



GROUP TERM LIFE INSURANCE



UNDERWRITTEN BY
New York Life
Insurance Company

Frequently Asked Questions

WHO IS ELIGIBLE?

Group Term Life Insurance is one of the most fundamental types of life insurance. It provides straightforward, affordable protection for a fixed period of time. Term insurance may be an ideal choice for individuals with a temporary need for life insurance protection during their working years.

WHO IS ELIGIBLE?

Any active member of the National Society of Professional Engineers (NSPE) actively at work on a full-time basis at least 30 hours a week, is under the age of 60, and resides in an eligible state of the U.S.

Ineligible states include: DE, FL, LA, ME, MS, MT, NC, OH, OR, SD, TX, VT, WA, WV

CAN I INCLUDE MY SPOUSE, CHILDREN, AND EMPLOYEES?

Yes, your spouse may apply if he/she is under age 60, resides in the U.S., and is not legally separated or divorced from you—provided that you are currently insured. Your unmarried dependent children through 18 (to 25 if full-time student) are also eligible for coverage—provided that you are currently insured or request coverage as well. Employees of members are also eligible to apply for up to \$250,000 as long as the employee is actively at work on a full-time basis at least 30 hours a week, is under age 60, and resides in the U.S.

HOW MUCH COVERAGE CAN I GET?

You are eligible to select any benefit amount from \$25,000 to \$500,000*. The same benefits are available to your spouse, provided that the amount does not exceed 50% of yours. Each dependent child may be insured for \$5,000 from six months of age to age 19 (25 if a full-time student).

The aggregate coverage amount for all life plans cannot exceed \$1,500,000 for the member and \$750,000 for the spouse.

*The amount of insurance applicable to each covered person will be reduced by 50% at age 65 with an appropriate reduction in premium.



For more than 50% of U.S. consumers, it would take only a year to feel the financial impact of losing a primary wage earner.

"Insure Your Love." LIMRA. Web. 14 January 2016.

WHEN DO VOLUME DISCOUNTS APPLY?

Volume discounts are valid when you choose an individual coverage amount of \$100,000 or greater.

WHAT IF I DECIDE THIS COVERAGE ISN'T RIGHT FOR ME?

If, after reviewing your Certificate of Insurance, you're not completely satisfied with the terms of this plan, simply return it, without claim, within 30 days. Your coverage will be cancelled and you will receive a full refund, minus any claims paid—no questions asked!



GROUP TERM LIFE INSURANCE

Coverage Details

NON-TOBACCO USER RATES

You may qualify for the non-tobacco user (or select premium) rates provided you have not used any tobacco products during the last 12 months.

Tobacco user means a covered person who has smoked cigarettes, cigars, or used a pipe or chewing tobacco, nicotine chewing gum, or snuff during the 12 months prior to the date application for coverage was made.

ACCELERATED DEATH BENEFIT RIDER

Included with this term life plan is an accelerated death benefit feature that can ease the burden for the terminally ill and their families. With this feature, an insured person can request a portion of their life insurance benefit be paid when they are diagnosed as terminally ill and prior to death.

Benefits may be requested if an insured is diagnosed as terminally ill with a life expectancy of six months or less and they are insured for at least \$100,000. The benefit payable will be up to 50% of the insured's life insurance amount, subject to a minimum of \$25,000 and a maximum of \$250,000.

The balance of the insured's life insurance amount will be paid to their beneficiary upon their death. Any benefits received under this feature may be taxable. The insured should consult a personal tax advisor for further information.*

WAIVER OF PREMIUM

If you become totally disabled while insured under this term life plan before your 60th birthday and remain so for at least nine consecutive months, premiums due thereafter for you and your family will be waived during the continuance of such total disability or until coverage would otherwise terminate.

Periodic proof of total disability will be required.

TERMINATION

You may continue your coverage until the date the master policy is cancelled, the premium due date on or next following the date you cease to be an active member of the NSPE; attain the policy age limit shown in the schedule; or fail to pay any required premium on the premium due date, subject to the grace period.

Coverage for your dependents stops when yours does if the premium is not paid when due or if the master policy is terminated. Eligible dependents can continue their coverage after the member's death.

Dependent spouse coverage also stops upon divorce or legal separation, and dependent child coverage terminates when the child marries, is no longer a dependent, or reaches age 19 (25 if a full-time student).

All coverage terminates at age 70.

EXCLUSIONS

Benefits are not paid for suicide in the first two years (we will refund the entire premium paid to date if suicide is committed during the first two years). The two-year suicide exclusion will also apply if a covered person commits suicide during the two years immediately following an increase in coverage under the policy. In that event, the amount of insurance payable will equal the amount of insurance in force prior to the increase plus an amount equal to the premium paid for the increase to the date of death.

*This information is written in connection with the promotion or marketing of the matter(s) addressed in this material. The information cannot be used or relied upon for the purpose of avoiding IRS penalties. These materials are not intended to provide tax, accounting, or legal advice. As with all matters of a tax or legal nature, you should consult your own tax or legal counsel for advice.



Coverage Details Continued

WHEN COVERAGE BECOMES EFFECTIVE FOR MEMBERS AND SPOUSES

Coverage becomes effective on the 1st of the month following the date the application is approved by New York Life and the initial premium deposit is paid within 31 days.

Acceptance into this plan is subject to medical evidence of insurability as determined by New York Life. Depending on your age, the amount of coverage you request, and your answers on the application, a medical examination, medical test(s), or other evidence of good health may be required. Any exams/tests requested by the company will be conducted at your convenience and at no expense to you.

WHEN COVERAGE BECOMES EFFECTIVE FOR EMPLOYEES

Coverage becomes effective on the 1st of the month following the date the application is approved by New York Life, provided the initial premium deposit is paid within 31 days. Actively at work means you are performing all the regular duties of your occupation on a full-time basis (at least 30 hours per week) at your customary place of employment.

DISCLAIMER

This brochure explains the general purpose of the insurance described, but in no way changes or affects the policy as issued. All benefits are subject to the terms and conditions of the policy. Policies underwritten by New York Life detail exclusions, limitations, reduction of benefits, and terms under which the policies may be continued in full or discontinued. Complete details are in the Certificate of Insurance issued to the insured.



80% of consumers misjudge the cost of Term life insurance.

"2015 Insurance Barometer Study Finds Americans Continue to Overestimate Cost of Life Insurance." LIMRA. Web. 14 January 2016.



GROUP TERM LIFE INSURANCE

Current 2017 Quarterly Rates – Base Coverage

MEMBER (Non-tobacco User)									
Amount	Age								
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*
\$25,000	\$5.35	\$6.25	\$8.98	\$13.07	\$21.59	\$35.51	\$61.08	\$118.75	\$183.24
\$50,000	\$10.70	\$12.50	\$17.96	\$26.14	\$43.18	\$71.02	\$122.16	\$237.50	\$366.48
\$75,000	\$16.05	\$18.75	\$26.94	\$39.21	\$64.77	\$106.53	\$183.24	\$356.25	\$549.72
\$100,000	\$10.92	\$12.72	\$21.80	\$39.08	\$68.20	\$129.32	\$232.72	\$460.20	\$718.20
\$125,000	\$13.65	\$15.90	\$27.25	\$48.85	\$85.25	\$161.65	\$290.90	\$575.25	\$897.75
\$150,000	\$16.39	\$19.08	\$32.70	\$58.62	\$102.30	\$193.98	\$349.08	\$690.30	\$1077.30
\$175,000	\$19.11	\$22.26	\$38.15	\$68.39	\$119.36	\$226.31	\$805.35	\$802.32	\$1256.85
\$200,000	\$21.84	\$25.44	\$43.60	\$78.16	\$136.40	\$258.64	\$465.44	\$920.40	\$1436.40
\$250,000	\$27.30	\$31.80	\$54.50	\$97.70	\$170.50	\$323.30	\$581.80	\$1150.50	\$1795.50
\$300,000	\$32.76	\$38.16	\$65.40	\$117.24	\$204.60	\$387.96	\$698.16	\$1380.60	\$2154.60
\$350,000	\$38.22	\$44.52	\$76.30	\$136.78	\$238.70	\$452.62	\$814.52	\$1610.70	\$2513.70
\$400,000	\$43.68	\$50.88	\$87.20	\$156.32	\$272.80	\$517.28	\$930.88	\$1840.80	\$2872.80
\$450,000	\$49.14	\$57.24	\$98.10	\$175.86	\$306.90	\$581.94	\$1047.24	\$2070.90	\$3231.90
\$500,000	\$54.60	\$63.60	\$109.00	\$195.40	\$341.00	\$646.60	\$1163.60	\$2301.00	\$3591.00

Rates for children: \$6.00 quarterly, regardless of how many are covered.

Rates for employees: Same as member, employee may only request coverage up to \$250,000.

*For renewal only. Rates and/or benefits may be changed on a class basis. Rates are based on the attained age of the insured and increase as the insured enters each new age category.

The Amount of Insurance will reduce by 50% when an insured member or insured spouse reaches age 65.



Protecting Your Priorities and Principles

GROUP TERM LIFE INSURANCE

Current 2017 Quarterly Rates – Base Coverage

MEMBER (Tobacco User)									
Amount	Age								
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*
\$25,000	\$6.48	\$7.45	\$10.28	\$15.80	\$25.49	\$43.13	\$71.59	\$135.91	\$202.67
\$50,000	\$12.96	\$14.90	\$20.56	\$31.60	\$50.90	\$86.26	\$143.18	\$271.82	\$405.34
\$75,000	\$19.44	\$22.35	\$30.85	\$47.40	\$76.35	\$129.39	\$214.77	\$407.73	\$608.01
\$100,000	\$21.40	\$25.00	\$35.92	\$52.28	\$86.36	\$142.04	\$244.32	\$475.00	\$732.96
\$125,000	\$26.75	\$31.25	\$44.90	\$65.35	\$107.95	\$177.55	\$305.40	\$593.75	\$916.20
\$150,000	\$32.10	\$37.50	\$53.88	\$78.42	\$129.54	\$213.06	\$366.48	\$712.50	\$1099.44
\$175,000	\$37.45	\$43.75	\$62.86	\$91.49	\$151.13	\$248.57	\$427.56	\$831.25	\$1282.68
\$200,000	\$42.80	\$50.00	\$71.84	\$104.56	\$172.72	\$284.08	\$488.64	\$950.00	\$1465.92
\$250,000	\$53.50	\$62.50	\$89.80	\$130.70	\$215.90	\$355.10	\$610.80	\$1187.50	\$1832.40
\$300,000	\$64.20	\$75.00	\$107.76	\$156.84	\$259.08	\$426.12	\$732.96	\$1425.00	\$2198.88
\$350,000	\$74.90	\$87.50	\$125.72	\$182.98	\$302.26	\$497.14	\$855.12	\$1662.50	\$2565.36
\$400,000	\$85.60	\$100.00	\$143.68	\$209.12	\$345.44	\$568.16	\$977.28	\$1900.00	\$2931.84
\$450,000	\$96.30	\$112.50	\$161.64	\$235.26	\$388.62	\$639.18	\$1099.44	\$2137.50	\$3298.32
\$500,000	\$107.00	\$125.00	\$179.60	\$261.40	\$431.80	\$710.20	\$1221.60	\$2375.00	\$3664.80

Rates for children: \$6.00 quarterly, regardless of how many are covered.

Rates for employees: Same as member, employee may only request coverage up to \$250,000.

*For renewal only. Rates and/or benefits may be changed on a class basis. Rates are based on the attained age of the insured and increase as the insured enters each new age category.



Protecting Your Priorities and Principles

GROUP TERM LIFE INSURANCE

Current 2017 Quarterly Rates – Base Coverage

SPOUSE/DOMESTIC PARTNER									
Amount	Age								
	< 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69*
\$25,000	\$3.41	\$3.98	\$5.68	\$7.95	\$12.50	\$21.59	\$39.21	\$60.23	\$90.91
\$50,000	\$6.82	\$7.96	\$11.36	\$15.90	\$25.00	\$43.18	\$78.42	\$120.46	\$181.82
\$75,000	\$10.23	\$11.94	\$17.04	\$23.85	\$37.50	\$64.77	\$117.63	\$180.69	\$272.73
\$100,000	\$13.64	\$15.92	\$22.72	\$31.80	\$50.00	\$86.36	\$156.84	\$240.91	\$363.64
\$125,000	\$17.05	\$19.90	\$28.40	\$39.75	\$62.50	\$107.95	\$196.05	\$301.15	\$454.55
\$150,000	\$20.46	\$23.88	\$34.08	\$47.70	\$75.00	\$129.54	\$235.26	\$361.38	\$545.46
\$175,000	\$23.87	\$27.86	\$39.76	\$55.65	\$87.50	\$151.13	\$274.47	\$421.61	\$636.37
\$200,000	\$27.28	\$31.84	\$45.44	\$63.60	\$100.00	\$172.72	\$313.68	\$481.84	\$727.28
\$250,000	\$34.10	\$39.80	\$56.80	\$79.50	\$125.00	\$215.90	\$392.10	\$602.30	\$909.10
\$300,000	\$40.91	\$47.76	\$68.16	\$95.40	\$150.00	\$259.08	\$470.52	\$722.76	\$1090.92
\$350,000	\$47.74	\$55.72	\$79.52	\$111.30	\$175.00	\$302.26	\$548.94	\$843.22	\$1272.74
\$400,000	\$54.56	\$63.68	\$90.88	\$127.20	\$200.00	\$345.44	\$627.36	\$963.68	\$1454.56
\$450,000	\$61.38	\$71.64	\$102.24	\$143.10	\$225.00	\$388.62	\$705.78	\$1084.14	\$1636.38
\$500,000	\$68.20	\$79.60	\$113.60	\$159.00	\$250.00	\$431.80	\$784.20	\$1204.60	\$1818.20

Rates for children: \$6.00 quarterly, regardless of how many are covered.

*For renewal only. Rates and/or benefits may be changed on a class basis. Rates are based on the attained age of the insured and increase as the insured enters each new age category.

IMPORTANT INFORMATION:

The premium contributions shown reflect the current rates and benefit structure (as of Jan. 1, 2017). Premium contributions may be changed by New York Life on any premium due date, but not more than once in any twelve-month period, and on any date on which benefits are changed. Benefit option amounts are subject to change by agreement between New York Life and the Board of Trustees.

The Annual Rate is the Semiannual Rate shown times a factor of 1.985.

Premiums increase on the premium due date coinciding with, or next following, the date that a member enters a new age bracket.

The discounted rate will continue after the amount of insurance reduces at age 65.



Protecting Your Priorities and Principles

GROUP TERM LIFE INSURANCE

Important Notice: How New York Life Obtains Information and Underwrites Your Request for Group Term Life Insurance

In this notice, references to “you” and “your” include any person proposed for insurance. Information regarding insurability will be treated as confidential. In considering whether the person(s) in your request for insurance qualify for insurance, we will rely on the medical information you provide, and on the information you authorize us to obtain from your physician, other medical practitioners and facilities, other insurance companies to which you have applied for insurance and MIB, Inc. (“MIB”). MIB is a not-for-profit organization of insurance companies, which operates an information exchange on behalf of its members. If you apply for life or health insurance coverage, a claim for benefits is submitted to an MIB member company, medical, or non-medical information may be given to MIB, and such information may then be furnished by MIB, upon request, to a member company.

Your authorization may be used for a period of 24 months from the date you signed the application for insurance, unless sooner revoked. The authorization may be revoked at any time by notifying New York Life in writing at the address provided. Your revocation will not be effective to the extent New York Life or any other person already has disclosed or collected information or taken other action in reliance on it, or to the extent that New York Life has a legal right to contest a claim under an insurance certificate or the certificate itself. The information New York Life obtains through your authorization may become subject to further disclosure. For example, New York Life may be required to provide it to insurance, regulatory or other government agencies. In this case, the information may no longer be protected by the rules governing your authorization.

MIB and other insurance companies may also furnish New York Life, its subsidiaries, or the Plan Administrator with non-medical information (such as driving records, past convictions, hazardous sport or aviation activity, use of alcohol or drugs, and other applications for insurance). The information provided may include information that may predate the time frame stated on the medical questions section, if any, on this application. This information may be used during the underwriting and claims processes, where permitted by law.

New York Life may release this information to the Plan Administrator, other insurance companies to which you may apply for life and health insurance, or to which a claim for benefits may be submitted and to others whom you authorize in writing, however, this will not be done in connection with test results concerning Acquired Immune Deficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV). We may also make a brief report of your protected health information to MIB, but we will not disclose our underwriting decision. New York Life will not disclose such information to anyone except those you authorize or where required or permitted by law. Information in our files may be seen by New York Life and Plan Administrator employees, but only on a “need to know” basis in considering your request. Upon receipt of all requested information, we will make a determination as to whether your request for insurance can be approved.

If we cannot provide the coverage you requested, we will tell you why. If you feel our information is inaccurate, you will be given a chance to correct or complete the information in our files. Upon written request to New York Life or MIB, you will be provided with non-medical information. Generally, medical information will be given either directly to the proposed insured or to a medical professional designated by the proposed insured. Your request is handled in accordance with the Federal Fair Credit Reporting Act procedures. If you question the accuracy of the information provided by MIB, you may contact MIB and seek a correction. MIB’s information office is: MIB, Inc., 50 Braintree Hill Park, Suite 400, Braintree, MA 02184- 8734, telephone 866-692-6901 (TTY 866-346-3642). For Canadian residents, the address is: MIB Information Office, 330 University Avenue, Suite 501, Toronto, Ontario, Canada M5G 1R7, telephone 416-597-0590. Information for consumers about MIB may be obtained on its website at www.mib.com.

For NM Residents: PROTECTED PERSONS¹ have a right of access to certain CONFIDENTIAL ABUSE INFORMATION² we maintain in our files, and they may choose to receive such information directly. You have the right to register as a protected person by sending a signed request to the Administrator at the address listed on the application. Please include your full name, date of birth, and address.

¹ PROTECTED PERSON means a victim of domestic abuse: who has notified us that he/she is or has been a victim of domestic abuse; and who is an insured person or prospective insured person.

² CONFIDENTIAL ABUSE INFORMATION means information about: acts of domestic abuse or abuse status; the work or home address or telephone number of a victim of domestic abuse; or the status of an applicant or insured as family member, employer, or associate of a victim of domestic abuse or a person with whom an applicant or insured is known to have a direct, close, personal, family, or abuse-related relationship.

Pearl Insurance is the Plan Administrator and insurance broker that administers the insurance plan on behalf of the New York Life Insurance Company for the benefit of the Group Policyholder. Pearl is compensated for the placement of insurance and for the services it provides to customers on behalf of the insurance company, in addition to other compensation it may receive. Compensation is paid to or retained by the Group Policyholder directly or indirectly for services associated with this insurance program.

The NSPE Group Term Life Insurance Plan is underwritten by the New York Life Insurance Company, 51 Madison Avenue, New York, NY 10010 under Group Policy No. G-30224-0. New York Life Insurance Company, a leading insurance company, is rated A++ by A.M. Best for financial strength (12/12).

NSPE incurs certain administrative expenses in connection with this sponsored program. To provide and maintain this valuable membership benefit, it is reimbursed for such expenses.

This brochure is intended to describe only principle features of the NSPE Group Term Life Insurance Plan and is not a contract.

New York Life Insurance Company

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For more information, or to apply for coverage:

Call the NSPE Plan Administrator at 844.282.2442, or visit nspeinsurance.com. For complete details on this plan, including features, costs, eligibility, renewability, limitations, and exclusions, see the Certificate of Insurance.

Sponsored by:



Underwritten by:



51 Madison Avenue,
New York, NY 10010

Under policy form GMR/G-30224-0/FACE.
New York Life Insurance Company is rated A++ by A.M.
Best for financial strength (6/9/16)

Brokered & Administered by:



PEARL INSURANCE®

1200 E. Glen Ave.
Peoria Heights, IL 61616
pearlinsurance.com

Pearl Insurance solicits insurance on behalf of New York Life and receives compensation, which may vary depending on certain factors, based on the sale of insurance. For additional compensation information, please call Pearl Insurance at 800.438.2366.
License: California Insurance License# 0F76076, AR# 1322, ID #110002

Form SRP-1153 A (HL) (1528)
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