

Golden Rule Insurance Company underwrites and administers the Term Life SafeGuard insurance plans, which include specific Life Insurance Policy Forms and an Accelerated Death Benefit Rider for critical illnesses. This product provides limited benefits, specifically a Term Life insurance policy with an optional Critical Illness Benefit that offers cash benefits for qualifying critical illnesses. It is crucial to understand that Term Life SafeGuard is not comprehensive health insurance and does not meet the Affordable Care Act's coverage requirements. The policy is available for terms of 10 or 20 years, with various benefit amounts and a maximum lifetime benefit for critical illness that can be selected. A 30-day waiting period applies for critical illness diagnoses to qualify for benefits, which are paid as a one-time cash benefit upon diagnosis. The death benefit is payable to the designated beneficiary, reduced by any critical illness benefits already disbursed. Exclusions from coverage include death by suicide within the first two years, deaths resulting from intoxication, acts of war, and participation in certain high-risk activities. The policy can be renewed annually until the insured reaches 75 years of age, with premiums increasing thereafter. Policyholders must provide written proof of a critical illness diagnosis within 90 days to claim benefits. Termination of the policy can occur for several reasons, including reaching age 75, nonpayment of premiums, or the insured's death. Policyholders have the right to assign the policy and change beneficiaries, and any misstatements regarding age, gender, or tobacco use may affect benefits. The brochure provided serves as an outline and does not constitute a legal interpretation of the policy, which should be reviewed for complete terms and conditions.

The document also outlines privacy practices regarding health information, mandating the protection of identifiable health information related to individuals' physical or mental health, healthcare provision, or payment for care. The organization is obligated to notify individuals in the event of a breach and reserves the right to modify privacy practices, communicating material changes through annual notices or postings. Health information may be used or disclosed for treatment, payment, and healthcare operations, including sharing with healthcare providers for treatment coordination and processing claims. Certain highly confidential information is subject to stricter protections, and

any use or disclosure not covered by the notice requires written authorization. Individuals have rights concerning their health information, including requesting restrictions on disclosures, receiving confidential communications, accessing their health records, and requesting amendments. The policy also includes a Fair Credit Reporting Act notice and emphasizes the confidentiality of personal financial information collected in connection with providing coverage.

The policy specifies that insurance coverage becomes effective only if certain conditions are met, including the completion and acceptance of the application, payment of the first premium, and issuance of the policy within 45 days. Accurate reporting of medical information and tobacco use is critical, as failure to do so may result in claim denial or coverage voidance. State-specific variations and exclusions are noted, such as in Alabama, where benefits are not payable for loss of hearing, speech, or vision, and certain exclusions do not apply. Other states, like Florida and Illinois, have specific provisions regarding misstatements of age or tobacco use. The document advises applicants to seek advice regarding the replacement of insurance and to retain a copy of the authorization for the release of personal health information, which remains valid for 30 months.

The document emphasizes the importance of understanding insurance needs and reviewing policies, particularly regarding life insurance. It encourages individuals to assess their financial contributions to their family, potential final expenses, debts, and the financial needs of dependents. It outlines two primary types of life insurance: term insurance, which offers lower initial premiums without cash value accumulation, and cash value insurance, which includes whole life, universal life, and variable life policies that build cash value. The document advises obtaining life insurance illustrations to understand how non-guaranteed benefits may change and encourages comparing policies from different companies to find the best value for individual needs.