



# Your critical illness coverage

## CRITICAL ILLNESS

### Benefit Amount(s)

Employee may choose a lump sum benefit of \$5,000 to \$30,000 in \$5,000 increments.

### CONDITIONS

#### Cancer

	1 <sup>st</sup> OCCURRENCE	2 <sup>nd</sup> OCCURRENCE
Invasive Cancer	100%	100%
Carcinoma In Situ	30%	0%
Benign Brain Tumor	75%	0%
Skin Cancer	\$250 per lifetime	Not Covered

#### Vascular

Heart Attack	100%	100%
Stroke	100%	100%
Heart Failure	100%	100%
Coronary Arteriosclerosis	30%	0%

#### Other

Organ Failure	100%	100%
Kidney Failure	100%	100%

### ADDITIONAL CONDITIONS

	1 <sup>st</sup> OCCURRENCE ONLY
Addison's Disease	30%
ALS (Lou Gehrig's Disease)	100%
Alzheimer's Disease	50%
Coma	100%
Huntington's Disease	30%
Loss of Hearing	100%
Loss of Sight	100%
Loss of Speech	100%
Multiple Sclerosis	30%
Parkinson's Disease	100%
Permanent Paralysis	50% for 1 limb, 100% for 2 limbs
Severe Burns	100%

### Childhood Conditions

	1 <sup>st</sup> OCCURRENCE ONLY
Cerebral Palsy	100%
Cleft Lip/Palate	100%
Club Foot	100%
Cystic Fibrosis	100%
Down's Syndrome	100%
Muscular Dystrophy	100%
Spina Bifida	100%
Type I Diabetes	100%



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<b>Spouse Benefit</b>	May choose a lump sum benefit of \$2,500 to \$15,000 in \$2,500 increments up to 50% of the employee's lump sum benefit.
<b>Child Benefit-</b> children age Birth to 26 years	25% of employee's lump sum benefit
<b>Guarantee Issue:</b> The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period or the annual open enrollment period.	<p>We Guarantee Issue up to: \$30,000</p> <p>For a spouse: \$15,000</p> <p>For a child: All Amounts</p> <p><b>Health questions are required if the elected amount exceeds the Guarantee Issue.</b></p>
<b>Pre-Existing Condition Limitation:</b> A pre-existing condition includes any condition for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	Not Applicable

## WELLNESS BENEFIT

Employee Per Year Limit	\$50
Spouse Per Year Limit	\$50
Child Per Year Limit	\$50

## Condition Definitions

- **Stroke:** Stroke must be severe enough to cause neurological deficits at least 30 days after the event.
- **Heart Failure:** An insured must be placed on an organ transplant list in order to be eligible for the Heart failure benefits.
- **Coronary Arteriosclerosis:** Coronary Arteriosclerosis must be severe enough to require a coronary artery bypass graft.
- **Organ Failure:** Organ failure includes both lungs, liver, pancreas or bone marrow and requires the insured to be placed on an organ transplant list.
- **Kidney Failure:** An insured must be placed on an organ transplant list in order to be eligible for the Kidney failure benefits.