

Member FAQ

Q. Do I automatically receive the \$2,000 no-cost basic insurance?

A. No. You must complete and return the enrollment form.

Q. Do I have to buy additional coverage in order to get the \$2,000 basic?

A. No. The \$2,000 AD&D insurance coverage is provided as our gift to you, at no cost, as long as you maintain your account with us.

Q. Does this cover on-the-job accidents?

A. Yes. The coverage is effective 24 hours a day, worldwide.

Q. How much additional coverage may I choose?

Can I get insurance for my spouse and family, too?

A. AD&D insurance has coverage levels to fit your budget, from \$10,000 to \$300,000. Spouses and unmarried children under the age of 21 years (age 25 if full-time students) may be insured under the family plan. If the family plan is selected, spouses are insured for 50%. Dependent children are each insured for 20%. If your household does not have any dependent children, the spouse's coverage rises to 60% of the additional coverage selected. If you do not have a spouse, dependent children's coverage rises to 25%.

Q. Do I have to take a medical exam or answer a lot of health questions?

A. No. There are no medical questions or physical exams required to qualify.

Q. I bought additional coverage, and I received something called "added benefits." What does this mean?

A. You automatically receive six added benefits that are included with your insurance.

(1) Common Carrier Accidental Death: Pays twice the face value of your additional coverage.

(2) Educational Assistance: Pays a benefit to each dependent child who is enrolled as a full-time student in an institution of higher learning.

(3) Anti-Inflation: After two years of continuous coverage, benefit increases a specific percentage until it reaches 125% of the original amount.

(4) Hospital Income Benefit: Pays 1% of the Voluntary Insurance benefit up to \$2,500 a month for hospital stay for more than 7 days (starting within 30 days of accident as the result of a covered Injury.)

(5) Day Care Benefit: Pays 2% of the Voluntary Insurance benefit or \$2,000 (whichever is less) each year for two years, for each Eligible Dependent (under age 14 at the time of your death) who is enrolled in a Day Care Program. Your Insurance Coverage Document will explain all of the specifics of these added benefits (including exclusions, limitations and terms of coverage).

(6) Adaptive Home and Vehicle: Pays a benefit if a covered insured requires their home and/or car to be adapted due to a covered loss up to \$2,500. Your Insurance Coverage Document will explain all of the specifics of these added benefits (including exclusions, limitations and terms of coverage).

Q. Is there an age cutoff?

A. There is no termination age; however, coverage reduces 50% at age 70 and older.

Q. When does my coverage begin?

A. The effective date is shown on your Insurance Coverage Document.

Q. What does "common carrier" mean?

A. The common carrier benefit applies when you pay a fare to travel on common or public forms of transportation. This includes commercial airlines, trains, buses, cabs, ferries, and more.

Q. How long does it take before I receive my insurance coverage document?

A. It takes about 30 days from the time the enrollment form is received to process and issue the Insurance Coverage Document.

Q. What if I decide to cancel?

A. Your coverage features a no-risk 30-day guarantee. If you choose not to keep your insurance, simply call toll free 1-877-309-6576, and your insurance will be cancelled immediately.

Q. How will I be billed?

A. **1)** Because you are a share account holder, the premiums will be automatically debited from your account quarterly. This transaction will be reflected on your statement.
2) Because you are a share draft account holder member, the premiums will be automatically debited from your account quarterly. This transaction will be reflected on your statement.

Q. How do I file a claim?

A. Call toll free at 1-877-309-6576 weekdays, 7:00 a.m. to 8:00 p.m., Saturdays, 8:30 a.m. to 5:00 p.m., CST.

Q. How long will it take to process my claim?

A. The claims are processed within five days of the Plan Administrator receiving the appropriate information and documentation in their offices in Nashville, TN. Once processed, the claim is then forwarded to the underwriter for determination of benefits.

Q. Who is the plan administrator?

A. The Plan Administrator is Affinion Benefits Group, a division of Affinion Group, the nation's largest provider of direct response insurance programs.

What happens if your member asks a question, and you are unsure of the answer?

Call! Trained representatives are available to assist both employees and members.

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