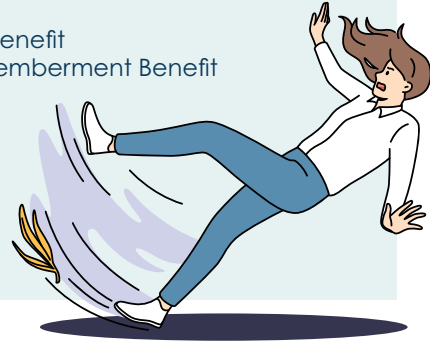


**GROUP ACCIDENT ONLY INSURANCE†**

\$5,000 Group Accident Only Medical Expense Benefit  
\$5,000 Blanket Group Accidental Death & Dismemberment Benefit

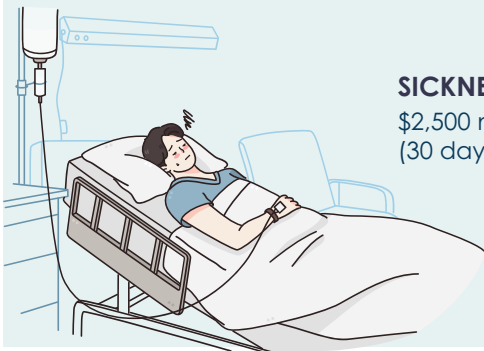


**CANCER LUMP SUM BENEFIT RIDER†**

\$5,000 maximum benefit amount  
(60 day waiting period)

**LIMITED SPECIFIED DISEASE BENEFIT RIDER†**

Heart Attack & Stroke  
\$5,000 maximum benefit amount  
(60 day waiting period)



**SICKNESS LUMP SUM HOSPITAL BENEFIT RIDER†**

\$2,500 maximum benefit amount  
(30 day waiting period)

**GROUP TERM LIFE INSURANCE†**

\$10,000 Death Benefit^ - Primary Member  
50% of Death Benefit^ - Eligible Spouse  
25% of Death Benefit^ - Eligible Dependent Children

^Death benefits are subject to waiting period  
and attained age benefit reductions)

(†See **page 2** certificates of insurance for the full benefit  
descriptions, schedule of benefits, terms, conditions and  
limitations and **page 3** for disclaimers.)



## VIEW YOUR STATE CERTIFICATE OF INSURANCE FOR FULL INSURANCE DETAILS INCLUDING ANY STATE VARIATIONS

STATE	LINK TO DOWNLOAD CERTIFICATE OF INSURANCE
ALABAMA	<a href="https://www.ubamembers.com/certs_gap5+_AL.pdf">https://www.ubamembers.com/certs_gap5+_AL.pdf</a>
ARKANSAS	<a href="https://www.ubamembers.com/certs_gap5+_AR.pdf">https://www.ubamembers.com/certs_gap5+_AR.pdf</a>
ARIZONA	<a href="https://www.ubamembers.com/certs_gap5+_AZ.pdf">https://www.ubamembers.com/certs_gap5+_AZ.pdf</a>
DELAWARE	<a href="https://www.ubamembers.com/certs_gap5+_DE.pdf">https://www.ubamembers.com/certs_gap5+_DE.pdf</a>
DISTRICT OF COLUMBIA	<a href="https://www.ubamembers.com/certs_gap5+_DC.pdf">https://www.ubamembers.com/certs_gap5+_DC.pdf</a>
GEORGIA	<a href="https://www.ubamembers.com/certs_gap5+_GA.pdf">https://www.ubamembers.com/certs_gap5+_GA.pdf</a>
ILLINOIS	<a href="https://www.ubamembers.com/certs_gap5+_IL.pdf">https://www.ubamembers.com/certs_gap5+_IL.pdf</a>
IOWA	<a href="https://www.ubamembers.com/certs_gap5+_IA.pdf">https://www.ubamembers.com/certs_gap5+_IA.pdf</a>
LOUISIANA	<a href="https://www.ubamembers.com/certs_gap5+_LA.pdf">https://www.ubamembers.com/certs_gap5+_LA.pdf</a>
MISSISSIPPI	<a href="https://www.ubamembers.com/certs_gap5+_MS.pdf">https://www.ubamembers.com/certs_gap5+_MS.pdf</a>
NEBRASKA	<a href="https://www.ubamembers.com/certs_gap5+_NE.pdf">https://www.ubamembers.com/certs_gap5+_NE.pdf</a>
OHIO	<a href="https://www.ubamembers.com/certs_gap5+_OH.pdf">https://www.ubamembers.com/certs_gap5+_OH.pdf</a>
OKLAHOMA	<a href="https://www.ubamembers.com/certs_gap5+_OK.pdf">https://www.ubamembers.com/certs_gap5+_OK.pdf</a>
SOUTH CAROLINA	<a href="https://www.ubamembers.com/certs_gap5+_SC.pdf">https://www.ubamembers.com/certs_gap5+_SC.pdf</a>
TEXAS	<a href="https://www.ubamembers.com/certs_gap5+_TX.pdf">https://www.ubamembers.com/certs_gap5+_TX.pdf</a>
VIRGINIA	<a href="https://www.ubamembers.com/certs_gap5+_VA.pdf">https://www.ubamembers.com/certs_gap5+_VA.pdf</a>
WISCONSIN	<a href="https://www.ubamembers.com/certs_gap5+_WI.pdf">https://www.ubamembers.com/certs_gap5+_WI.pdf</a>
WEST VIRGINIA	<a href="https://www.ubamembers.com/certs_gap5+_WV.pdf">https://www.ubamembers.com/certs_gap5+_WV.pdf</a>
WYOMING	<a href="https://www.ubamembers.com/certs_gap5+_WY.pdf">https://www.ubamembers.com/certs_gap5+_WY.pdf</a>
UBA Membership Guide	<a href="https://www.ubamembers.com/sample_ubamembership.pdf">https://www.ubamembers.com/sample_ubamembership.pdf</a>
Benefit Boost 1.0 Guide	<a href="https://www.ubamembers.com/sample_bb1-np_UBA.pdf">https://www.ubamembers.com/sample_bb1-np_UBA.pdf</a>

### FOR MORE INFORMATION

AGENT NAME

AGENT PHONE #

AGENT EMAIL ADDRESS

**FOR A QUOTE AND TO ENROLL: UNIQUE LINK ADDRESS HERE**

Designed to supplement your comprehensive qualified medical insurance plan.



Individual - \$70 per month\*

Individual+1 or Family - \$140 per month\*

## IMPORTANT DISCLAIMERS FOR THIS PLAN AND FLYER

**Read the Certificate(s) of Insurance carefully.** This flyer is a brief description of various group association insurance products and is not an insurance contract, nor part of the Certificate of Insurance.

The Accident Medical Expense and Accidental Death & Dismemberment Benefits are offered under Group Accident Only Insurance issued on Policy form series MP-1400, Certificate form series GC-1400 and underwritten by Guarantee Trust Life Insurance Company (GTL), Glenview, IL. The Cancer Lump Sum Benefit, Limited Specified Disease Benefit for Heart Attack and Stroke, and Sickness Lump Sum Hospital Benefit are offered as riders to the policy under form series GRG15CR, GRG15HAS, GR15SHI. Group Term Life Insurance is issued on Policy/Certificate Form Series GLMP-3002/GLC-3002. The policies are issued to the United Business Association (UBA) and includes the following: exclusions, limitations, reductions of benefits, and terms of renewal and termination. Subject to state availability, variability, and GTL's right to increase premium rates.

**Cancellation / Termination of Benefits/Renewability:** Coverage terminates when UBA terminates the policy, your membership ceases, insurance ceases for your class, for non-payment of premium by UBA, or the date of fraud or misrepresentation of a material fact. The group policy terminates for non-payment of premium, if group participation requirements are not met or on any premium due date for any of the following reasons: fraud or misrepresentation of a material fact; failure of UBA to provide required information; or at GTL's option with 30 days notice. Notice of termination provided to UBA is considered notice of termination to all members and will not be sent to you individually by GTL. The policy automatically renews each policy anniversary until cancellation/termination.

GTL does not provide nor is affiliated with the discount programs provided as part of membership in UBA.

The insurance described above provides limited benefits. Limited benefit policies are insurance products with reduced benefits intended to help supplement comprehensive health insurance plans. This insurance is not an alternative to comprehensive coverage. It does not provide major medical or comprehensive medical coverage and is not designed to replace major medical insurance. Further, this insurance is not minimum essential benefits as set forth under the Patient Protection and Affordable Care Act.

\*The following monthly insurance rates apply to coverage underwritten by Guarantee Trust Life Insurance Company. Your overall total association membership dues also include these insurance rates for the Group Accident Only Insurance, Cancer Lump Sum Benefit Rider, Limited Specified Disease Benefit Rider and the Sickness Lump Sum Hospital Benefit Rider: Individual = \$29.49; Family = \$68.24 and for the Group Term Life Insurance: \$4.40.

As part of your overall Gap5+ plan cost, the non-insurance Benefit Boost services retail at \$40 (Individual), \$80 (Ind+1), and \$100 (Family). Guarantee Trust Life Insurance Company does not offer and is not affiliated with the additional non-insurance Benefit Boost services and discount programs offered in connection with membership in the United Business Association (UBA). Plan cost does not include the separate \$10 UBA Membership dues. You must be a member of the United Business Association in order to purchase this plan.

**If there are any discrepancies between this description and the Certificate, the Certificate will govern.**

United Business Association, Guarantee Trust Life Insurance Company, and HealthyAmerica are separate legal entities and have sole financial responsibility for their own products.

**This plan includes Benefit Boost 1.0 services.** Make sure to check out all the services available with this plan including \$0 Access fee Lyric Health Virtual Visits (Virtual Urgent Care & Virtual Talk Therapy Visits), dental discounts, prescription discounts, free vitamins and more. View the guide by clicking on the Benefit Boost 1.0 Guide link on **page 2** to learn more.

