

GROUP CRITICAL ILLNESS

Policy Series CAI2800



PLAN FEATURES

GUARANTEED ISSUE \$10,000 EMPLOYEE/\$5,000 SPOUSE Participation Requirement for groups 250 or less is 50 applications; for groups 250+ participation requirement is 20% of eligible employees. **\$5,000 EMPLOYEE** Participation Requirement for groups 250 or less is 25 applications; for groups 250+ participation requirement is 10% of eligible employees.

SAME DAY COVERAGE Coverage will be effective the date the employee signs the application pending underwriting approval.

PORTABILITY Employees can keep coverage at same rates and benefits if they leave their job, with certain stipulations.

CANCER OPTION May be sold with or without cancer benefit.

PREMIUM OPTIONS May be sold on tobacco/non-tobacco structure or uni-tobacco structure.

PLAN BENEFITS

FIRST OCCURRENCE BENEFIT After the waiting period, a Lump Sum Benefit is payable upon initial diagnosis of a covered illness. Employee benefit amounts available from \$5,000 to \$50,000. Spouse coverage is also available in benefit amounts up to \$25,000. If you are deemed ineligible due to a previous medical condition you still retain the ability to purchase spouse coverage.

ADDITIONAL OCCURRENCE BENEFIT If an insured collects full benefits for a critical illness under the plan and later has one of the remaining covered illnesses, then we will pay the full benefit amount for each additional illness. Occurrences must be separated by at least 6 months.

RE-OCCURRENCE BENEFIT If an insured collects full benefits for a covered condition and is later diagnosed with the same condition, we will pay the full benefit again. The two dates of diagnosis must be separated by at least 12 months or for Cancer, 12 months treatment free. Cancer that has spread (metastasized) even though there is a new tumor, will not be considered an additional occurrence unless the Insured has gone treatment free for 12 months.

25% CHILD COVERAGE AT NO ADDITIONAL COST Each dependent child is covered at 25 percent of the primary insured amount at no additional charge.

\$50 HEALTH SCREENING BENEFIT (EMPLOYEE AND SPOUSE) After the Waiting Period, pays a maximum of \$50 for any one covered health screening test per calendar year. We will pay this benefit regardless of the results of the test. *Covered health screening tests include (but are not limited to): mammography, colonoscopy, pap smear, breast ultrasound, chest x-ray, PSA (blood test for prostate cancer), stress test on a bicycle or treadmill, and bone marrow testing.*

COVERED SPECIFIC CRITICAL ILLNESSES:

CANCER (Internal/Invasive).....	100%
HEART ATTACK (Myocardial Infarction).....	100%
STROKE (Apoplexy or Cerebral Vascular Accident).....	100%
MAJOR ORGAN TRANSPLANT.....	100%
RENAL FAILURE (End Stage).....	100%
CARCINOMA IN SITU.....	25%
CORONARY ARTERY BYPASS SURGERY.....	25%

NOTE: If a benefit is paid for carcinoma in situ, the internal cancer benefit will be reduced by 25%. If a benefit is paid for coronary artery bypass surgery, the heart attack benefit will be reduced by 25%. All covered conditions are subject to the definitions found in your certificate.

LIMITATIONS AND EXCLUSIONS

IF DIAGNOSIS OCCURS AFTER THE AGE OF 70, HALF OF THE BENEFIT IS PAYABLE.

The plan contains a 30-day waiting period. This means that no benefits are payable for any insured who has been diagnosed before your coverage has been in force 30 days from the effective date. If an insured is first diagnosed during the waiting period, benefits for treatment of that critical illness will apply only to loss starting after 12 months from the Effective Date or the Employee can elect to void the coverage and receive a full refund of premium.

The applicable benefit amount will be paid if: the date of diagnosis is after the waiting period; the date of diagnosis occurs while the certificate is in force; and the cause of the illness is not excluded by name or specific description.

EXCLUSIONS

Benefits will not be paid for loss due to:

- Intentionally self-inflicted injury or action;
- Suicide or attempted suicide while sane or insane;
- Illegal activities or participation in an illegal occupation;
- War, whether declared or undeclared or military conflicts, participation in an insurrection or riot, civil commotion or state of belligerence;
- Substance abuse; or
- Pre-Existing Conditions (except as stated below).

No benefits will be paid for loss which occurred prior to the effective date.

No benefits will be paid for diagnosis made or treatment received outside of the United States.

PRE-EXISTING CONDITION LIMITATION

Pre-Existing Condition means a sickness or physical condition which, within the 12-month period prior to the Effective Date, resulted in the insured receiving medical advice or treatment.

We will not pay benefits for any critical illness starting within 12 months of the Effective Date which is caused by, contributed to, or resulting from a Pre-Existing Condition. A claim for benefits for loss starting after 12 months from the Effective Date will not be reduced or denied on the grounds that it is caused by a Pre-Existing Condition. A critical illness will no longer be considered pre-existing at the end of 12 consecutive months starting and ending after the Effective Date.

TERMS YOU NEED TO KNOW

The **Effective Date** of your insurance will be the date shown in your Certificate Schedule.

Employee means the insured as shown the Certificate Schedule.

Spouse means an employee's legal wife or husband.

Dependent Children means your natural children, step-children, legally adopted children, or children placed for adoption, who are unmarried, chiefly dependent on you or your Spouse for support, and younger than age 25.

However, if any child is incapable of self-sustaining employment due to mental retardation or physical handicap and is dependent on a parent(s) for support, the above age of 25 shall not apply. Proof of such incapacity and dependency must be furnished to the company within 31 days following such 25th birthday.

Treatment means consultation, care or services provided by a physician including diagnostic measures and taking prescribed drugs and medicines.

Major Organ Transplant means undergoing surgery as a recipient of a transplant of a human heart, lung, liver, kidney, or pancreas.

Myocardial Infarction (Heart Attack) means the death of a portion of the heart muscle (myocardium) resulting from a blockage of one or more coronary arteries. Heart Attack does not include any other disease or injury involving the cardiovascular system. Cardiac arrest not caused by a Myocardial Infarction is not a Heart Attack. The diagnosis must include all of the following criteria: 1. New and serial electrocardiographic (EKG) findings consistent with Myocardial Infarction; 2. Elevation of cardiac enzymes above generally accepted laboratory levels of normal [in case of creatine phosphokinase (CPK), a CPK-MB measurement must be used]; and 3. Confirmatory imaging studies such as thallium scans, MUGA scans, or stress ecocardiograms.

Stroke means apoplexy (due to rupture or acute occlusion of a cerebral artery), or a cerebral vascular accident or incident which is first manifested on or after your Effective Date. Stroke does not include transient ischemic attacks and attacks of vertebralbasilar ischemia. We will pay a benefit for Stroke which produces permanent clinical neurological sequela following an initial diagnosis made after any applicable Waiting Period. We must receive evidence of the permanent neurological damage provided from Computed Axial Tomography (CAT scan)

or Magnetic Resonance Imaging (MRI). Stroke does not mean head injury, transient ischemic attack, or chronic cerebrovascular insufficiency.

Cancer (Internal or Invasive) means a malignant tumor characterized by the uncontrolled growth and spread of malignant cells and the invasion of distant tissue. Cancer includes leukemia. Excluded are Cancers that are Non-Invasive, such as (1) Pre-malignant tumors or polyps; (2) Carcinoma in Situ; (3) Any skin cancers except melanomas; (4) Basal cell carcinoma and squamous cell carcinoma of the skin; and (5) Melanoma that is diagnosed as Clark's Level I or II or Breslow less than .77mm.

Cancer is also defined as a disease which meets the diagnosis criteria of malignancy established by The American Board of Pathology after a study of the histocytologic architecture or pattern of the suspect tumor, tissue, or specimen.

Carcinoma in Situ means Cancer that is in the natural or normal place, confined to the site of origin without having invaded neighboring tissue.

Renal Failure (Kidney Failure) means the end stage renal failure presenting as chronic, irreversible failure of both of your kidneys to function. The Kidney Failure must necessitate regular renal dialysis, hemo-dialysis or peritoneal dialysis (at least weekly); or which results in kidney transplantation. Renal failure is covered, provided it is not caused by a traumatic event, including surgical traumas.

Coronary Artery Bypass Surgery means undergoing open heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts, but excluding procedures such as, but not limited to balloon angioplasty, laser relief, stints or other non-surgical procedures.

A doctor, physician, or pathologist does not include an insured or a family member.

PORTABLE COVERAGE

When coverage would otherwise terminate because the Employee ends employment with the employer, coverage may be continued. The Employee will continue the coverage that is in-force on the date employment ends, including dependent coverage then in effect.

The Employee will be allowed to continue the coverage until the earlier of the date the Employee fails to pay the required premium or the date the group master policy is terminated. Coverage may not be continued if the Employee fails to pay any required premium or the group master policy terminates.

TERMINATION

Coverage will terminate on the earliest of: (1) The date the master policy is terminated; (2) On the 31st day after the premium due date if the required premium has not been paid; (3) On the date the insured ceases to meet the definition of an Employee as defined in the master policy; or (4) On the date the Employee is no longer a member of the class eligible.

Coverage for an insured Spouse or Dependent Child will terminate the earliest of: (1) The date the master policy is terminated; (2) On the 31st day after the premium due date if the required premium has not been paid; (3) The premium due date following the date the Spouse or Dependent Child ceases to be a dependent; or (4) The premium due date following the date we receive a written request to terminate coverage for a Spouse and/or Dependent Children.



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

Underwritten by:
Continental American Insurance Company
2801 Devine Street | Columbia, South Carolina 29205



This brochure is a brief description of coverage and is not a contract. Read your certificate carefully for exact terms and conditions. This brochure is subject to the terms, conditions, and limitations of Policy Form Series CAI2800.

GROUP CRITICAL ILLNESS



Texas - Monthly (12pp/yr)

UNI-TOBACCO - Employee		
AGES	\$10,000	\$20,000
18-29	\$ 6.05	\$ 10.35
30-39	\$ 9.75	\$ 17.75
40-49	\$ 19.35	\$ 36.95
50-59	\$ 32.95	\$ 64.15
60-69	\$ 51.75	\$ 101.75

UNI-TOBACCO - Spouse		
AGES	\$5,000	\$10,000
18-29	\$ 3.90	\$ 6.05
30-39	\$ 5.75	\$ 9.75
40-49	\$ 10.55	\$ 19.35
50-59	\$ 17.35	\$ 32.95
60-69	\$ 26.75	\$ 51.75

Rates include cancer benefit.

Rates include: \$50 Health Screening Benefit, and no additional riders.

Please Note: Premiums shown are accurate as of publication. They are subject to change.



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