

Fidelity Life and Hybrid Life

Since 1896, Fidelity Life Association has offered innovative products and services to our policyholders across the country. At Fidelity Life we are dedicated to providing a customer experience unique in the industry today. No other company can offer you the features and flexibility of our revolutionary patent-pending Hybrid Life, all backed by the financial strength and security of our A- (Excellent) rating from A.M. Best¹

So for term insurance on your terms, it's Hybrid Life, only from Fidelity Life Association.

¹ For the latest rating, access www.ambest.com



Established 1896

Innovation Is Our Policy[®]

Fidelity Life Association,
A Legal Reserve Life Insurance Company

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Fidelity Life Association is licensed in all states and the District of Columbia, except for WY and NY. Not all products may be available in every state. Hybrid Life is based on policy form F4200. A two-year suicide exclusion and contestability period applies (one year in some states). All applications are subject to underwriting approval. Our NAIC number is 63290.

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NEW, Only From Fidelity Life Association

Term Life Insurance Now! On Your Terms.

Hybrid Life from Fidelity Life Association



Did you know?

Did you know that the typical life insurance company takes up to 12 weeks to issue a high face amount policy at a reasonable cost?² Alternatively, some companies issue coverage quickly, but either limit the total amount of coverage you can purchase, or charge a very high premium – or both. Hybrid Life was designed to solve this problem. With Fidelity Life Association's Hybrid Life², you can receive a high face amount of coverage promptly – most policies are approved within 24 to 48 hours. In addition, our rates are among the most competitive in the industry.

The Hybrid Life Difference

- Reasonably priced high-face amount coverage
- Blended coverage available with a convenient 24-48 hour approval process
- Choice to take an optional medical exam to improve your blend of coverage.
- Ability to defer the medical exam for up to six months

² Patents pending

Here's how it works

- You qualify for coverage by completing our initial underwriting process, which includes answering some questions about your health history.
- In most cases, you should receive coverage within 24 to 48 hours of applying, if approved.
- Your policy is initially a blend of two types of coverage. A portion is level premium term life insurance – this pays a death benefit for any cause of death.³ Another portion of the coverage is an accidental death benefit – this pays an additional death benefit in the case of accidental death.
- After the policy is issued, you may – at your option – contact the company to schedule a paramedical exam.
- Based on the results of your exam, the company may adjust the blend of coverage initially provided (e.g., increase the portion of the policy that pays for all causes of death), at no additional cost to you.
- You have up to six months after your policy is issued to schedule your optional exam.

If you undergo a medical exam and it is then discovered that your health is worse than you knew it to be when you completed your application, your policy benefits as originally issued will not change for the term of years selected. If your health is as good or better than you reported on your application, the medical exam verification may allow you to eliminate or reduce the portion of coverage that pays only in the event of accidental death.

Experience the Hybrid Life Difference!

³ Death benefit payable for any cause of death except those specifically excluded in the policy—please consult the policy wording for details.

Hybrid Life Versus Typical Term Life Insurance A World Of Difference For You

Typical Term Insurance	Hybrid Life
Temporary coverage only until medical results are known – usually in 2-3 months.	Full coverage starts immediately for 10, 15, 20 or 30 year terms after approval via the Rapid Decision process.
Coverage can be denied after medical exam results are known – temporary coverage will be withdrawn.	Coverage can never be terminated once issued, regardless of medical exam results, provided all questions are answered honestly.
When coverage is approved based on medical results, full coverage finally begins – usually in 2-3 months.	If medical exam is done within 6 months and confirms you are in good health, the blended coverage amount may favorably change, allowing greater all cause coverage.
If medical exam is done and health issues are discovered, coverage can be denied.	If medical exam is done and health issues are discovered, coverage <u>remains in force</u> and cannot be cancelled, provided all questions are answered honestly.
Medical exam must be taken immediately.	You have the choice to delay your full medical exam for up to 6 months which gives you time to improve health issues like weight or cholesterol.
You must submit medical evidence immediately or no coverage will be issued.	You have the choice to submit to a medical exam within 6 months or never submit additional medical evidence and your coverage will remain in force.

