3 REASONS TO CONSIDER TERM LIFE INSURANCE

NEW HOME? YOU’LL NEED NEW INSURANCE

RENTERS INSURANCE: THE OVERLOOKED POLICY

SMART SHOPPING TIPS FOR AUTO INSURANCE

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1. See the right doctors. You want manageable: help keep the cost of medical care from adding up. Try these suggestions to care at very low cost compared to the prices paid by civilians. TRICARE offers a wide range of health plans for their service to the nation. TRICARE offers several coverage levels that have different options to choose from, providers, etc., at different cost points. Carefully consider all your options, including what physicians you will want to see, how healthy you and your family are, and anticipated future medical needs, to determine the right level of care for you.

3. Keep up to date with checkups. Don’t skimp on care to save a few dollars, especially if you have a health condition that requires regular monitoring. Be sure children get all necessary vaccinations and take preventive measures such as getting a flu vaccination every year.

4. Ask for the best deal. Talk to the manager of patient accounts about your situation. Your TRICARE benefits might vary depending on your plan level and whether you or the physician’s office files your claim. For example, if you use the point-of-service option (POS) to visit a non-network, non-participating physician, they can charge you up to 15% more than the agreed-upon TRICARE rate. If you plan to see a physician regularly, then discuss any options that can make your care more cost effective.

5. Save with an FSA. If your employer or your spouse’s employer offers a flexible spending account (FSA), take advantage of it. An FSA allows employees to have money deducted, pretax, from their paychecks for medical care. Look at canceled checks, bills, or credit card statements to determine how much you spent on medical care (out of your own pocket, outside of health plan benefits) last year. One rule of thumb is to request withholding of about 80% of that amount, to be safe. Be sure you can spend the full amount you have deducted, because if you do not spend it, you lose it.

6. Cut drug costs. First, seek to receive your medications from a military treatment facility, where they are free. Otherwise, ask your doctor if a generic medication will work as well for you as a brand-name one. If it is equally effective, a generic drug costs two-thirds less than when ordered through TRICARE’s mail-order pharmacy. If not, look into all options, including discount medications from warehouse clubs and discount/chain stores, to find the best deal on needed medicines.

7. Deduct what you can. Develop a method—whether a spreadsheet, a shoebox for receipts, or a list in a notebook—to keep track of what you spend on medical care. If you spend more than 7.5% of your income, you could be eligible to deduct those costs from your income taxes.

Medical care can be a challenging expense, especially when unexpected conditions arise. Fortunately, by planning as many cost savings as you can foresee, you can make a difference in the cost of care for you and your family.
What Happens When I File an Insurance Claim?

Courtesy of Consumer Financial Protection Bureau

After you submit a claim, an insurance adjuster will come to inspect your property, review the damage, and ask you questions about the damage and condition of the property before the damage was done.

You can provide estimates from your own research about the costs of repairing the damage to make sure you get a fair settlement.

An insurance adjuster works for the insurance company.

After the adjuster submits a report on your claim, your insurance company may issue a settlement, which is the money they agree to give you to fix or replace your damaged property, for example, fix a hole in your roof, repair your car, or replace your belongings.

Filing an insurance claim is the first part of a journey that has many routes. Read on as we highlight the stops along the way.

No matter which route you’re on, things can get confusing. Write down the names of the people who assist you. Ask if there is a case number associated with your account. Once you have come to agreement or understanding, be sure to document everything that you discussed.

Process for home and auto insurance claims

Homeowners insurance

When you file a homeowners insurance claim, it’s probably be made out to both you and your mortgage servicer or lender. Most mortgage agreements require this in order to protect the lender’s interest. Typically, your servicer will release a portion of the settlement money before work begins so you can hire a contractor. As the work progresses, the servicer will typically release more money. The rest will be released once the job is finished and the home passes inspection.

Auto insurance

When your vehicle is damaged, your insurance company assesses the value of your vehicle based on age, model, and other factors. Damage to your vehicle does not eliminate your responsibility to make your auto loan payments. When the cost of repairs is more than the value of the car, the insurance company may declare the vehicle a total loss.

If the amount you owe on your auto loan is more than the insurance paid on your totaled car, you may owe the difference to the lender. This situation is sometimes called “negative equity.” Sometimes, people have a type of coverage called Guaranteed Auto Protection (GAP), which covers the difference between the amount due on the auto loan and the amount paid by insurance.

Make sure that you clarify with your insurance company and your auto loan lender what type of insurance policy you have as well as what losses the insurance will cover and what you will still owe. After the insurance process is completed, if you owe more on the loan than the amount paid by insurance, you will owe that amount. If the amount of your insurance coverage is more than what you owe, then the insurance company will pay you the difference.

Tip: It’s a good idea to take pictures and videos of any damage to your property (home, car, boat, etc.) and what was inside your property. For example, if your home was flooded and the damage ruined your furniture. If you do have pictures or videos of your property before the damage, this is also helpful in assessing the damage to the condition of your home, car, or other property and contents before the disaster and before any emergency repairs.

How long does it take to get my settlement?

There are many factors involved in how long it will take your insurance company to determine your settlement.

This includes:

• The extent of the damages
• The length of time it takes to send out an adjuster
• Whether you and your insurance company can agree on an appropriate amount to compensate you for the damages
• Your state law may also set timelines for an insurance company to follow in the claims process

Contact your state insurance department or commissioner for more information.

If you feel that your claim was unfairly denied or you were not appropriately compensated, you can also file a complaint with your state insurance commissioner or department, and you can contact a lawyer.

How homeowner insurance settlements are determined

Your homeowner’s insurance policy is the contract between you and your insurance company. Your policy, along with your state law, will control what coverage you have and how your settlement is determined.

For example, your policy could insure your home for either replacement cost or actual cash value. Replacement cost gives you funds to cover the costs to rebuild your home or repair damages using similar materials. Actual cash value gives you funds to repair or rebuild based on the value of your home considering its age and condition or market value.

Keep in mind that the market value of your home may not match the replacement value. That’s because, in some locations, the materials and labor that go into rebuilding your home may be less than the overall value of your property.

There are also special laws in various states addressing what happens if your home was insured for less than its replacement value. Your state insurance department or insurance commissioner may have useful information. You may also need the advice of a lawyer if you have a large claim.
As you prepare to leave the military, there’s much to consider for yourself and your family. Chief among them is health insurance.

For many departing service members, it’s an abrupt transition. That’s because under TRICARE—the military health insurance for active-duty members and their families—health care free is.

“If you get sick or injured, you go to the doctor on base and TRICARE covers your health care,” says USAA advice director Sean Scaturro. “Words like deductible, co-pay and premium likely mean very little to you.”

As a civilian, understanding these terms can make or break your budget. About two years before you retire or separate, it’s time to start transition planning.

How to Think About Post-Military Health Insurance

If you’ve never had to budget for health care, the cost of insurance can come as a shock. According to Federal Reserve studies, 40% of Americans couldn’t pay a $400 unexpected expense without taking on debt.

If that sounds like you, go ahead and add a line item to your budget for health care. Don’t wait until your transition is complete—start now, advises Scaturro. “As military members prepare for transition into civilian life, I recommend saving now for emergencies, including money to help pay for health care.”

Scaturro recalls a recent trip to his local urgent care with his son after an ear injury. “My son didn’t need gauze, sutures, liquid stitches or anything. It cost us $300 just to see the doctor,” he says. “If Americans have trouble paying for an unexpected $400 expense, they’ll also have trouble paying their doctor’s office co-pays and health care deductibles.”

Before you shop around for health insurance, ask yourself these three questions:

- **What are my health care needs?** A single person in good health has different needs than a married person with young children, for example. Children tend to require more frequent medical attention, while a young adult may see a doctor less often. Also consider any pre-existing health conditions that VA disability might cover.

- **Which health care plan do I qualify for?** There are different requirements for each health care plan. Looking at all the options for which you qualify helps you make an informed choice.

- **Which health care plan makes the most financial sense?** Weight plan costs and compare upfront costs and deductibles. Scaturro warns against basing your decision on cost alone. Instead, start by looking at your needs and make sure the plan you choose offers enough coverage.

What about the Veterans Health Administration or VA Benefits?

The Veterans Health Administration (VA) is a care provider where you may be able to receive medical services. The VA isn’t an insurance provider. When it comes to your planning, see how getting care from the VA can help your financial situation.

VA medical care is prioritized based on several factors, such as your military service history, disability rating and income level. If you have a service-related disability that requires ongoing treatment, consider getting care from the VA. It may be free or more affordable than going through a non-VA doctor or facility.

Receiving care from the VA doesn’t mean you’re limited to getting care from their doctors. Keep in mind that if you get care from non-VA doctors, you’ll likely be using your health insurance and will need to plan for those costs.

Learning the Terms for Post-Military Health Insurance Costs

As you’re learning new health care language, get familiar with the following terms—all of which describe costs you’ll be responsible for:

- **Premiums** – This is the amount you’ll pay for your insurance each month.

- **Deductibles** – This is the amount you pay before your insurance kicks in. After you pay your deductible, your insurance takes over. Let’s say you have a $2,000 deductible and have a procedure that costs $10,000. You would be on the hook for $2,000 and insurance would pay $8,000. After you meet your deductible, you usually only pay for things like coinsurance or copays.

- **Copays and Coinsurance** – You pay these costs at the point of service, like a $20 co-pay for a doctor’s visit.

- **Out-Of-Pocket Maximum** – This is the most you’ll pay in a single policy year, aside from your premiums and any uncovered expenses.

Retiring vs. Separating: Why It Matters

If you’re separating from the military, you won’t be eligible for TRICARE. You’ll be purchasing health care as a civilian.

If you’re separating, you’ll be eligible for TRICARE. “The advice is pretty simple,” says Scaturro. “If you have access to providers that accept TRICARE, enroll in TRICARE.” Why? Expenses are low, premiums are low, and deductibles are low.

Any provider that accepts Medicare should also accept TRICARE. Contact any providers you plan to see and make sure they accept it. Rural areas may have a smaller number of doctors. You may have to travel some distance to get to a doctor that accepts TRICARE.

If you don’t have TRICARE providers in your area and don’t want to travel, you’ll need to get health insurance through your employer, the health care.gov federal marketplace or a private exchange like USAA.

And you and your family have some temporary options when you transition off your military health insurance. TRICARE offers several temporary health plans, including:

- **Continued Health Care Benefit Program (CHCBP).** CHCBP is a premium-based plan that provides coverage for 18 to 36 months when you lose TRICARE.

- **Extended Care Health Option (ECHO).** ECHO helps qualified beneficiaries with special needs.

- **Transitional Assistance Management Program (TAMP).** TAMP provides transitional health care benefits after regular TRICARE benefits end.

(For more information on each of these options, visit TRICARE.mil.)

Most importantly, start planning now for your post-military health insurance. Consider meeting with the trained professionals at your post or base who can help with the transition. They are valuable resources who can help you make the best decision for your needs.

Employer-Provided Health Insurance

About half of Americans get their health insurance through their employer. When you’re applying for jobs as a civilian, remember that all employer-provided health care plans are not the same. During the interview process, be sure to ask about health care benefits. Keep that information in mind when you’re making a final decision about where you want to work.

Let’s say “Employer A” is offering a better salary than “Employer B.” Also, “Employer B” has a health insurance plan that covers more medical service costs with a lower deductible. “When you consider all the financial factors, the best employer isn’t so cut and dry,” says Scaturro.

Your employer-offered benefits could also include other plans such as disability, dental and vision insurance. Consider your total benefits and what they mean to your take-home pay.

Ready to act? Even if your military retirement or separation feels far off, it’s not too early to research plans that are available through the healthcare marketplace. Visit usaa.com/healthsolutions or healthcare.gov.
Your New Home Needs New Insurance

Insurance is a very competitive business, and the price you pay for your homeowners’ insurance can vary enormously. Companies offer several types of discounts, but they don’t all offer the same discount, or the same number of discounts in all states. So, to begin with, ask your agent or company representative about any discounts available to you.

Shop around

It’ll take a few phone calls, but this could save you a good sum of money. Ask your friends, check the Yellow Pages, call your state insurance department. Also check consumer guides, insurance agents, and companies. This will give you an idea of price ranges and tell you which companies or agents have the lowest prices. From time to time, Consumer Reports ranks insurance companies according to responsiveness and customer satisfaction; check to see if there are recent ratings. Then, when you’ve narrowed the field to three insurers, get price quotes.

But just as man does not live by bread alone, you should not consider price alone.

The insurer you select should offer both a fair price and excellent service. Quality service may cost a bit more, but it provides added conveniences, so talk to several insurers to get a feel for the type of service they give. Ask them what they could do to lower your costs. Check the financial ratings of the companies, too.

Raise your deductible

Deductibles are the amount of money you have to pay toward a loss before your insurance company starts to pay. Deductibles on homeowners policies typically start at $250. By increasing your deductible to $500, you could save up to 12%; $1,000, up to 24%; $2,500, up to 30%; and $5,000, up to 37%, depending on your insurance company.

Buy your home and auto policies from the same insurer

Some companies that sell homeowners, auto, and liability coverage will take 5% to 15% off your premium if you buy two or more policies from them.

When you buy a home...

Consider how much it will cost to insure your home. Because a new home’s electrical, heating, and plumbing systems and overall structure are likely to be in better shape than those of an older house, insurers may offer you a discount of 8% to 15% if your house is new.

Check its construction, too. Brick, because of its resistance to wind damage, is better in the east; frame, because of its resistance to earthquake damage, is better in the west. Choosing wisely could cut your premium by 5% to 15%.

Avoiding areas that are prone to floods can save you $400 or so a year for flood insurance. Homeowners insurance does not cover flood-related damage. If you do buy a house in a flood-prone area, you’ll have to buy a flood insurance policy, too.

Does your town have full-time or volunteer fire service? And is your house close to a hydrant or fire station? The closer your house is to firefighters and their equipment, the lower your premium will be.

Insure your house, not the land

The land under your house isn’t at risk from theft, windstorm, fire, and the other perils covered in your homeowner’s policy. So don’t include its value in deciding how much homeowners insurance to buy. If you do, you’ll pay a higher premium than you should.

Beef up your home security

You can usually get discounts of at least 5% for a smoke detector, burglar alarm, or dead-bolt locks. Some companies offer to cut your premium by as much as 20% if you install a sophisticated sprinkler system and a fire and burglar alarm that rings at the police station or other monitoring facility. These systems aren’t cheap and not every system qualifies for the discount. Before you buy such a system, find out what kind your insurer recommends and how much the device would cost and how much you’d save on premiums.

Stop smoking

Smoking accounts for more than 23,000 residential fires a year. That’s why some insurers offer to reduce premiums if all the residents in a house don’t smoke.

Once you retire

Retired people stay at home more and spot fires sooner than working people. Retired people have more time for maintaining their homes, too. If you’re at least 55 years old and retired, you may qualify for a discount of up to 10% at some companies.

Compare the limits in your policy and the value of your possessions at least once a year

You want your policy to cover any major purchases or additions to your home. But you don’t want to spend money for coverage you don’t need. If your five-year-old fur coat is no longer worth the $20,000 you paid for it, you’ll want to reduce your floater and pocket the difference.

If you’re in a government plan

If you live in a high-risk area—one that is especially vulnerable to coastal storms, fires, or crime—and have been buying your homeowners insurance through a government plan, you should check with an insurance agent or company representative. You may find that there are steps you can take that would allow you to buy insurance at a lower price in the private market.
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¹Availability of renters insurance to residents of another country is limited to qualified members. (Countrywide average price for policyholders who have $2,500 personal property coverage, $100,000 liability coverage and $5,000 medical payments coverage as of January 2020. Rates vary by location and risk. Rates are subject to change. The less due to a covered peril of military uniforms or equipment owned by you and when the loss occurs while you are on active or reserve duty not deductible under the applicable policy. The coverage to apply, property must be under a bill of lading or other professional shipping document before being shipped. Policy must be in force before goods are placed in transit. Breakage, marring and scratching are excluded. Membership eligibility and product restrictions apply and are subject to change. Renters insurance provided by United Services Automobile Association, USAA Casualty Insurance Company, USAA General Indemnity Company, Galion Property and Casualty Insurance Company, based in San Antonio, TX, USAA Limited UKI and USAA S.A. (Europe), and is available only to persons eligible for P&C group membership. Each company has sole financial responsibility for its own products. © 2021 USAA. 099504-0821.)
RENTERS INSURANCE:  
The Overlooked Policy

Moving into an apartment can be expensive. You have to pay the movers, possibly your first and last month’s rent, and most of your utilities all on the same day. So naturally, buying renters insurance is the furthest thing from your mind. But if all your possessions are destroyed in a fire or stolen, no one is responsible for your property but you.

If you think your landlord’s insurance will take care of it, think again. The landlord’s insurance only covers the building, not what’s inside the building. And the same applies to military housing. The federal government provides minimal, limited coverage to your personal possessions if they are damaged or stolen from your quarters, according to an Educational Foundation report. What’s more, if you have a fully furnished one-bedroom apartment, replacement costs average between $35,000 and $40,000.

If you’re considering coverage here are few options to choose from:

Personal Property Coverage
The first part of a renters insurance policy is called Personal Property Coverage. It covers your personal belongings. Property coverage may be considered “named perils” or “all risks.”

- Named peril policies cover property that is stolen or damaged by a cause named in the policy.
- All risk policies pay for damages from almost any loss, except those specifically excluded.
- When you buy a renters policy, you choose an actual cash value policy or replacement cost coverage.
- Actual cash value means the insurance company will replace your property minus a deduction for depreciation.
- Replacement cost coverage means the company will pay to replace your property without depreciation—the price you would pay to replace it today. Replacement cost policies will always cost slightly more than actual cash value policies because insurance claims filed on replacement cost policies usually cost the company more than those filed on actual cash value policies.

Liability Coverage
Liability coverage pays for medical payments for injuries or damage to individuals or property that you are legally responsible for.

Possessions Inventory
To file an insurance claim, you must list everything you lost in a fire or theft. If you don’t want to make a list and try to go off memory, you will undoubtedly miss a few possessions and get a smaller payout from your insurance company.

Here are other suggestions for logging your belongings:
- If you record your belongings, read off the serial numbers of the items and the original price for all of them.
- Keep all receipts. Some insurance companies require them for documentation.
- Keep a master list of all your possessions’ serial numbers.
- Keep photos of your belongings and serial numbers in a safe deposit box or another secure location away from your home.

Renters insurance protects your personal property. Get started comparing rental insurance rates and coverage today.

Why Every Homeowner Should Have
Flood Insurance

Most homeowners insurance doesn’t cover flooding. Just because you don’t live in a recent flood zone doesn’t mean you’re not at risk for flooding. Find out if flood insurance is right for you.

The federal government considers floods the nation’s most common natural disaster. They strike every state and leave homeowners with huge repair costs. Why? Because typical homeowners insurance doesn’t cover flood damage.

Instances of flood may include rising water from torrential rain, overflowing inland or coastal waters, and mudflow. Damage caused by flooding can be catastrophic and without coverage for flood, homeowners are left bearing the expense of repairs and recovery themselves.

Homeowners are required to purchase flood insurance if they have a federally backed mortgage and live in a high-risk flood area as identified by the National Flood Insurance Program (NFIP).

For others, though, it’s optional.

“Floods can occur anywhere,” says Corise Morrison, executive director of residual markets for USAA. “Low risk does not mean no risk.”

The Federal Emergency Management Agency (FEMA) establishes flood-risk ratings for areas based on hydrologic studies and other data. In high-risk areas, a 1 in 4 chance of flooding exists over a 30-year mortgage. In moderate- to low-risk zones, the chance of flooding is reduced but still present.

More than 20% of the NFIP’s claims come from people with property outside of high-risk areas, according to federal estimates.

USAA sells and services coverage under the NFIP. The program’s maximum coverage is $250,000 for a home and $100,000 for its contents, but USAA can refer members to a broker if additional coverage is needed. The program also provides coverage to condo owners and renters.

Homeowners can assess their risk for natural disasters plus get tips on how to minimize them and protect their personal property with USAA’s Property Risk Assessment Tool. Additional information on risk ratings is also available through the NFIP.

But don’t wait until an extreme storm is approaching to act. Normally, flood coverage won’t begin until 30 days after purchase.
The Right Life Insurance for the Military

Confused about life insurance? Whether you need it, what kind, how much and the like? So are a lot of people in the military. While the military provides you with Servicemembers’ Group Life Insurance (SGLI) coverage, that may not be enough for some people. To make those decisions easier, we’ve boiled it down to the basics.

1. Do you need it?

That’s the easy part. If you’re not responsible for anyone or anything, you probably don’t need life insurance. If you’re single, with no kids, and a lot of people aren’t counting on your income, you probably don’t need life insurance. Remember, the military already provides you with a maximum of $400,000 of life insurance. But if you’re married, have children, or take care of aging parents, SGLI coverage is most likely not enough. It’s probably a good idea to get additional life insurance, as well.

2. Can I get it?

Members of the military have difficult and often dangerous jobs. Some military professions, such as fighter pilots and paratroopers, are unable to receive life insurance simply because some companies feel their line of work is too risky. A good bet is to find an insurance company that understands the military and will provide you coverage regardless of your military career.

3. Is there a “war clause”?

A little-known fact about life insurance policies? Some don’t pay if you die as a result of war. For members of the military, this is a significant issue. When looking for a life insurance policy, make sure that if you die as a result of combat duty, your family will receive the benefits of that policy. None of the life insurance policies at USAA contain a war clause.

4. How much insurance do you need?

There’s no magic formula but you can start by figuring out what you want life insurance to do for you. Do you simply want a policy to cover your funeral, debts, and unpaid medical bills? Or are you worried about providing enough college money for your children or retirement savings for your spouse if you die suddenly? Some experts say you should buy a policy that’s seven to 10 times your income. But that’s not the answer for everyone.

“Getting the right amount and type of insurance depends on your specific situation,” says Rob Schaffer, executive director of Product Management for USAA Life Insurance Co. “You need to ask yourself some key questions to decide what fits your budget and your circumstances. This is where talking to an insurance company or financial adviser can help.”

5. What kind do you need? How long do you need it?

Consider the kind of insurance you want: term or permanent life insurance.Buying term insurance is like renting a house, but the lease on the insurance policy can be used only for a specific term–10 years, 20 years, or whatever you choose. Permanent insurance, on the other hand, generally has a higher premium than term, but lasts for a lifetime. The policy also builds cash value that you can borrow against or withdraw if you have an unexpected need for it. Once you decide between term and permanent life insurance, you have one more step which is to sign up. Both types of life insurance have several options. Make sure you research the information, consult with a financial adviser, and choose carefully. But whatever you do, don’t delay. The cost goes up with age.

6. Life (insurance) after the military

Planning to separate from the military? It’s a good idea to start shopping around at least two months ahead of life insurance. Your SGLI policy won’t be valid once you leave the military. It can take up to six weeks to get a life insurance policy, so don’t cancel your SGLI until your new policy has been issued and the first premium has been paid.

Coverage for you

One option is to convert your SGLI to a five-year renewable term policy with Veteran’s Group Life Insurance (VGLI), which will provide up to $400,000 in coverage. If you’re in poor health, this can be a good value. But if you’re healthy, you might find a more affordable option with a commercial life insurance company.

Coverage for your spouse

Your spouse is an important part of your family’s financial security even if he or she doesn’t earn an income. Think of it this way. What would it cost to replace the childcare, meal preparation, and other household tasks your spouse does? If you had the $100,000 of coverage for your spouse under SGLI, you will not be able to convert it to VGLI once you separate from the military. The good news is purchasing a relatively inexpensive life insurance policy can offset the expenses associated with losing a spouse.

7. Shop around to find the right fit.

The first, and most important step, is to find the right policy for your budget and family’s needs. It’s easy to compare policies with Military.com’s life insurance tool that matches you to multiple partners, so you can shop around... in one stop.

3 Reasons to Consider Term Life Insurance

Term life insurance isn’t just for the young. It can cover you during home remodels or any large loans that may affect your loved ones. Term life insurance can let your loved ones handle urgent financial issues if you pass away.

A key difference between term and whole-life insurance lies in the name. Term life insurance offers a higher amount of insurance coverage for a shorter, specific period of time, unlike others like whole-life insurance. The shorter period makes it less expensive than whole-life insurance, but it also comes with a tradeoff. If you still need life insurance after the initial term period, your policy may have a much higher cost or lower coverage amount.

Why would someone spend the money for temporary coverage and receive nothing at the end?

“Term insurance can cover short-term needs, like paying a mortgage,” said Sean Scaturro, Advice Director for USAA. “In 30 years, you may not need the same amount of coverage that you do today. That’s why term insurance pricing can meet your needs without breaking your budget.”

Reasons to consider term insurance could include:

1. You’re young and want to cover a large financial commitment, like school or a mortgage. Your current risk of death is lower, so coverage premiums can be 20% lower than a whole-life policy.
2. The covered commitment is temporary. Once paid back, you no longer need the protection and insurance.
3. You have young children you want to send to college. When projecting for future costs, consider a 20- or 25-year term policy to cover their potential college costs.

Planning for your future includes more than just insurance. Consult with an insurance specialist to see if term life insurance can meet your personal needs.
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 simplest and most affordable 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:

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<td>45-49</td>
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<td>60-64</td>
<td>$23.79</td>
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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.

MBA membership comes with these added benefits:
- Free will preparation services and power of attorney services (insured members)
- Free estate resolution service (insured members)
- Savings on auto and home coverage2
- Generous scholarship program
- American Military University tuition discounts
- American Military University

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

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.

For complete plan costs and details contact MBA at 1-877-MBA-1020.

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 readiness can be easier than you think.

Call 1 877-MBA-1020 promo code 459

Visit militarybenefit.org/459

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. Certain eligibility restrictions apply. For complete plan costs and details contact MBA at 1-877-MBA-1020.

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MetLife


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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. Certain eligibility restrictions apply. For complete plan costs and details contact MBA at 1-877-MBA-1020.
The price of auto insurance is a hot topic among those who are either figuring out or always keeping tabs on their spending. Auto insurance continues to get more and more expensive. The smart shopper may want to shop around to ensure that they’re getting the best rate for their situation, and so it is common to ask your friends, “How much are you paying for auto insurance?”

Unfortunately, the answer doesn’t really tell you anything because there are so many variables.

I’m not an auto insurance expert, so I reached out to Melanie Hart, an insurance expert at USAA, to help me better understand the subject.

One of the most important variables is how much insurance you’re buying. While insurance can vary a lot from state-to-state (and so can the costs) there are two main points to consider: which type of coverage you are carrying, and how much coverage you are carrying.

Not having the right coverage, or the right amount of coverage, can leave you unprotected in case of an accident or other loss. It is important that you have enough coverage.

**Types of Auto Insurance Coverage**

I hear a lot of people talk about having “full coverage” on their vehicles, so I asked an expert about it. From the insurance company’s perspective, full coverage means that your policy includes coverage for collision, liability, and comprehensive coverage.

Liability coverage can contain a couple of different parts, but generally covers the expenses of other people if you cause an accident. This might include property damage, including the vehicle, trees, houses, medical payments, legal bills, and any other kind of judgement made against you. Liability insurance is essential. Most states require it, and it protects your assets and income in case you cause an accident. Hart described liability insurance as a “chief cornerstone of personal financial security,” and I absolutely agree.

Collision coverage is for the damage to your vehicle as the result of a collision. Comprehensive coverage is for any damage to your vehicle due to causes other than a collision. This might include theft, vandalism, hail, water, fire, and animal strikes.

Collision and comprehensive coverage are probably required if your vehicle is financed, but those who own their cars in full may choose whether to carry collision and comprehensive coverage.

**Amount of Auto Insurance Coverage**

How much insurance do you need or want? This is a very individual question based upon a wide variety of factors, and the decision for liability coverage is different from the decision for comprehensive and collision coverage.

**Amount of Comprehensive and Collision Coverage**

Comprehensive and collision coverage are often lumped together, even though they cover different risks. If you have a loan on your vehicle, you are probably required to carry both comprehensive and collision coverage.

If your vehicle does not have a lien (loan) against it, then comprehensive and collision coverage are optional. Do you want it? That depends. Hart points out that it is important to consider the value of your vehicle versus the cost of coverage. The break-even point is going to be different for every situation, in part because your car’s cash value might not equal its value to you, and because coverage costs vary by location. You also have to consider the size of your deductible, your ability to withstand a loss, and your likelihood to make a claim.

**Amount of Liability Coverage**

Most states have required minimum liability amounts to provide some protection to others from damage caused by you. However, these state minimums are typically very low. If you are carrying only the state required insurance, you probably don’t have enough insurance.

For example, let’s look at California. The state minimum insurance required is 15/30/5. This means that your insurance will cover up to $15,000 for each person injured in an accident, up to a maximum of $30,000 for the entire accident, and $5,000 worth of coverage for property damage. Even a minor accident could be more than the amount your insurance covers. A major accident, including multiple vehicles and/or serious injuries, will definitely exceed those low coverage levels.

When you cause an accident, and the damages exceed your liability coverage, you become personally responsible for the rest of the money, whether it be for medical bills, vehicle replacement, or any award from a court. Without enough insurance, you will be using your savings, your assets, and potentially even your future earnings to pay that bill.

Everyone’s situation is different, but I’ll share my insurance details with you just so you can compare. My family carries $300,000/ $500,000/ $100,000 in liability coverage, plus more that I’ll explain below.

“A person should carry enough liability insurance to protect their current assets and their future earnings,” Hart said.

When deciding how much liability insurance to purchase, you have to consider your current assets plus your future earnings capacity, and how much risk you are willing to take. Liability insurance is relatively cheap; this is not a place to skimp.

**Umbrella Liability Insurance**

For those who are particularly concerned about their personal liability, you can purchase additional liability insurance that sits on top of your auto and homeowners or renters insurance. This insurance, called umbrella liability insurance, can provide a lot of coverage for a relatively small price.

Every person has different insurance needs, but it is important to understand how the coverage you select may result in higher out-of-pocket costs if you are involved in an accident or other loss. Many people mistakenly assume that the state minimums will provide them with appropriate coverage, and this is rarely true.

**Get Started Now**

It all starts with finding the right insurance company. To compare insurance quotes, discounts, and coverage, check out the auto insurance quote comparison tool at Military.com.
Health
AFSPA sponsors the Foreign Service Benefit Plan (FSBP), a Federal Employees Health Benefits Plan (FEHB)-branded travel health insurance, with network providers. FSBP offers high-option medical benefits at competitive premiums. Although many AFSPA members live within the U.S., our customer service staff are experienced with health care delivery and claims handling from foreign health plans. FSBP offers 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 tensions;
- Direct Billing Arrangements with over 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 four (4) Members of Household health insurance plans, covering domestic partners, parents, dependent children over 26, nannies, and any other persons 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 while residing anywhere in the world. Choose from five different plan options and customize your trip length and area of coverage.

GlobalMed USA 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 of their home country. Three (3) plan options are available: Economy, Choice, and Elite with varied levels of coverages and trip lengths.

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 those 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 multi-lingual 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 are rendered by dentists within the ACCESS network. No waiting periods; no copays for exams, cleanings, and x-rays. Annual max - $2,000/person. 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

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 Global Health Benefits disability plan pays enrollees 60% of their annual salary, up to $5,000/month (after a 30-day waiting period). 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. The plan can be used for medically necessary maternity (some restrictions apply).

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/travel.

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, co-insurance, 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/criticalillness for details.

A World of Choices

- **Personalized customer service**
- **Speak with a live person when you call**
- **Obtain enrollment/application forms online**

AFSPA, sponsor of the FOREIGN SERVICE BENEFIT PLAN, has provided insurance to Federal employees for over 90 years. AFSPA is proud to offer the following products:

- Health Insurance (FOREIGN SERVICE BENEFIT PLAN)
- Dental Insurance
- Life Insurance
- Critical Illness Insurance
- Travel Insurance
- Disability Income Protection
- Accidental Death & Dismemberment
- Members of Household Health Insurance
- Discount Care Programs

Membership is open all Federal Civilian employees of:

- DOD
- FCS
- USAID
- DHS
- DOS
- CIA
- FAS
- ODNI
Should You Buy Travel Insurance?

When do I need travel insurance?

A vacation travel break can be revitalizing and can open you up to new experiences. It can also be expensive—and just because you're off from work doesn’t mean the universe cooperates.

A whole variety of unforeseen circumstances can squash travel plans with little notice—which often means leaving you on the hook for financial and other losses.

Fortunately, the right insurance can help protect against these losses. Before you book your trip, check if the credit card you plan to use offers any travel insurance or assistance that might be useful to you, then consider the coverages below.

What kind of travel insurance do I need?

There are four major types of travel insurance and, generally, you can purchase packages that offer these with a combination of other travel coverage options.

Choose your travel insurance based on what makes sense for your trip and your own finances. If you’ve been saving for that $15,000 tour of Italy as your vacation of a lifetime, you may not want to take a chance that a family illness will cost you your deposit.

- Trip cancelation insurance – Reimburses you when certain circumstances prevent you from taking your trip—such as if your cruise line or tour operator goes out of business or if you have to cancel the trip due to sickness, a death in the family or another calamity listed in the policy. In addition, if you or an immediate family member becomes seriously ill or is injured during the trip most policies would reimburse you for the unused portion of the vacation.
  
  Don’t confuse trip cancelation insurance with the cancelation waiver that many cruise and tour operators offer. Compared to insurance, waivers might seem relatively inexpensive, and they do provide coverage if you have to cancel the trip. However, they include many restrictions. They generally must be purchased at the time the trip is booked, and they will usually not cover you immediately before departure (the time period during which most people cancel) or after the trip has begun. Most importantly, because waivers are not insurance, they are not regulated by state insurance departments. If your tour or cruise operator gets into financial difficulty, you may not be able to collect on the waiver.
  
- Baggage insurance or personal effects coverage – Provides coverage if your personal belongings are lost, stolen or damaged during the trip.
  
- Emergency medical assistance – Covers expenses related to medical crises, which can be very costly. Emergency medical assistance covers situations like: being airlifted off a mountain after a skiing or hiking accident; a prolonged period stay in a foreign hospital; or needing to be flown home due to a serious illness or injury.

Before purchasing this type of coverage, check with your own health insurance carrier to find out what type of coverage you have when traveling at home or abroad and what the limitations are.

Depending on where you’re traveling, consider getting enough insurance to cover a flight home or to a country with first-rate medical care.

- Accidental death provides coverage in the event you or a family member dies during a trip. Depending on your life insurance plan or other financial provisions for your loved ones, this may be duplicate insurance.

Are there other types of travel insurance I should consider?

There are many other types of travel insurance—you can even get coverage for lost travel loyalty plan points. Depending on your destination and circumstances, you may want to consider the available coverages for:

- Missed connection
- Travel delay
- Emergency evacuation
- 24-hour traveler assistance
- Collision/damage coverage for rented cars
Should I Pay for Insurance on My Rental Car?

Have you ever found yourself at a rental car agency wondering whether you should buy their additional coverage? What, you wonder, does my regular auto insurance cover?

Unfortunately, there are no easy answers that apply to everyone. Whether you're covered—and for what and how much—depends on what types of personal auto insurance you carry, what protection your credit card offers and where you're renting the car.

Before you rent, call your personal auto insurance provider and your credit card company so you know what terms apply to a rental vehicle. Don’t wait until you’re on the side of the road waiting for a tow truck or ambulance.

Generally, coverage from your primary auto insurance will extend to a rental vehicle. If you cause an accident while driving the rental, your liability insurance would pay up to your policy limits for the damages to other cars or property.

Likewise, collision coverage on your regular policy would pay for accident-related damages to the rental car you’re driving. Finally, your comprehensive coverage would take care of damages to the rental vehicle not related to a traffic accident, such as theft or vandalism.

Still, having collision and comprehensive coverage on your regular vehicle may not protect you from every charge the rental company could impose.

If you rent through USAA’s Alliance Services, which offers exclusive discounts on car rentals and other services, your policy will cover the damages previously mentioned. The rental car companies will waive fees for administrative, loss-of-use and loss-of-value fees you may face that aren’t covered by your insurance. Many credit cards come with rental car insurance as a benefit, which can supplement—or even serve in place of—your regular auto insurance policy.

For the coverage to apply, you usually must reserve and pay for the rental car using that card. Some cards offer primary coverage, which doesn’t require you to make a claim on your regular auto policy. Other cards offer secondary coverage, however. In that case, the coverage would only pay your deductible or other potential claim costs.

If you don’t book your car through USAA’s rental program, you would need to decline the car rental coverage offered by the rental company to be covered by the benefits provided by your USAA credit card. Your card would then offer secondary coverage to your auto policy.
Facts About Pet Insurance

Courtesy of Insurance Information Institute

Like any other member of your family, your pet is subject to illness or injury, and you're liable for any damage he or she does. Luckily, there are several different insurance products that will help protect you and your family from the financial cost of a pet emergency.

**Pet health insurance**

If you have a dog, cat, or other pet, you probably visit the veterinarian on a regular basis—and it can be expensive, especially when an illness or emergency necessitates tests or surgery.

Pet health insurance works in a similar manner to human health insurance policies, in that they both include annual premiums, deductibles, co-pays and caps.

Health insurance is available for all types of pets, including dogs, cats, rabbits, ferrets, exotic birds, reptiles, potbelly pigs and various rodents.

Cost of coverage is based typically on the animal's age, health profile and the level of care you choose. Generally, older animals cost more to cover, and some companies have age limits. Also, there may be exclusions for pre-existing conditions, and some insurers may not cover certain breeds that are prone to hereditary conditions (e.g. hip dysplasia).

There are three general levels of coverage:

1. **Basic coverage is the least expensive option.** Basic coverage provides the lowest reimbursements for procedures, and will help pay for accidental injuries, poisonings, and illnesses (including cancer). These policies typically include an annual deductible, caps on reimbursements per accident or illness, as well as caps on total reimbursements per policy term.

2. **Comprehensive coverage is costlier than basic coverage, but offers more generous benefits, such as reimbursements for accidental injuries, emergencies and illnesses, and coverage for office visits, prescriptions, diagnostic tests, X-rays, and lab fees. These policies feature lower annual deductibles than those for basic coverage, but also cap reimbursements per accident and illness, as well as total reimbursements for the policy term.**

3. **Pet well care protection reimburses for preventive care, including physical exams, flea and heartworm prevention and vaccinations. While there is no deductible for well care, there is a nominal deductible for other medical services.**

While shopping for pet insurance, you may come across veterinary discount plans, which are membership-based services rather than an insurance policy. With a veterinary discount plan, the member pays a monthly fee and then is entitled to reduced rates on pet services, medical procedures, prescriptions, and products from a specific group of veterinarians who also agree to participate in the plan.

Note that, in the event of a catastrophic and costly pet illness or injury, a discount may be useful, but you will likely still be out of pocket for much more than if your pet is insured. Also, unlike pet insurance, veterinary discount plans are not regulated by law.

**Life and theft insurance**

Life and theft coverage is designed to insure the lives of highly valuable animals, and is typically purchased by zoos or by the owners of championship cats, dogs, horses, and police dogs. The policy reimburses owners of stolen animals and pays a death benefit if an animal dies during transport or other covered events.

**General insurance protections**

Your current homeowners insurance policy may offer some protections that encompass pets. For example:

- **Liability** – If your dog bites someone and causes an injury, and you are sued, your homeowners or renters insurance policy provides liability protection to defend you in court.

Be aware that most policies will exclude any dog with a history of biting and aggressive behavior. In addition, many homeowner associations restrict some breeds that are typically thought to be dangerous—and a growing number of communities require owners of these dog breeds to carry additional liability coverage.

- **Personal property** – Some owners tend to spend a lot of money accessorizing their pets—and these items are covered under the personal property section of standard homeowners and renters policies. So, if Fido's favorite cashmere dog coat is stolen or damaged, you're covered!
Take us along for the journey.

Overseas insurance is an easy way to protect your car, motorcycle, and personal property when you temporarily move to a different country. With overseas insurance, you could get the same low rates and high-quality GEICO customer service that you get in the States.

Why else should you choose GEICO for overseas insurance?

- Knowledgeable agents familiar with local insurance requirements
- American style policies, written in English
- Convenient international offices
- Flexible payment plans
- Premiums that do not increase during the policy period, even if exchange rates change
- When you return to the United States, you may be eligible for a preferred rate with GEICO