rules. Rates may be changed on the entire group plan or on a class basis and on any premium due date on which benefits are changed. A class is a group of people defined in the group policy / policy exhibits. Benefits are subject to change upon agreement between Metropolitan Life Insurance Company and Military Benefit Association.

149107-1-G Policy Form Number issued by Metropolitan Life Insurance Company, New York, NY

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Financial protection for military families



As a member of the military, you know what it means to be ready for anything. Shouldn't you make sure your family's finances are ready, too? It all starts with the right amount of life insurance.

Talk to Military Benefit Association today and find out about our new 10- and 20-year Level Term insurance. It's affordable with a fixed rate for the level term period. Call us now. And see how financial protection can be easier than you think.

Call 1 877-MBA-1020 promo code 459
Visit militarybenefit.org/459

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Like most insurance policies, insurance policies offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods and terms for keeping them in force. Coverage may not be available in all states. For complete plan costs and details contact MBA at 1-877-MBA-1020.





Military Basics For Renters Insurance

Courtesy of Military OneSource

Mastering your move and finding a good place for your family to live can take a lot of time and energy, so it's not surprising that something like renters insurance could be overlooked. However, this small cost could save you big money if something happens to your personal belongings.

What is renters insurance?

Renters insurance is property insurance specifically designed for people who do not own their homes. If disaster strikes in the form of fire, vandalism, theft or any number of other ways, renters insurance means you won't be stuck paying to replace everything that was lost or damaged.

Whether you live on or off base, in a house, apartment, duplex or townhome, renters insurance, (minus the deductible) typically:

- Covers the cost of repairing or replacing your personal belongings, or provides you with the cash value of each item lost or destroyed (Reimbursement varies with different policies. Some policies offer reimbursement for the cost of the item minus depreciation. Full replacement value coverage is also available.)
- Provides continuous coverage as you move your military household goods
- Covers costs including hotel, meals and laundry if you need to leave your rental during repairs
- Offers protection against lawsuits if someone is accidentally injured in your rental
- Covers your belongings even if they're damaged or stolen outside your rental
- Covers food spoilage if a power failure results in food loss
- Provides limited coverage for credit card fraud or check forgery

- Typically does NOT cover loss or damage from hurricanes, flood, earthquakes, pests and certain dog breeds

There are two forms of renters insurance, broad and comprehensive.

- **Broad** form is the more limited and less expensive option. It is also the most common form and usually offers coverage for specific events named in the policy—typically fire, lightning, explosion, smoke, vandalism, theft and water-related damage from utilities. Broad coverage can also provide personal liability protection against lawsuits if someone is accidentally injured in your home. It does not cover floods and earthquakes.
- **Comprehensive** form covers everything unless not specifically excluded by the policy. It will probably provide a higher personal liability limit and cost more.

Be sure to understand the details of the coverages, premiums, and deductibles offered in the insurance agreement before making any choices. No matter which form you buy, if you own expensive items like jewelry, you may want to purchase additional coverage.

Do I need renters insurance?

Unlike car insurance, renters insurance is not required by law; however, your landlord may require you to have a policy and it is usually a good idea. If you were to lose all of your personal possessions, could you afford to im-

mediately replace them out of your pocket? Check with your landlord or housing agreement to see what coverage you may already have and determine if additional coverage is necessary. Although your landlord may carry insurance on the property, it probably only covers the building in which you live, not your personal possessions.

If you live in government or installation housing, you may have renters insurance included, or you may only be covered for things damaged or stolen from your quarters. Make sure you understand exactly what the policy covers, as well as any restrictions. Some privatized housing policies only kick in after the dweller's personal insurance policy has paid out, and only cover losses over \$10,000.

How much does renters insurance cost?

Depending on what you plan to insure, coverage is easy to find and may be cheaper than you think. For example, for property valued at \$30,000 plus \$100,000 of personal liability coverage will likely run between \$15 and \$30 a month, with a deductible less than \$500. Costs are very dependent on your geographic location, credit history, previous claims, and deductible – so be sure to shop around and update your coverage annually, or as needed with each move or life event such as marriage, divorce or starting a family.

You can buy renters insurance directly from an insurance company or from an insurance

agent. Check with your state's department of insurance for names of insurers in your area. If you have car or other types of insurance, ask your insurer about renters coverage—you might get a discount for bundling two or more types of policies.

Remember, the total costs for renters insurance, like other insurances, is the cost of the premium (usually paid monthly or annually) plus the deductible if you need to use the insurance coverage in case of an event. Consider including the amount of your deductible as part of your emergency fund, so that it's available if you need it. In some policies, you may not have to use the deductible for certain provisions, such as food spoilage, in the event of something major—be sure to carefully review the policy and check with your insurer if you have any questions.

Insurance tips

Like all insurance purchases, do your research before you buy renters insurance. Taking the time to consider your options now can give you peace of mind—and could save you money later.

Another helpful insurance tip is to make an inventory of all your belongings. Having a record of all your belongings helps establish ownership and value, and can make it easier for you to be reimbursed for loss or damage whether it happens during a move, or while you are renting. ■



Why Climate Risk Should Be Considered in Housing Decisions

By Mark McArdle, Mikayla Mitchell and Erik Rubinyi, Courtesy of the Consumer Financial Protection Bureau

Flooding, fire, drought, and other weather-related risks have always been a danger to property and consumer well being. However, with the changing climate, these risks are increasing in intensity and frequency, impacting the probability of damage, cost of utilities, price of insurance, and potential resale value of homes.

A 2021 report by the First Street Foundation found that nearly 4.3 million residential homes across the country had substantial flood risk. For these properties, annual losses per property were estimated at \$4,694, growing to \$7,563 by 2051. Homeowners in high-risk coastal areas are already facing increases in flood insurance premiums, sometimes by thousands of dollars a year. However, changing weather patterns impact homes all across the country including cities like Chicago, where record highs and lows of Lake Michigan are placing property at risk. In other states, fire risk is a major factor, with an estimated 4.5 million U.S. homes at high or extreme risk, according to Verisk Analytics. These risks impact both renters and homeowners.

Every property faces climate risks, however formerly redlined areas are disproportionately affected by heat and flood risk. For these homeowners, understanding climate risks is even more essential in order to take steps towards mitigation and plan for the future. Individual climate risks will vary based on

location thus it is important to focus on the relevant risks for your area.

For homebuyers:

You have many factors to consider when deciding on a home: price, location, commute time, and schools, among others. It is time to add climate risk to that list.

Some major real estate websites have already started including flood risk and other climate risks in their listings. However, past flood damage can be hidden, costly to repair, and a sign of future risk. Before making an offer, look up a property's climate risks using the resources below and check if your state has disclosure requirements for past flooding.

If a property is located in a FEMA high risk flood zone and you have a mortgage, you will likely be required to purchase flood insurance from the National Flood Insurance Program (NFIP) at additional cost, but it's important to note that properties not in flood zones can still be at risk of flooding or other climate risks. On average, 40% of the National Flood Insurance Program (NFIP) flood insurance claims occur outside the high-risk flood areas. And in 2017, during Hurricane Harvey, thousands of properties not in flood zones ended up flooded, many of which did not have insurance to help with repairs. You can see an estimate of future flood risk using tools such as Flood Factor or Climate Check. Other climate risks including fire risk can also

drive up costs. Federal agencies including USDA, NOAA, and FEMA have also developed tools to measure overall climate risk, sea level rise, and wildfire risk.

For homeowners:

As a homeowner, it is important for you to know your climate risk so you can be better prepared for future costs and climate events. Often climate risks are undisclosed and only reveal themselves over time. Start by assessing the overall climate risk to your property, focusing on the most severe risks.

Next, evaluate how these risks may impact future insurance and utility costs as well as resale value. Examine your current budget and how it would be impacted by rising utilities and insurance costs. If your home is in an area that will get hotter or has high climate risks, these costs are likely to rise more than average. Additionally, if your property is severely impacted by climate risks, that can make it expensive or impossible to insure in the future, causing potential buyers to be wary.

Lastly, investigate options to mitigate and adapt to your climate risk. FEMA has advice on how to protect your home from flooding and wildfire. These can help but are no guarantee, thus additional insurance may be needed. To save on utility costs, consider energy efficiency or other improvements such as solar panels, improved insulation, and energy efficient windows and home appliances.

For renters:

As a renter, you are not responsible for damage to a property due to a climate event, but you can still be vulnerable to physical harm, displacement, and loss of belongings. In addition, rising utility payments will impact renters either directly, if they are responsible for paying utilities, or indirectly, through increased rent.

Most tenants get no information about a unit's flood risk, and typical renters' insurance does not cover flood damage. But flood insurance for renters is available. To prepare for climate events, you should be aware of the most relevant climate risks and, if possible, incorporate climate risks into your rental decisions.

Investigate your climate risk with some of these tools: the FEMA National Risk Index (<https://hazards.fema.gov/nri/>), NOAA Sea Level Rise Viewer (<https://coast.noaa.gov/slr/>), USDA Wildfire Risk to Communities (<https://wildfirerisk.org/>), Flood Factor Flood Tool (<https://riskfactor.com/>), or Climate Check (<https://climatecheck.com/>)

**Although this blog includes statistics links used to measure climate risks, the CFPB cannot attest to the accuracy of these sources and encourages consumers to look at many sources when making a decision on climate risk. ■*

4 Questions to Ask When Buying Life Insurance

Courtesy of USAA

Major life events can cause you to want to buy life insurance or add more to your policy. Ask these four questions to stay on track.

When you're young and healthy, you probably don't think about the bad things that could happen. But if the worst happens, where will that leave your family?

Life insurance is one way you can help protect your loved ones when you're no longer here.

your family's heads, clothes on their backs and food on the table.

2 How much life insurance do I need? Look at your current situation. The first thing you'll want your insurance to take care of is housing for your loved ones. Paying off a mortgage or providing years of rent can help ensure financial stability for your survivors. Next, think about income replacement. At a minimum, you should have enough coverage to pay off any debt you have and replace your salary for at least five years. To learn more about coverage options and your individual needs, visit usaa.com/life.

3 What kind do I need? Scaturro suggests first addressing your loved ones' current or short-term needs. The majority of your life insurance should provide for your survivors' known needs—like paying

off the mortgage or providing income for the family. Typically, a good option for short-term needs is term life insurance, which can last up to 30 years. For long-term needs, like funeral or estate planning, consider permanent life insurance. A life insurance professional can help you determine your blend of coverage. Regardless of which coverage you choose, getting your own insurance now can lock in good rates you'll not likely see again.

4 Why do I need other life insurance when I already have it through my employer? Coverage through your employer can be a great benefit, but it also has some drawbacks. The biggest disadvantage is that you don't own your employer's plan. If you lose your job or change careers, you can lose your coverage, too. You should consider group life insurance, including Servicemembers' Group Life Insurance (SGLI), supplemental to the plan you own and control. ■



1 Do I need life insurance? According to Sean Scaturro, Director of Insurance Advice for USAA, you need life insurance when you love someone that would be impacted financially at your death. Realistically speaking, that's most of us. Think of life insurance as protection for your loved ones. It can keep a roof over

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CARING FOR YOUR HEALTH WORLDWIDE®



Health

AFSPA sponsors the **Foreign Service Benefit Plan (FSBP)**, a Federal Employees Health Benefits (FEHB) fee-for-service health insurance, with network providers. **FSBP** offers worldwide high-option medical benefits at competitive premiums. While many AFSPA members live within the U.S., a large portion also live overseas. Our customer service staff are experienced with health care delivery and claims handling from domestic and foreign health providers. **FSBP's** unique features and benefits include:

- Generous acupuncture, chiropractic, and massage therapy benefits
- Wellness Incentives with a generous reward program
- Mental health programs to help ease life's stressors
- Direct Billing Arrangements with 200+ international facilities
- Secure online claim submission & Electronic Funds Transfer (EFT) of claim reimbursement
- Low calendar year deductibles for in-network and overseas providers
- 24/7 Nurse Advice Line and Emergency Translation Line
- A Plan you can keep when you return to the U.S.

AFSPA also sponsors several commercial insurance plans. Below is a summary of our supplemental products. Apply/Enroll any time – no Open Season required. Direct debit is available for payment. For more information, visit afspa.org/aip or call 202-833-4910.

NEW! Critical Illness Insurance

AFSPA's Critical Illness Insurance (CI), issued by Prudential, offers additional financial protection if you are medically diagnosed with a serious illness such as heart attack, stroke, or cancer. The Plan will pay a lump sum, up to \$100,000, to use however you wish to cover medical and non-medical expenses. This includes deductibles, coinsurance, transportation, lodging, mortgage/rent payments, groceries, and child-care - including college tuition. Available in the U.S. and overseas. No medical history review required for coverage up to \$10,000. Restrictions apply. Visit afspa.org/critical-illness for details.

Dental

AFSPA offers four (4) Dental plans that cover you overseas or in the U.S. Dependent children covered up to age 26. Enroll any time.

For overseas members, we offer a true international dental plan:

- **CIGNA International** - Covers services rendered outside the U.S. Calendar year max - \$3,000/person; No deductibles; Preventive Care paid at 100%, Orthodontia and

implant coverage - available for children and adults. Offers a network of **over 100,000 providers in 160 countries**, or, you may choose your own local provider Plan can pay these providers directly, in most local currencies. Submit claims in any language via CIGNA's secure Web portal or global toll-free fax. Access CIGNA's multilingual Customer Service Center 24/7, via its global toll-free number.

For U.S. members, choose from a nationwide HMO plan or PPO plan with CIGNA Dental:

- **Dental HMO** - No deductibles, waiting periods, calendar year maximums, or claim forms. Fee schedule with discounted rates for covered services.
- **Dental PPO** - Calendar year max - \$3,000/person; No deductibles; Preventive Care paid at 100%. Orthodontia and implant coverage - available for children and adults, paid at 50%, up to a lifetime max of \$2,500, after a 12-month waiting period.

For members in the Mid-Atlantic area (DC, DE, MD, PA, & VA), **AFSPA** offers:

- **Dominion National Access ePPO** - Services rendered by participating network dentists, on a national basis. The Prevention Rewards Program awards \$20 for receiving two calendar year cleanings. No waiting periods; no copays for exams, cleanings, and x-rays. Some unused benefit dollars can be rolled over to the next year.

Visit afspa.org/dental, for the current dental rates for all four plans.

Life

AFSPA has partnered with Prudential to offer an **improved** term life insurance called **Group Enhanced Life (GEL)**. It enables members to use a portion of their benefit to assist with care giving needs such as home care, assisted living and nursing home expenses, if certain medical criteria are met. Other features include:

- Member coverage from \$50,000 to \$600,000; apply in \$50,000 increments
- Increased coverage for spouses & domestic partners. Select \$25,000 to \$300,000
- Increased coverage for dependent children, up to age 26. Choose \$10,000 or \$20,000 flat rate option
- Reasonable premiums; Coverage to age 80

AD&D

AFSPA's Accidental Death and Dismemberment (AD&D) policy, underwritten by Prudential, covers you in the event of accidental loss of limbs,

vision, hearing, paralysis, or for death – up to \$600,000 (min. \$10,000) without having to answer any health questions. AD&D also offers Seat Belt and Air Bag, Exposure and Disappearance, Loss Due to Coma, Home Alteration and Vehicle Modification, Dependent Education, and Day Care Expense benefits. It excludes acts of war (declared or undeclared) but covers acts of terrorism.

Disability

The **Lloyd's of London Disability Income Protection Insurance** plan pays enrollees 60% of their annual salary, up to \$5,000/month, up to two years (after a 45-day waiting period). It offers a Lump Sum Benefit option of \$250,000 or up to five times your annual salary, whichever is less – paid when your two-year benefit period has exhausted. Application acceptance depends on health status. Excludes injuries from acts of war or terrorism.

The **CIGNA Disability Plans** pay enrollees a percentage of their annual salary, up to a certain amount, depending on the chosen plan. Choose a two or five-year benefit period. Medical underwriting not required. There is a 3/6/12 Rule for pre-existing conditions. Covers injuries from acts of war or terrorism.

Choose a 30-day or a 90-day option:

- **30-day** - Pays up to 60% of your annual salary, up to a maximum benefit of **\$5,000** per month, following a 30-day qualifying period.
- **90-day** - Pays up to 60% of your annual salary, up to a maximum benefit of **\$7,500** per month, following a 90-day qualifying period.

Travel

AFSPA offers four (4) travel insurance plan options to cover a wide range of travel services and circumstances. These plans were designed for overseas leisure travel, as well as trips within the U.S. We offer a variety of flexible coverage options - choose what works for your travel needs. Purchase single or multiple trip coverage for short-term or long-term trips.

Features include: medical coverage, emergency medical and political evacuation, repatriation of remains, emergency cash advances, trip interruption, trip delay, luggage tracking/loss, etc. Learn more at afspa.org/aip/travel.

Members of Household Health Insurance

AFSPA offers three (3) Members of

Household medical plans, covering domestic partners, parents, dependent children over the age of 26, nannies, and any other AFSPA member family or friends who do not qualify for FEHB coverage.

- **Global Medical Insurance** is a health insurance policy by the International Medical Group (IMG) that provides flexible and secure medical coverage for members residing anywhere in the world. Choose from five (5) different plan options and customize your trip length and area of coverage.
- **GlobeHopper Senior** is a travel medical insurance policy by IMG that offers affordable coverage to U.S. citizens and U.S. permanent residents over age 65 while they travel outside of the U.S. Two (2) plan options are available: Single and Multi-Trip.
- **Liaison Travel Medical Series** is a comprehensive travel medical insurance policy by Seven Corners that covers U.S. citizens, U.S. permanent residents, and foreign nationals traveling and/or residing outside their home country. Three (3) plan options are available: **Economy**, **Choice**, and **Elite** with varied levels of coverages and trip lengths.



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The **Foreign Service Benefit Plan** treats overseas providers as in-network, converts foreign currency claims, and provides paperless reimbursement, generous massage benefits, low premiums and more.

AFSPA has provided comprehensive health insurance benefits to Executive Branch employees since 1929. Today, our membership encompasses **87,000+** active and retired **federal employees and their families.**

afspa.org/fsbp

FEHB plan offered to eligible Federal Civilian employees. All benefits are subject to the definitions, limitations, and exclusions set forth in the Foreign Service Benefit Plan's Federal brochure (RI 72-001).





SGLI:

How to Know if it's Enough

By Josh Andrews, Courtesy of USAA

It might be time to start thinking about how your family will use the proceeds from your Servicemembers' Group Life Insurance (SGLI) after you die.

That's an abrupt way to start the SGLI conversation, but it's an important question as you plan to meet your loved ones' needs. From paying off a mortgage to reducing debt to paying for college expenses, life insurance can help ease the financial burden when a family member dies. While it can't alleviate the grief, it can help remove one additional burden at a time you don't need additional burdens.

There are two main points I want to address up front.

1. SGLI is a great, low-cost benefit that should be a part of every service member's financial plan. Depending on your personal financial needs, family makeup and future goals, however, you may need additional life insurance coverage to better protect your loved ones.
2. USAA defines adequate life insurance as coverage that pays off 100% of debts and replaces five years of income.

Let's consider how life insurance can accomplish several common goals.

Common goals for SGLI

- Pay off debt
- Replace your income
- Pay for child care
- Secure health insurance
- Fund education costs or college savings
- Cover other individual goals

Pay off debt

When people think about life insurance, paying off debt is usually their main priority. After all, with no debt, savings can last much longer.

A family's biggest debt is usually their mortgage. In 2020, the average U.S. mortgage was \$208,185.

In addition to mortgages, most people also carry:

- An average of \$6,270 in credit card debt.
- A car loan of approximately \$17,553.

Let's say your family receives \$400,000 of SGLI. If you subtract the average mortgage, credit card debt and car loan, you're left with \$167,992. What will you do for income?

Replace your income

If the person who dies is the sole wage earner, replacement income can help bridge the gap until the remaining spouse can find a job. It also gives them time to grieve, so they don't have the added stress of finding a job immediately.

When I was serving active duty, I knew that if I died, it would take some time before my wife would earn as much as I was earning at that time.

There were several reasons for that. She had been out of the workforce for almost 10 years raising our children. And even before we had children, she didn't have many opportunities for continual employment because as a military spouse, she moved every two to three years. It would take some time for her to re-climb the corporate ladder to earn the same salary I was making mid-career.

That's not to say that the loss of one income doesn't equally affect dual-income households, especially if they're spending all they earn. No matter how much you make, if you'll be financially burdened by the loss of income, strongly consider how life insurance can be used to ease your burden.

To help illustrate the cost of replacing an income, we will look at an E-5 and an O-3.

To replace five years of income, an E-5 would need \$300,375 of SGLI and an O-3 would need \$489,110.

If you recall the previous example, you're only left with \$167,992 after paying off your debts. So regardless of where you are in your career, you'd likely fall short of being adequately covered.

In my case, I didn't want my family to just get by; I wanted them to be able to fully accomplish our family's financial goals. That's where extra life insurance—above "adequate coverage"—came into play.

Pay for child care

When life insurance proceeds are used to pay for daily living expenses, they'll eventually run out. If you need child care to return to work, it can be a significant line item in your budget.

According to a 2021 Cost of Care Survey conducted by the online marketplace Care.com, 57% of families spent more than \$10,000 on child care in 2020. If you can cover child care with your life insurance payout, you can help the new income go further.

Secure health insurance

Health insurance will be important during the transition, especially because your spouse may not go back to work immediately. Your status at the time of death will determine if TRICARE coverage continues—and for how long.

Active-duty family members will continue to be covered for the first three years after the active-duty sponsor dies.

If you're not covered by TRICARE and you don't have health insurance through an

employer, subsidized coverage may be available through healthcare.gov.

Fund education costs or college savings

Many people plan to use life insurance proceeds to pay for their children's education costs. Qualified dependents may be able to use unused GI Bill awards for higher education, which could reduce the need for life insurance to cover this goal.

Cover other individual goals

Every person and family has a unique set of goals and priorities. In addition to funding the basics like debt repayment and income replacement, some people want to use life insurance to leave a legacy, to pay off a small business loan, to hire someone to run their business, or provide for the care of a special needs individual.

Because every situation is different, every family needs to have the life insurance conversation. To determine whether SGLI is enough, you have to know what is needed to live day to day, as well as the other goals you and your family want to accomplish. If you determine SGLI is not enough, consider supplementing SGLI with a private life insurance policy to ensure your desired goals are met. ■

Income (Yearly)	E-5	O-3
Basic Pay	\$38,246	\$75,740
BAS	\$373	\$266
BAH	\$21,456	\$21,816
Total Yearly Income	\$60,075	\$97,822

These numbers are based on 2021 military pay tables, seven years of service, living in San Antonio, Texas, at ZIP code 78288, and earning BAH with dependents.



5 Ways

to help lower your auto insurance rates

Courtesy of USAA

The price you pay for auto insurance can vary by hundreds of dollars, depending on what type of car you have, where you live and how much coverage you need. It's great to save money, but it's also important to make sure you have the right amount of coverage. "Don't get such a bare-bones policy that you put your financial assets at risk," says JJ Montanaro, a CERTIFIED FINANCIAL PLANNER™ professional with USAA. "You have insurance to limit the financial damage when something bad happens."

Consider these responsible money-saving tips:

1

Compare vehicle insurance costs.

Before you buy your next car—whether new or used—compare the insurance rates of different vehicles. Your premium is based, in part, on the make and model, the cost to repair it, the overall safety record and the likelihood of theft. Insurers generally offer discounts for features such as air bags or daytime running lights that reduce risk.

3

Reduce physical damage coverage on older cars.

It may not make sense to keep collision coverage on low-value cars because the insurance costs could exceed anything you get back on a claim. Physical damage reductions offer the greatest savings with limited risk. You also can ask for an estimate of your car's trade-in value the next time you're at the dealership.

4

Research other discounts.

USAA, along with many other insurers, offers savings if you have more than one policy or a long-running loyalty to the insurer. You may also be able to find additional discounts for accident-free drivers and some defensive-driving courses.

2

Raise your deductible.

A deductible is the amount of money you pay for repairs before your insurance policy kicks in. By requesting a higher deductible, you can lower your monthly premium substantially. Even increasing your deductible from \$200 to \$500 could reduce your collision and comprehensive coverage cost by 15 to 30%. "Just remember, this is where your emergency fund comes in," Montanaro says. "If you're going to raise your deductible, have enough set aside to cover it."

5

Maintain a good payment history.

While good driving habits are the best way to keep your insurance costs low, in some states, your insurance credit score could also be a factor. Repair a damaged credit rating by consistently paying bills and using credit responsibly. Examine your credit report for any mistakes and fight to fix them. ■

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In a Wreck? YOUR GUIDE TO GETTING BACK ON THE ROAD QUICKLY

Courtesy of USAA

When you're in an auto accident, the last thing you want to navigate is your next steps with your insurance.

This step-by-step guide can help you through your auto insurance claim with USAA and get you back on the road as quickly as possible.

While at the scene of the accident

- Stay at the accident scene.
- If you or someone else in the accident is injured and needing immediate attention, contact emergency services (911).
- Take pictures of the accident. Try to collect a record of how the accident took place as best as you can, including the direction each vehicle was traveling, the speed of each car, etc.
- Gather the details of the other drivers and cars, including makes and models of the vehicles involved. Collect driver, registration and insurance information for the other drivers. Collect any witness statements or names of witnesses if possible.

Reporting and settling your claim with USAA

The USAA Mobile App and online Claims Center are the primary tools you'll need to file, get status updates and settle your claim.

You can upload pictures and message your adjuster at any time. You can also arrange to use any policy benefits that you might have like rental car assistance.

The Claims Center within usaa.com or the mobile app will be a valuable tool to make this challenging event less of a headache.

From the start to the end of your claim

There are five basic parts to your claim. Each part may vary depending on the complexity of your accident. We'll dive deeper on each of these parts to help make you more aware and in control of your claim.

Initial report

When you first notify USAA of your accident, we'll ask for accident details to better understand what took place and what your next

steps will be. Some claims are more straightforward than others. For example, a simple roadside assistance or glass-only claim likely won't require additional action or reporting from you, while a collision accident with another vehicle will.

Your initial report will include the information you gathered immediately after the accident and an adjuster will be assigned. Your adjuster will be the quarterback for your claim. They will help you go through the rest of the steps to get your vehicle repaired or replaced and settle expenses for things like medical costs or property damage incurred.

Investigation

Your adjuster will review all your information from your initial report and set up next steps.

You'll have a timeline within the Claims Center that lays out what USAA is doing and what may be needed from you. Your adjuster will make an initial assessment of what took place in the accident. Police reports, your information, pictures and any statements submitted will help to determine if you were at fault.

If at fault, you're responsible for your policy deductible, which will be collected by your repair shop.

At-fault accidents can also come with other issues, like liability for damages to other people's property or responsibility for their injuries. These aspects of your claim can require your adjuster to work with several other parties like the other driver or property owners' insurance company, medical service organizations and legal professionals.

Estimate for your repairs

Now it's time to get your vehicle inspected and repaired, if possible. Where you choose to take your vehicle for repairs may impact the timeline when handling your claim. In most states, a virtual inspection process is available. You'll receive instructions after your claim is filed. Our photo estimate tool may be used and you may be able to have an estimate in as little as four hours.

We have a network of shops available to repair your vehicle, or you can have your vehicle repaired at any shop of your choice. Your policy will cover the reasonable costs of repairs no matter where you go. If you do

choose a USAA-preferred shop, the repairs and payments made to the shop will be handled on your behalf less any deductible.

If your car is declared a total loss, USAA will work to compile a market valuation report to establish the "actual cash value" of your vehicle. The valuation report is based on your vehicle's condition before the loss and compares it to similar vehicles sold or available for sale in your area.

Payment to you

When the work is completed, the repair shop will collect payment from you or from USAA. Typically, if a deductible is owed, the repair shop will collect that from you directly before repair work is initiated. If you choose to go to an independent shop or a repair facility that's not within USAA's preferred shop network, payment may be made to you through an electronic funds transfer or check. After you've received funds, you can pay the repair facility.

With a repaired vehicle, you're back on the road and your adjuster will continue to work to close and settle your claim with other parties that may have been involved.

If your car was deemed a total loss, we'll provide you with the market valuation report, your settlement amount and a list of the documents you'll need to provide to complete a vehicle transfer to USAA. We're basically buying your totaled car.

Your total loss settlement can be mailed by check or electronically deposited into your checking or savings account. If you have a loan on your vehicle, your payment is typically first made to your loan provider to pay off the outstanding balance. You would receive the difference of what your car's actual cash value is and your loan balance amount.

If your vehicle was worth less than your car loan amount, or being upside down in your loan, any Guaranteed Asset Protection, or GAP, coverage that you may have had with your loan would help offset the loan balance. If you don't have GAP coverage, you would be responsible for paying the balance on the loan.

Settling the claim if others are involved

In an at-fault accident, you may be considered liable for the damages to the vehicles or

property damaged in the accident. Additionally, injuries are common with automotive accidents and your liability coverage may pay for medical services received.

Your liability coverage will typically have a limit that will compensate each person involved and another limit for the total liability that your policy will pay out to all parties. It's not uncommon for legal actions to happen as part of your accident.

If the other driver was injured and required significant medical and rehabilitative care to get back to their before-accident life, liability coverage can quickly be exhausted, and you could be financially responsible for expenses and awards or judgments above your liability limits.

To best protect your financial situation, you should review your insurance policies at least yearly. It's wise to have your liability coverage limits cover at least the amount of your net worth (everything you own minus everything you owe).

Review your coverage

Don't wait until an accident happens to know what your policy covers. You should review all of your insurance policies at least yearly to ensure you're adequately protected and you have the benefits you need.

Check for things like roadside assistance benefits and rental car coverage. If your policy doesn't have those features or added coverage, you might be happier finding out in the comfort of your home versus on the side of the road when you need them.

Review any changes to your personal and financial situation. Did you move? Are you working from home more and driving less? What about a job change or a big raise? Life events like these should serve as a signal for you to review your overall financial position and see if tweaking your insurance is needed.

Quick tips:

- Download the USAA Mobile App.
- Review your insurance policies at least yearly and with life changes.
- File and manage your claims through the USAA Claims Center.
- Visit the USAA Auto Insurance Claims FAQ for more information. ■



Do I Really Need Travel Insurance?

Courtesy of StripesEurope.com

Three days before we were supposed to be on a plane to London, my husband's leave still hadn't been approved. He'd submitted the request as soon as he was able, but it seemed to have hit a snag on its way up the chain of command. Even though we were on pins and needles waiting to hear whether or not we would have to cancel our expensive trip, we were used to the nail-biting process.

Since my husband joined the military, I've learned the hard way that planning anything more than a few weeks in advance is risky business. When duty calls, he has to go - even if we're busy packing our bags for the blissful vacation we've been planning and dreaming about for more than a year. "Service before self" isn't a platitude; it's a military family's way of life.

While we know we must accept it and even expect the military to derail our well-laid travel plans from time to time, disappointment still packs a heavy punch. The added expense of having to cancel or make changes to existing reservations could be the knock-out blow... which is why we are thankful for travel insurance. The only way we were willing and able to book flights, hotels and transportation for our trip to London in advance was knowing we had coverage to fall back on if we needed it.

If you're currently planning a trip while juggling the uncertainties of military life, I highly recommend leaving room in your budget for travel insurance. It may seem like an unnecessary added expense at first, but it could end up saving you tons of money in the event of an unexpected

PCS, deployment or temporary duty assignment. From medical coverage to flight changes to protection for personal belongings in the event they get lost or stolen, travel insurance could be a vacationing military family's best friend.

Before purchasing a plan through an airline, cruise company or travel agency, check with your insurance provider; you may be eligible for special member rates.

Still asking yourself, "do I really need travel insurance?"

Three military spouses weigh in on why they also opt for the additional coverage when planning their vacations.

Lizann of Seasoned Spouse, "When we lived overseas, we took advantage of traveling in Europe. We always got traveler's

insurance, because my husband's unit could always be called in for emergencies, and plane tickets for a family of six aren't cheap! Also, when our daughter was born overseas, we couldn't travel until she had a passport. My family planned a big reunion trip to Ireland when the baby was 2 months old. We had insurance in case the passport [wasn't expedited] and we couldn't go."

Amanda of Away We Run, "Planned our whole honeymoon only to find out my husband was getting deployed months prior. Got a full refund after 30 days!"

Amanda, "Before kids, my husband and I usually took the financial risk of no travel insurance. Now, with 4 kids, military life is too unpredictable; we always add trip insurance. The first big use was our 2016 Disney cruise that we had planned over a year in

advance. We took the timing of deployments and PCS into consideration and booked our first cruise vacation with childhood friends. Eight months out, we received off-cycle orders to Germany. We tried everything to still cruise but ended up canceling. So glad we had the insurance! Made the cancellation easy."

In the end, my husband's request for leave was approved at the last minute, and we made it to London after all. Still, knowing it would've worked out just fine if it had been denied was well worth the little bit of money we spent to protect our travel plans. We'll definitely be adding the optional coverage again next time we plan a trip.

Do you opt for travel insurance, or do you prefer to risk it on the road? ■



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