

# **Group Comprehensive Accident Insurance Plan**

## 3 Accident Insurance Coverages in 1

## **Features**

## Acceptance is guaranteed.

For eligible Members and spouses who are not on active duty, who work full time (at least 20 hours per week) and are ages 18-59, there's no medical exam or health questions, only one short application form to complete.

## Accident Hospital Indemnity Benefit

\$100 per day for hospitalization up to 500 days, plus (for a visit that does not require hospitalization) a \$50 Outpatient Emergency Accident benefit payable once per calendar year.

No waiting period. Coverage begins the first day you are confined in a hospital, skilled nursing facility or residential treatment facility. This benefit is payable for injuries sustained from covered accidents that are independent from each other if the insured is hospitalized or sent to a nursing or treatment facility. The hospital benefit for injuries sustained from the same accident may be payable subject to coverage limitations.

## Accident Disability Income Benefit

\$1,000 per month up to 12 months, after a 30-day waiting period. Benefit payable if you are totally disabled and unable to perform the activities of your occupation as a result of the covered accident.

#### Accidental Death Benefit

\$100,000 for a covered accidental death if death occurs within 365 days of the original accident which caused the fatal injury.

## It's easy to apply!

Just apply online or complete the short application form, including a date, signature and payment. You'll then receive your Certificate in the mail and have a full 30 days to review it carefully.

#### 30-day free look

Once you receive your Certificate of Insurance. If you are not completely satisfied with the provisions of your Certificate, you can request a full refund, without claim, within the first 30 days—no questions asked.

## Other Plan Provisions

#### Premium

The USBA Group Comprehensive Accident Insurance Plan premium is \$34.00 per month. You can choose to pay quarterly, semi-annually or annually via Direct Bill or USBA *EZ* Pay. The rate is current as of 2022.

The rate may be changed by New York Life Insurance Company on any premium due date and any date on which benefits are changed. However, your rate may change only if they are changed for an entire class of insureds.

#### Individual Certificate

Each insured Member/Associate Member will receive a Certificate of Insurance summarizing the policy provisions under Group Policy G-31080-0 (Policy Form GMR). Once you receive your Certificate in the mail you will have a full 30 days to review it carefully. If you decide this coverage is not for you, simply return the Certificate without claim for a full refund.

## Beneficiary

You'll be prompted to name a beneficiary for your accidental death benefit. You can change your beneficiary at any time.

## Effective Date of Coverage

Once the enrollment form is received, coverage is effective on the date the first month's premium is received. If you or your covered spouse is confined at home or a hospital on the date coverage would have been in effect, the insurance will be effective on the day the covered person is no longer confined and is still otherwise eligible.

## When Coverage Ends

Coverage ends the earlier of when you turn age 65, when you are no longer a Member, no longer working full time, premium is not paid when due, when you enter the Armed Forces, when you request that coverage be terminated, or when the group policy is terminated. See your Certificate of Insurance for details.

## Injury Coverage

A bodily injury sustained as a result of an accident and independent of all other causes and occurs after the effective date of coverage.

#### **Exclusions**

This policy will not cover any loss resulting from an injury or disability resulting from an injury that began or first manifested itself before the effective date of coverage, disease or losses resulting from self-inflicted injury or suicide, war conditions, military service, drugs or injury sustained while legally intoxicated from use of alcohol. See your Certificate for more information.

## Special Notice

This is an accident only insurance policy. It does not provide coverage for sickness. This is a supplement to health insurance and is not a substitute for major medical coverage. Lack of major medical coverage (or other minimum essential coverage) may result in additional payment with your taxes.

This is only a brief summary of benefits and is subject to the terms, conditions, exclusions, and limitations of group policy number G-31080-0. Coverage may vary and may not be available in all states. Complete terms and conditions are found in the group master policy and are summarized in your Certificate.



## The Group Insurance Policyholder

USBA is a not-for-profit association that provides a family of life insurance and other products and services to military personnel, Federal employees, National Guard and Reserve members, Veterans and their families with the highest ethical standards of conduct and service.

## How to contact USBA

Let us help you find an answer to your question. Please call or email a USBA Product Specialist. If it's outside our hours of business, we will get back with you the next business day.

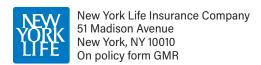
- Phone: 877-297-9235 Monday through Friday, 9:00 a.m. to 4:00 p.m. Central time
- Email: webmaster@usba.com
- Social Media: (click to follow)











## The Company Behind the Policy

All USBA Group life insurance policies are underwritten by New York Life Insurance Company, 51 Madison Avenue, New York, NY 10010 on Policy Form GMR. New York Life has received the highest financial strength ratings currently awarded to any U.S. life insurer by Standard & Poor's (AA+); A.M. Best (A++); Moody's (Aaa); and Fitch (AAA). Source: Individual Third-Party Ratings Reports as of 10/18/22.

This information is only a brief description of the principal provisions and features of the Policy. The complete terms and conditions are set forth in the Group Policy G-31080-0 (Policy Form GMR) issued by New York Life Insurance Company to the Uniformed Services Benefit Association. When you become insured, you will be sent a Certificate of Insurance summarizing your benefits under the Policy.

## **Arkansas Residents**

Arkansas Agent Insurance License Number is 347836.

#### California Residents

California Agent Insurance License Number is 0G58528.

#### **Puerto Rico Residents**

Please send your application and premium payment directly to:

Global Insurance Agency, Inc.

P.O. Box 9023918

San Juan, PR 00902-3918

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