

# Aflac Group Whole Life

INSURANCE

Security for your family's future—and cash value, too.



In California, coverage is underwritten by  
Continental American Life Insurance Company.



# AFLAC GROUP WHOLE LIFE INSURANCE

Policy Series C60000



While we all know that life insurance helps protect our loved ones for the long term, sometimes we don't consider that there are other benefits of a whole life insurance plan as well.

Priced to fit most budgets, Aflac Group Whole Life insurance can give your family a financial cushion when they need it. And, unlike some kinds of life insurance, a whole life insurance plan won't be canceled just because you reach a certain age.

**Aflac Group Whole Life insurance doesn't only look out for your family's tomorrow--it also works hard for you today.**

What you may not realize is that in addition to offering valuable life insurance protection, Aflac Group Whole Life is designed to build cash value—at a guaranteed rate of return. It's a feature that could come in handy down the road for short-term or unplanned expenses.

There are other advantages, as well:

- You may apply for benefit amounts by answering only a few medical questions.
- Once your Whole Life insurance application has been approved and payroll deductions have started, the coverage is yours to keep as long as you continue to pay premiums.
- Aflac Group Whole Life builds cash value that you can access for life's challenges and life's opportunities.

Aflac Group Whole Life insurance is flexible, too. You can apply for coverage that fits your budget and lifestyle.

## **Whole Life Benefit Coverage Options:**

- Employee
- Spouse
- Children ages 15 days through 25 years may be covered in either of these two ways:
  - A Child Term Rider for dependent children (the rider will cover all of your dependent children), or
  - A separate Whole Life plan for each of your dependent children

## **Additional Benefits:**

- Accidental Death Benefit Rider (employee and spouse only)
- Waiver of Premium Benefit Rider (employee only)

## **Features:**

- Premiums will not increase.
- Benefits may be paid directly to your named beneficiary.
- Coverage may be continued, which means you can take it with you if you change jobs or retire.
- Premiums are paid through convenient payroll deduction.

**Here's why the Aflac Group Whole Life insurance plan may be right for you.**

For more than 60 years, Aflac has been dedicated to helping provide individuals and families peace of mind and financial security when they've needed it most. The Aflac Group Whole Life plan is just another innovative way to help make sure you're well protected.

## Benefits Overview

### **WHOLE LIFE BENEFIT** (Employee, Spouse, Child and Grandchild (see eligibility) coverage available)

The Whole Life Benefit pays proceeds upon the insured's death. Proceeds are defined as the total of the benefits payable upon the insured's death. Proceeds will be the sum of the amount of insurance in force, any insurance on the life of the insured provided by benefit riders, any premium paid that applies to a period of time beyond the certificate month in which the insured dies, less any certificate loan and loan interest, and any unpaid premium, except the first premium, that applies to a period before and including the certificate month in which the insured dies.

### **ACCIDENTAL DEATH BENEFIT RIDER** (Employee and Spouse only)

The Accidental Death Benefit Rider provides an additional benefit equal to the face amount if the insured dies within 90 days of direct accidental bodily injuries. The maximum coverage available under this rider is \$300,000. Employees and spouses, ages 18-60, are issued this benefit, which terminates at age 65.

### **WAIVER OF PREMIUM BENEFIT RIDER** (Employee only)

The Waiver of Premium Benefit Rider waives entire premium amount for employee coverage after the insured has been totally disabled due to bodily injury or disease for 4 consecutive months and continues throughout the duration of the disability. Any recurrence of a prior disability will be covered, provided the prior disability continued for at least 6 consecutive months, began within 30 days of recovery, and was due to the same or related causes. The Waiver of Premium Benefit Rider is also available for loss of sight or loss of limbs even though the employee may be able to engage in an occupation. Only employees, ages 18-55, are eligible to be issued this benefit, which terminates at age 60.

### **CHILDREN'S TERM INSURANCE RIDER** (Children only)

The Children's Term Rider pays a benefit upon receipt of due proof of death of an insured child if coverage is in force, it is before the expiration date, and it is before the rider anniversary following the insured child's 26th birthday. The children's term insurance may be converted to a whole life plan without evidence of insurability subject to the maximum shown in the certificate. Refer to your certificate for details.

The plan has limitations and exclusions that may affect benefits payable. This brochure is for illustrative purposes only. Refer to your certificate for complete details, definitions, limitations, and exclusions.

**For more information, ask your insurance agent/producer, call 1.800.433.3036, or visit [aflacgroupinsurance.com](http://aflacgroupinsurance.com).**

## LIMITATIONS AND EXCLUSIONS

### WHOLE LIFE EXCLUSIONS

If an insured takes his own life within two years from the date of issue of his certificate, our liability will be limited to all premiums paid, without interest, less any certificate loan and loan interest.

### ACCIDENTAL DEATH RIDER EXCLUSIONS

The Accidental Death Benefit provided will not be payable if the insured's death results from any of the following causes:

- War, or an act of war (including any armed aggression resisted by the armed forces of any country or combination of countries), whether such war is declared or undeclared;
- Suicide;
- Committing or attempting to commit a felony;
- The voluntary taking of:
  - Any drug, unless prescribed or administered by a physician and taken in accordance with the physician's instruction; or
  - Poison, gas, or fumes, unless they are a direct result of an occupational accident;
  - Engaging in aviation, other than as a fare-paying passenger

### WAIVER OF PREMIUM RIDER EXCLUSION

No benefit will be provided by the rider if a total disability is caused by:

- An intentionally self-inflicted injury; or
- Results from an act of war (declared or undeclared) while the insured is in the military service of any country.

Approval for Waiver of Premium requires:

- That the total disability be caused by bodily injury or by disease;
- That the total disability has continued for four consecutive months; and
- That the rider and certificate were in force when the total disability began.

### CHILDREN'S TERM INSURANCE RIDER EXCLUSIONS

The Children's Term Insurance Rider is part of the certificate and is subject to all certificate provisions that are not inconsistent with it. It is issued in consideration of the application for and the payment of premiums for this rider.

### YOUR COVERAGE MAY BE CONTINUED

When an employee is no longer a member of an eligible class and coverage would otherwise terminate, coverage may be continued. See certificate for details.

### TERMS YOU NEED TO KNOW

**Beneficiary** means the person (or entity) named in the application, or later changed by the plan owner, who will receive proceeds upon the death of the insured.

**Eligible Person** means the following individuals who are eligible for coverage:

1. A person who is employed and paid for services by his employer on a regular basis. The eligible person must work for the employer:
  - a. At such person's usual place of work, or such other places as required by the employer in the course of such work;
  - b. For the full number of hours and full rate of pay, as set by the employment practices of the employer.
2. The employed person's spouse.
3. The employed person's child under 26 years of age.
4. A child under 26 years of age the eligible person will be adopting pursuant to an interim court order of adoption.
5. The employed person's grandchild under 26 years of age, who is legally dependent on the employed person.

Note: "Child" as used above includes adopted children and stepchildren.

However, eligible person will not include a foster child. An eligible child or grandchild must be under age 26 to be issued coverage, but whole life coverage under the certificate does not end after age 26.

Child eligibility definitions vary by state.

**Spouse** is your legal wife, husband, or partner in a legally recognized union.

Refer to your certificate for details.

**Total Disability** means during the first 24 months of total disability, the primary insured is unable to perform with reasonable continuity the substantial and material duties of his or her job due to sickness or bodily injury.

After the first 24 months of total disability, the primary insured, due to sickness or bodily injury, is unable to engage with reasonable continuity in any other job in which he or she could reasonably be expected to perform satisfactorily in light of his or her age, education, training, experience, station in life, or physical and mental capacity.

**Eligible Death Benefit** means the death benefit payable under the certificate and any riders by reason of death of the insured, not reduced by certificate loans excluding accidental death benefit riders, and any death benefit that is within five years of its expiration date on the benefit date.

### Qualifying Event

One or more of the following:

- An illness or physical condition that will, in the absence of treatment, with a reasonable degree of medical certainty, will result in the death of the Insured in less than 12 months from the date of a written statement, by a licensed health care practitioner.
- Chronic Illness, which means a condition which causes:
  - i. Impairment in performing two out of six activities of daily living due to a loss of functional capacity to perform the activity – "impairment" meaning the insured needs substantial assistance to perform the activity.
  - ii. Impairment of cognitive ability, meaning the insured needs substantial supervision due to severe cognitive impairment.

Continental American Insurance Company (CAIC), a proud member of the Aflac family of insurers, is a wholly-owned subsidiary of Aflac Incorporated and underwrites Group coverage. CAIC is not licensed to solicit business in New York, Guam, Puerto Rico, or the Virgin Islands. For groups situated in California, group coverage is underwritten by Continental American Life Insurance Company.

Continental American Insurance Company • Columbia, South Carolina

The plan has limitations and exclusions that may affect benefits payable.

This brochure is for illustrative purposes only. Refer to the plan for complete details, definitions, limitations, and exclusions.

The certificate to which this sales material pertains may be written only in English; the certificate prevails if interpretation of this material varies.

This brochure is a brief description of coverage and is not a contract. Read your certificate carefully for exact terms and conditions. You're welcome to request a full copy of the plan certificate through your employer or by reaching out to our Customer Service Center. This brochure is subject to the terms, conditions, and limitations of Policy Series C60000.



# CONTINENTAL AMERICAN INSURANCE COMPANY

Columbia, South Carolina  
800.433.3036

## Group Life Insurance Beneficiary Designation Form

### A. Information About the Employee

Name of Employee <i>(First, middle initial, last)</i>	Address	Date of birth <i>(mm/dd/yyyy)</i>	Social Security	Employer Policyholder Name
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### B. Employee Beneficiary Information

First name, middle initial, and last name of each beneficiary	Relationship	Address	Date of Birth <i>(mm/dd/yyyy)</i>	Social Security #	Email Address	Telephone	Percent %
<input type="checkbox"/> Primary							
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent							
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent							

Total: 100%

### C. Information About the Spouse

Name of Spouse <i>(First, middle, last)</i>	Date of birth <i>(mm/dd/yyyy)</i>
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### D. Spouse Beneficiary Information

First name, middle initial, and last name of each beneficiary	Relationship	Address	Date of Birth	Social Security #	Email Address	Telephone	Percent %
<input type="checkbox"/> Primary							
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent							
<input type="checkbox"/> Primary <input type="checkbox"/> Contingent							

Total: 100%

### E. Please sign and date

Employee Signature	Date
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Return to: Mail: Aflac · P.O. Box 84075 · Columbus, GA 31993 · Fax: 866.849.2974 · Email: cscmail@aflac.com  
Questions? Toll-Free: 1.800.433.3036

Continental American Insurance Company (CAIC), a proud member of the Aflac family of insurers, is a wholly-owned subsidiary of Aflac Incorporated and underwrites group coverage.