Protect the people you love with coverage you can trust.

Get simple, competitively-priced group Term Life insurance—exclusively for PERS of Mississippi retirees.

Enroll now to secure your best rate.
Secure their tomorrow
with Term Life coverage from Transamerica Premier Life Insurance Company.

Group Term Life insurance from Transamerica Premier pays your family or beneficiary a lump sum cash benefit in the event of your death. Competitive group rates are available.

All Public Employees’ Retirement System of Mississippi (PERS) retirees and their spouses ages 44 to 90 can participate in the Term Life insurance plan.

This voluntary coverage is now available in amounts from $2,500 to a maximum of $20,000. You can enroll for coverage without having to complete any medical forms. Spouse coverage is also available. Your spouse can be covered for an amount equal to or less than your coverage without any medical forms.

Transamerica Premier Term Life coverage is dependable coverage.

- Get up to $20,000 in coverage for just a few dollars a month
- Guaranteed acceptance
- No medical exams or questions
- Rates won’t increase as you age
- Provided by a PERS of Mississippi-approved, A+ rated company

Enroll now to secure your best rate.
Call 800-634-0168 and sign up today.
Provide peace of mind for your loved ones.
That’s all part of the plan.

Introducing Term Life coverage from Transamerica Premier Life Insurance Company.

Term Life insurance gives you so much for so little.

Term Life insurance is coverage for a particular term or period of time that pays a fixed amount of money if the insured dies during the term of the policy. The premiums are lower based on your age when coverage begins. Your rate may change only if the rates for the entire group are changed. The policies do not build up cash value like whole life insurance.

Double benefits for accidents.

You will receive benefits in the event of a covered accidental death from day one, and you’re covered for double the amount of protection you choose – which could be as much as $40,000.

Your acceptance is guaranteed.¹
No medical history needed.

Retirees can increase their life insurance coverage up to, but not to exceed $20,000. The retiree’s spouse may enroll for a total benefit amount equal to or less than the retiree’s total coverage amount.

You can’t be canceled because of age or health.

If you enroll in the Group Term Life Insurance Plan between the ages of 44 and 90, your plan will continue to renew until you reach age 120. It cannot be cancelled because of your age or any changes in your health, subject to the limited benefit period end at age 120.

---

About this booklet.

This booklet is designed to answer some common questions about the Public Employees’ Retirement System of Mississippi Group Term Life Insurance coverage being offered to eligible retirees. It is not intended to provide a detailed description of the coverage.

When you become insured, you will receive a certificate containing a detailed description of the insurance, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provision will be in the group policy. Neither this booklet nor the certificate modifies the group policy or the insurance coverage in any way.
You and your spouse can be covered.

All Public Employees’ Retirement System of Mississippi retirees and their spouses ages 44 to 90 can participate in the Term Life insurance plan.

However, if you have coverage as an insured or retiree, you cannot become insured as the spouse of another insured (retiree).

Expanding coverage is easy.

Retirees can increase their life insurance coverage at any time, however, the total coverage for the retiree cannot exceed $20,000. The retiree’s spouse may enroll for a total benefit amount equal to or less than the retiree’s total coverage amount. This new coverage is subject to two years of limited benefits; full benefits are available after two years.

Automatic deductions simplify payment.

Term Life premiums are deducted directly from your retirement benefit payment, so you can be confident that you’ve done your best to protect your family.

<table>
<thead>
<tr>
<th>Term Life Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No medical exam needed¹</td>
</tr>
<tr>
<td>Term Life Benefits</td>
</tr>
<tr>
<td>Double Benefits for Covered Accidents</td>
</tr>
</tbody>
</table>

Transamerica Premier plan holders can continue their coverage.

If you are currently insured in the Transamerica Premier plan and do not want to change your coverage amount, your coverage will automatically continue at the same level subject to your continued payment of premiums due.

If you are currently insured, but want to change your coverage, you may contact us at 800-634-0168, Monday – Friday, 7:00 a.m. – 5:00 p.m., CT.

¹Benefits are guaranteed with no medical exam because benefits are limited to a return of premiums paid for non-accidental death during the first two years. The plan will pay 125% of the initial annual premium the first year and 250% of the initial annual premium the second year. After that, the full benefit amount will be paid for death from any cause.
Life Insurance designed with you in mind.

A Company you can count on.

The Transamerica Premier Life Insurance Company has been operating in the United States for more than 150 years, providing insurance products since 1858. Transamerica Premier has grown over time but has always maintained a commitment to quality products and service.

We have the experience and dedication needed to provide reliable coverage for the retirement system of our state.

Don’t miss this opportunity to protect your family.

Approved by PERS and backed by one of the nation’s most financially reliable institutions*, group Term Life insurance from Transamerica Premier is a smart, simple, affordable way to plan for the unexpected.

Enroll now to secure your best plan rate.

Just call 800-634-0168.

You can also complete and mail the enclosed enrollment form in the reply envelope we have provided.

Please respond soon.

You have been pre-qualified for this coverage.

The effective date of your coverage depends on when you meet the eligibility requirements, when you enroll, and when your premium deductions start. If you enroll and agree to pay premiums, your Term Life Coverage becomes effective the month after the premium is deducted.

Enroll now to secure your best rate.

Questions?

We’ve provided many answers on the back of this brochure.

We’re always here to help.

Call one of our friendly, knowledgeable Transamerica Premier Life Insurance Customer Service Representatives toll-free at 800-634-0168.

Copies of Life Claim, Beneficiary Designation, and other related forms can be obtained by calling 800-634-0168, Monday through Friday, 7:00 a.m. to 5:00 p.m., CT.
Frequently Asked Questions

**Does my coverage under the group policy have cash value?**

No. Group Term Life insurance does not accrue cash value or dividends.

**How are benefits paid?**

For all benefit amounts, Transamerica Premier will issue a check to the designated beneficiaries.

**Are there any exclusions?**

**Accidental Death Exclusions**

The loss must occur as a direct result of an injury; and the loss must occur within 365 days of the accident causing the injury. We will not pay a benefit for a loss which is caused or contributed by: suicide, attempted suicide or intentionally self-inflicted injury while sane or insane (in Missouri and Colorado while sane); declared or undeclared war or any act of war; full-time military service; sickness or its medical or surgical treatment, including diagnosis; bacterial infection except through a wound accidentally sustained; participating in a riot, committing an assault or felony; alcohol intoxication, as defined in the state where the accident occurred; of any drug, medication, narcotic or hallucinogen, unless as prescribed by a physician; operating or riding in any kind of aircraft, except as a fare-paying passenger on a regularly scheduled commercial flight or as a passenger in a transport plane operated by the Military Airlift Command (MAC) of the United States; voluntary gas inhalation or poison voluntarily taken, administered or inhaled; riding or driving as a professional in any kind of race for prize money or profit. Exclusions may differ in your state. See your Certificate of Insurance for details.

**Life Exclusions**

The only situation not covered is suicide within two years (one year in North Dakota and Colorado) after the effective date of this coverage. There will be a refund of premiums paid. In Missouri during the first two years of coverage benefits for suicide are limited to return of premiums paid without interest if we show suicide was intended at the time of application.

**When does my coverage end?**

Term Life coverage ends automatically on the earliest of the following: 1) the date the Term Life insurance ends upon your reaching age 120; 2) the last day of the last period for which you paid a premium contribution.

Spouse coverage will automatically end on the earliest of the following: 1) the date the spouse Term Life insurance ends upon the spouse reaching age 120; 2) the date the group policy terminates; 3) the date the last period ends for which a premium was paid for your spouse’s Term Life insurance; 4) when the spouse ceases to be an eligible dependent.

The requirements listed above are in addition to the plan requirements listed elsewhere in this brochure.

Your plan may also be terminated when: 1) the group master policy is terminated; 2) you do not make the required premium payment and the policy grace period (31 days) expires; or 3) you cease to be an eligible member of the group.

If your Term Life insurance ends or reduces, you may be eligible to convert the terminated coverage to certain types of individual life insurance policies without providing evidence of insurability.
Complete or correct this information.

<table>
<thead>
<tr>
<th>Name:</th>
<th>Social Security No.</th>
<th>Date of Birth (MM/DD/YY):</th>
<th>Gender:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>□ Male</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>□ Female</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>Home Telephone Number:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Beneficiary:</th>
<th>Relationship:</th>
</tr>
</thead>
</table>

Spouse: □ I want to cover my Spouse:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Date of Birth (MM/DD/YY):</th>
<th>Gender:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>□ Male</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Female</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Beneficiary:</th>
<th>Relationship:</th>
</tr>
</thead>
</table>

Select Your Coverage – please see enclosed rate chart for premium amount(s):

<table>
<thead>
<tr>
<th>Applicant:</th>
<th>$2,500</th>
<th>$5,000</th>
<th>$7,500</th>
<th>$10,000</th>
<th>$15,000</th>
<th>$20,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse (if enrolling):</td>
<td>$2,500</td>
<td>$5,000</td>
<td>$7,500</td>
<td>$10,000</td>
<td>$15,000</td>
<td>$20,000</td>
</tr>
</tbody>
</table>

Please Answer For Each Person Enrolling:

Is this insurance intended, in whole or in part, to replace, discontinue, or change any existing life insurance or annuity now in effect with this or any other company?

<table>
<thead>
<tr>
<th>YOU</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPOUSE</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

I/we hereby enroll and I/we confirm that I/we are retired from the Public Employees’ Retirement System of Mississippi. I understand that coverage becomes effective on the effective date stated in the Certificate of Insurance provided this Enrollment Form is approved by the Insurance Company and the first premium is paid. I acknowledge that I have read the fraud warning statement if applicable.

Your Signature: 

Today’s Date

Spouse Signature (if enrolling):

Today’s Date
FRAUD WARNING STATEMENTS

Certain state insurance departments require that we advise you of the following statements:

FOR ARKANSAS, LOUISIANA AND NEW MEXICO RESIDENTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

FOR COLORADO RESIDENTS: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policy holder or claimant for the purpose of defrauding or attempting to defraud the policy holder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

FOR DC AND TENNESSEE RESIDENTS: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

FOR FLORIDA RESIDENTS: Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claim or any application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

FOR KENTUCKY AND PENNSYLVANIA RESIDENTS: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

FOR MAINE RESIDENTS: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

FOR MARYLAND RESIDENTS: Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

FOR NEW JERSEY RESIDENTS: Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

FOR OHIO RESIDENTS: Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

FOR OKLAHOMA RESIDENTS: WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of any insurance policy containing any false, incomplete or misleading information is guilty of a felony.

FOR OREGON RESIDENTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance may be guilty of a crime and may be subject to fines and confinement in prison.

FOR RHODE ISLAND RESIDENTS: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

FOR WASHINGTON RESIDENTS: FRAUD WARNING: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

TL1050GEM