

# AAFP Group 10 and 20 Year Level Term Life Insurance









As life changes, it's important your life insurance changes with it. As an AAFP member you are eligible to apply for exclusive AAFP Level Term Life Insurance. Choose a benefit amount from \$100,000 up to \$3 million, in any increment of \$10,000.

### Your Rates — Locked-In for up to 20 Years

Your rate is guaranteed not to increase for the entire length of your term. That's 10 or 20 years.

### Who May Apply?

This insurance is exclusively for AAFP members and their eligible family members. All must be under age 70 for 10 Year Level Term Life Insurance and under age 55 for 20 Year Level Term Life Insurance. Unmarried dependent children ages 14 through 24 are also eligible under coverage. All must live in the United States (excluding territories). Not available to the general public.\*

### **Family Coverage Available**

Your spouse can apply for as much coverage as you have or less.<sup>1</sup> All your dependent, unmarried children can be covered on one policy.

### **Not a Single Exclusion**

This group policy will pay benefits for death from any cause. The validity of any amount of insurance that has been in force for two years or more will not be contested except for insurance eligibility provisions or non-payment of premium contributions.

### **Portable Protection**

Unlike insurance an employer provides, you won't lose this protection if you change jobs. Your right to renew won't be jeopardized even if you switch employers or discontinue your AAFP membership.

### **Living Benefit**

You can access half your benefit amount if

diagnosed with a terminal illness and given a life expectancy of 24 months or less.<sup>2</sup> This money can be used in any way you see fit!

### No Risk. No Obligation.

If you decide this coverage is not for you, you may return your certificate without claim, within 30 days, receive a full refund and any money paid.

### **When Coverage Takes Effect**

Once your application is received, we'll contact you about next steps. Your insurance will become effective on the first day of the month following approval by New York Life, provided premiums are received within 31 days of being billed, provide medical evidence of insurability if required, and you are performing normal activities of a person in good health of like age3 on the date of approval (NC Residents: a person of like age).

### When Coverage Ends

Coverage will end when you or your insured spouse reaches age 75, if you are insured during a 10 or 20 year period during this time, coverage ends once such period ends (age 25 for children) or earlier if: (a) the premiums are not paid when due, (b) the group insurance is terminated or modified by the policyholder to end insurance for the group of insureds to which the member belongs, or (c) you request to terminate insurance. In addition, dependent coverage will terminate when your dependent spouse or child ceases to be an eligible dependent.

### For Answers to Questions or Help Applying

Call (866) 537-1039

An AAFP Insurance Specialist will be happy to assess your needs and recommend solutions without obligation.

### 2023 Current AAFP Semi-Annual Super Preferred Rates\*

Age	Female			Male		
	\$750,000	\$1,500,000	\$3,000,000	\$750,000	\$1,500,000	\$3,000,000
20-26	\$90.00	\$157.50	\$315.00	\$135.00	\$232.50	\$465.00
27	\$93.75	\$165.00	\$330.00	\$135.00	\$232.50	\$465.00
28	\$93.75	\$165.00	\$330.00	\$135.00	\$232.50	\$465.00
29	\$97.50	\$172.50	\$345.00	\$135.00	\$232.50	\$465.00
30	\$97.50	\$172.50	\$345.00	\$135.00	\$232.50	\$465.00
31	\$101.25	\$172.50	\$345.00	\$135.00	\$232.50	\$465.00
32	\$105.00	\$180.00	\$360.00	\$135.00	\$232.50	\$465.00
33	\$105.00	\$180.00	\$360.00	\$138.75	\$240.00	\$480.00
34	\$108.75	\$187.50	\$375.00	\$138.75	\$240.00	\$480.00
35	\$112.50	\$195.00	\$390.00	\$138.75	\$240.00	\$480.00
36	\$120.00	\$202.50	\$405.00	\$146.25	\$255.00	\$510.00
37	\$123.75	\$217.50	\$435.00	\$150.00	\$255.00	\$510.00
38	\$135.00	\$232.50	\$465.00	\$153.75	\$270.00	\$540.00
39	\$142.50	\$247.50	\$495.00	\$157.50	\$277.50	\$555.00
40	\$150.00	\$255.00	\$510.00	\$165.00	\$285.00	\$570.00
41	\$161.25	\$277.50	\$555.00	\$183.75	\$315.00	\$630.00
42	\$176.25	\$307.50	\$615.00	\$198.75	\$345.00	\$690.00
43	\$191.25	\$330.00	\$660.00	\$213.75	\$367.50	\$735.00
44	\$206.25	\$360.00	\$720.00	\$228.75	\$397.50	\$795.00
45	\$221.25	\$382.50	\$765.00	\$247.50	\$427.50	\$855.00
46	\$240.00	\$412.50	\$825.00	\$273.75	\$472.50	\$945.00
47	\$258.75	\$450.00	\$900.00	\$300.00	\$517.50	\$1,035.00
48	\$285.00	\$495.00	\$990.00	\$330.00	\$570.00	\$1,140.00
49	\$303.75	\$525.00	\$1,050.00	\$356.25	\$622.50	\$1,245.00
50	\$322.50	\$562.50	\$1,125.00	\$386.25	\$667.50	\$1,335.00
51	\$356.25	\$615.00	\$1,230.00	\$435.00	\$757.50	\$1,515.00
52	\$386.25	\$667.50	\$1,335.00	\$487.50	\$840.00	\$1,680.00
53	\$412.50	\$712.50	\$1,425.00	\$536.25	\$930.00	\$1,860.00
54	\$442.50	\$765.00	\$1,530.00	\$588.75	\$1,020.00	\$2,040.00
55	\$472.50	\$817.50	\$1,635.00	\$637.50	\$1,102.50	\$2,205.00
56	\$521.25	\$900.00	\$1,800.00	\$708.75	\$1,230.00	\$2,460.00
57	\$566.25	\$982.50	\$1,965.00	\$783.75	\$1,357.50	\$2,715.00
58	\$618.75	\$1,072.50	\$2,145.00	\$855.00	\$1,477.50	\$2,955.00
59	\$663.75	\$1,155.00	\$2,310.00	\$930.00	\$1,612.50	\$3,225.00
60	\$712.50	\$1,237.50	\$2,475.00	\$997.50	\$1,732.50	\$3,465.00
61	\$761.25	\$1,320.00	\$2,640.00	\$1,068.75	\$1,852.50	\$3,705.00
62	\$806.25	\$1,395.00	\$2,790.00	\$1,143.75	\$1,980.00	\$3,960.00
63	\$858.75	\$1,485.00	\$2,970.00	\$1,215.00	\$2,107.50	\$4,215.00
64	\$903.75	\$1,567.50	\$3,135.00	\$1,290.00	\$2,235.00	\$4,470.00
65	\$982.50	\$1,702.50	\$3,405.00	\$1,432.50	\$2,482.50	\$4,965.00
66	\$1,053.75	\$1,822.50	\$3,645.00	\$1,545.00	\$2,677.50	\$5,355.00
67	\$1,136.25	\$1,972.50	\$3,945.00	\$1,676.25	\$2,910.00	\$5,820.00
68	\$1,222.50	\$2,115.00	\$4,230.00	\$1,815.00	\$3,150.00	\$6,300.00
69	\$1,308.75	\$2,272.50	\$4,545.00	\$1,968.75	\$3,412.50	\$6,825.00

Rates are based on age, gender, and smoking status.

Rates are guaranteed for the initial 10 year level term.

\*Only non-smokers meeting the highest underwriting standards will qualify for the Super Preferred rates shown. Other non-smokers may qualify for the Preferred, Select, Select Smoker or Standard Smoker rates.(Note: Smokers may only qualify for "Select Smoker" or "Standard Smoker" rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Dependent Child Coverage \$16.00 Semi-Annual

The premium contributions shown reflect the current rate and benefit structure. Premium contributions may be changed by New York Life Insurance Company on any premium due date, but not more than once in any premium date, and any date on which benefits are changed. However, your rates may change only if they are changed for all others in the same class of insureds. For example, a class of insureds is a group of people with the same issue age. Benefit option amounts are not guaranteed and are subject to change by agreement between New York Life and AAFP.

Male rates apply to all coverage issued to Montana residents, regardless of a person's sex.

## For Answers to Questions or Help Applying Call (866) 537-1039

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### 2023 Current AAFP Semi-Annual Super Preferred Rates\*

Age	Female			Male		
	\$750,000	\$1,500,000	\$3,000,000	\$750,000	\$1,500,000	\$3,000,000
20-30	\$142.50	\$285.00	\$570.00	\$206.25	\$412.50	\$825.00
31	\$150.00	\$300.00	\$600.00	\$213.75	\$427.50	\$855.00
32	\$153.75	\$307.50	\$615.00	\$221.25	\$442.50	\$885.00
33	\$161.25	\$322.50	\$645.00	\$225.00	\$450.00	\$900.00
34	\$168.75	\$337.50	\$675.00	\$232.50	\$465.00	\$930.00
35	\$176.25	\$352.50	\$705.00	\$236.25	\$472.50	\$945.00
36	\$187.50	\$375.00	\$750.00	\$251.25	\$502.50	\$1,005.00
37	\$195.00	\$390.00	\$780.00	\$258.75	\$517.50	\$1,035.00
38	\$206.25	\$412.50	\$825.00	\$273.75	\$547.50	\$1,095.00
39	\$221.25	\$442.50	\$885.00	\$285.00	\$570.00	\$1,140.00
40	\$232.50	\$465.00	\$930.00	\$296.25	\$592.50	\$1,185.00
41	\$255.00	\$510.00	\$1,020.00	\$330.00	\$660.00	\$1,320.00
42	\$281.25	\$562.50	\$1,125.00	\$360.00	\$720.00	\$1,440.00
43	\$303.75	\$607.50	\$1,215.00	\$390.00	\$780.00	\$1,560.00
44	\$330.00	\$660.00	\$1,320.00	\$423.75	\$847.50	\$1,695.00
45	\$356.25	\$712.50	\$1,425.00	\$453.75	\$907.50	\$1,815.00
46	\$390.00	\$780.00	\$1,560.00	\$513.75	\$1,027.50	\$2,055.00
47	\$427.50	\$855.00	\$1,710.00	\$573.75	\$1,147.50	\$2,295.00
48	\$465.00	\$930.00	\$1,860.00	\$630.00	\$1,260.00	\$2,520.00
49	\$506.25	\$1,012.50	\$2,025.00	\$693.75	\$1,387.50	\$2,775.00
50	\$543.75	\$1,087.50	\$2,175.00	\$753.75	\$1,507.50	\$3,015.00
51	\$600.00	\$1,200.00	\$2,400.00	\$862.50	\$1,725.00	\$3,450.00
52	\$660.00	\$1,320.00	\$2,640.00	\$967.50	\$1,935.00	\$3,870.00
53	\$716.25	\$1,432.50	\$2,865.00	\$1,076.25	\$2,152.50	\$4,305.00
54	\$776.25	\$1,552.50	\$3,105.00	\$1,188.75	\$2,377.50	\$4,755.00

Rates are based on age, gender, and smoking status.

Rates are guaranteed for the initial 20 year level term.

\*Only non-smokers meeting the highest underwriting standards will qualify for the Super Preferred rates shown. Other non-smokers may qualify for the Preferred, Select, Select Smoker or Standard Smoker rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Dependent Child Coverage \$16.00 Semi-Annual

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Male rates apply to all coverage issued to Montana residents, regardless of a person's sex.

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### Not sure you need life insurance?

The lump sum cash payment life insurance provides can do more than pay the bills you leave behind. It can help ensure those you love will have the future you've worked so hard to give them. Here are a few of the many ways it can help.



### **Income Replacement**

If your family depends on you for financial support, they may have a hard time covering ongoing living expenses without your support. That includes monthly bills for housing, utilities, insurance, even groceries.



### **Outstanding Financial Obligations**

Would those you love be left with the burden of your medical school debt, outstanding mortgage or automobile loans, credit card balances?



### **Final Expenses**

Life insurance can pay funeral and burial costs, as well as any remaining medical expense not covered by health insurance.



### **Future Costs**

When it comes to protecting your family, it's important to look at both immediate and future expenses. That could mean a good education for your children ... or a comfortable retirement for your spouse.

### **Buy With Confidence**

The AAFP Group 10 and 20 year Level Term Life Insurance is offered to family physicians by New York Life Insurance Company, a company we selected because of its proven financial strength and superior service. An industry leader for more than 175 years, New York Life Insurance Company has received the highest financial strength ratings currently awarded to any U.S. life insurer from all four major credit rating agencies.



Highest Rating from A.M. Best

#### ΔΔΔ

Highest Rating from Fitch

#### $\Delta \Delta +$

Second-Highest Rating from Standard & Poor's

### Aaa

Highest Rating from Moody's Investors Service

(ratings as of 10/18/22)

## For Answers to Questions or Help Applying

Call (866) 537-1039





AAFP Headquarters, Suite 430, 11400 Tomahawk Creek Parkway, Leawood, KS 66211

The AAFP Association-Group 10/20-Year Level Term Life Insurance policy described is subject to the terms and conditions of Group Policy 10 yr: G-30240 20yr: G-30241 underwritten by New York Life Insurance Company (51 Madison Avenue, New York, NY 10010) to the American Academy of Family Physicians (on Policy Forms G-30240-0/GMR-FACE and G-30241-0/GMR-FACE). Please refer to the Certificate of Insurance for details of your coverage.

### AR Ins. License #246260, CA Insurance License #0547426

<sup>\*</sup>Coverage may vary and may not be available in all states.

<sup>&</sup>lt;sup>1</sup> Spouse coverage is subject to the same policy provisions applicable to members including age-based eligibility and renewability, limitations, exclusions and termination. Your spouse's insurance will be issued as part of your certificate. Unless indicated, the AAFP member is the primary beneficiary. Coverage can remain in force even if you terminate your AAFP membership, die, legally separate, divorce or remarry. If you and your spouse are both AAFP members, please decide whether you want coverage under one joint Certificate of Insurance or separate Certificates.

<sup>&</sup>lt;sup>2</sup> Please note that receipt of Accelerated Death Benefits may affect your eligibility for public assistance programs and may be taxable. Prior to applying to receive such benefits, you should consult with the appropriate social services agency and seek the advice of a qualified tax advisor.

<sup>3</sup> If you or your spouse are not performing the normal activities of a person in good health of like - insurance will take effect on the day you are performing such normal activities if it's within three months the insurance would have otherwise taken effect, the applicant becomes an insured member and you are still eligble to obtain insurance.