

# CAIC Group Critical Illness Plan

## Group Critical Illness Benefits

### First Occurrence Benefit

After the Waiting Period, an insured may receive up to 100% of the benefit selected upon the first diagnosis of each covered critical illness.

Covered Critical Illnesses*	
Illnesses Covered Under Plan	Percentage of Face Amount
Heart Attack	100%
Stroke	100%
Major Organ Transplant	100%
Kidney Failure (End Stage)	100%
Coronary Artery Bypass**	25%

\*At age 70, benefits are reduced by 50%.

### 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 any additional illness. Occurrences must be separated by at least 6 months.

### Re-Occurrence Benefits

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 any additional illness. Occurrences must be separated by at least 12 months.

\*\* A partial benefit (25%) is payable for Coronary Artery Bypass Surgery. Payment of the partial benefit for Coronary Artery Bypass Surgery will reduce the benefit for a Heart Attack by 25%.

## *Health Screening Benefits*

After the Waiting Period, an insured may receive a maximum of \$100 for any one covered screening test per calendar year. We will pay this benefit regardless of the results of the test. Payment of this benefit will not reduce the amount payable for the diagnosis of a critical illness. There is no limit to the number of years the insured can receive the health screening benefit; it will be paid as long as the policy remains in force. This benefit is payable for the covered employee and spouse. This benefit is not paid for dependent children. The covered health screening tests include but are not limited to:

- Stress test on a bicycle or treadmill
- Fasting blood glucose test, blood test for triglycerides or serum cholesterol test to determine level of HDL and LDL
- Bone marrow testing
- Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- CEA (blood test for colon cancer)
- Chest x-ray
- Colonoscopy
- Flexible sigmoidoscopy
- Hemocult stool analysis
- Mammography
- Pap smear
- PSA (blood test for prostate cancer)
- Serum protein electrophoresis (blood test for myeloma)
- Thermography

## *Heart Benefit Rider*

<b>Covered Critical Illnesses*</b>	
Illnesses Covered Under Plan	Percentage of Face Amount
<b>Category 1</b>	
Coronary artery bypass surgery	100%
Mitral valve replacement or repair	100%
Aortic valve replacement or repair	100%
Surgical Treatment of Abdominal aortic aneurysm	100%
<b>Category 2**</b>	
AngioJet Clot Busting	10%
Balloon Angioplasty (or Balloon valvuloplasty)	10%
Laser Angioplasty	10%
Atherectomy	10%
Stent implantation	10%

Cardiac catheterization	10%
Automatic Implantable (or Internal) Cardioverter Defibrillator (AICD)	10%
Pacemakers	10%

\* At age 70, benefits are reduced by 50%.

We will pay the indicated percentages of the applicable Initial Maximum Benefit amount shown in the Rider Schedule that occurs while this Rider is in force. Benefits are not payable under this Rider for loss if these conditions result from another Specified Critical Illness.

\*\*Benefits for Category II will reduce the benefit amounts payable for Category I benefits. Benefits will be paid only at the highest benefit level. If a Cat I and II are performed at the same time, benefits are only eligible at the 100% (higher) event and will not exceed the amount Initial Face Amount shown on the Rider Schedule. You are only eligible to receive one payment for each benefit category listed on the schedule page. The Dates of Loss for Covered Procedures must be separated by at least 6 months for benefits to be payable for multiple Covered Procedures. Subject to the re-occurrence benefit in the base plan, only one Category II benefit is payable. Benefits will not be paid for multiple procedures listed under the Category II benefit.

### **Additional Specified Critical Illnesses Rider**

<b>Covered Specified Critical Illnesses*</b>	
<b>Illnesses Covered Under Plan</b>	<b>Percentage of Maximum Benefit</b>
<b>Coma</b>	<b>100%</b>
<b>Paralysis</b>	<b>100%</b>
<b>Burns</b>	<b>100%</b>
<b>Loss of Sight</b>	<b>100%</b>
<b>Loss of Hearing</b>	<b>100%</b>
<b>Loss of Speech</b>	<b>100%</b>

\* At age 70, benefits are reduced by 50%.

We will pay the indicated percentages of the applicable Maximum Benefit Amount shown in the Certificate Schedule. Benefits are not payable for loss if these conditions result from another Specified Critical Illness. The Dates of Loss for Specified Critical Illnesses must be separated by at least 6 months for benefits to be payable for multiple Specified Critical Illnesses.

### ***Individual Eligibility***

Issue Ages:

Employee- 18-69

Spouse- 18-69

Children- under age 26

All full-time and part-time employees working at least 16 hours or more weekly with at least 90 days of continuous employment. If an employee is eligible, their spouse is eligible for coverage and all natural children, step-children, foster children, legally adopted children or children placed for adoption who are under age 26. Seasonal and temporary workers are not eligible to participate.

### ***Spouse Coverage Available***

The employee may elect to purchase spouse coverage. In order to apply for spouse coverage, the employee must also apply. The spouse amount may not exceed 50% of the employee amount, subject to the minimum face amount of \$5,000. If the employee does not meet the underwriting requirements necessary to participate in the plan, the spouse can still obtain coverage. The spouse would then become the primary insured and is limited to face amounts between \$5,000 and \$25,000.

### ***Dependent Children Coverage at No Additional Charge***

Each eligible dependent child is covered at 25% of the primary insured amount at no additional charge. The payment of benefits for a dependent child does not reduce the face amount of the primary insured. Children-only coverage is not available.

### ***Portability***

When coverage is effective and 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 coverage until the earlier of the date the employee fails to pay the required premium, or the date the group master policy is terminated.

### ***Limitations and Exclusions (also applies to additional benefit riders)***

This policy contains a 30-day "waiting period." This means that no benefits are payable for any insured before coverage has been in force 30 days from their effective date of coverage. If a covered person is first diagnosed during the "waiting period," benefits for that Critical Illness will apply only to loss commencing after 12 months from the effective date of coverage, or the covered person may elect to void the certificate from the beginning and receive a full refund of premium.

The date of diagnosis of a Critical Illness must be separated from the date of diagnosis of a subsequent different Critical Illness by at least 6 months. The date of diagnosis of the same Critical Illness must be separated from the date of diagnosis of the subsequent same Critical Illness by at least 12 months.

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

Benefits will not be paid for loss due to:

1. Intentionally self-inflicted injury or action;
2. Suicide or attempted suicide while sane or insane;

3. Illegal activities or participation in an illegal occupation;
4. Participating in war or any act of war, declared or not, or participating in the armed forces of or contracting with any country or international authority. This exclusion does not include acts of terrorism. We will return the prorated premium for any period not covered by this certificate when you are in such service.
5. Substance abuse; or
6. Pre-existing conditions.

Diagnosis must be made and treatment received in the United States.

### ***Pre-existing Conditions Limitation & Exceptions***

“Pre-existing Condition” means a sickness or physical condition which, within the 12-month period prior to an insured’s effective date resulted in the insured receiving medical advice or treatment.

We will not pay benefits for any condition or illness starting within 12 months of an insured’s 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 an insured’s effective date.

### ***Additional Benefit Rider Exclusions:***

All limitations and exclusions that apply to the Critical Illness plan also apply to this rider. The Waiting Period and Pre-existing condition limitation apply from the date of this rider is effective.

No Benefits will be paid for loss which occurred prior to the effective date of the Rider. Benefits are not payable for Loss if these conditions result from another Specified Critical Illness.

### ***Heart Benefit Rider Exceptions:***

All limitations and exclusions that apply to the Critical Illness plan also apply to this rider. The Waiting Period and Pre-existing condition limitation apply from the date of this rider is effective.

Any Benefits for Coronary Artery Bypass Surgery denied under this rider due to Pre-existing conditions may be paid at the reduced benefit amount under the certificate, subject to the terms of the certificate.

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

### ***Actively At Work Requirement***

If you are not Actively at Work on the last scheduled work day coincident with or preceding the date your insurance would otherwise become effective, insurance will not be effective until the date you return to and remain Actively at Work.

If an eligible spouse or dependent child is unable to engage in the normal activities of a person in good health of like age and sex on the date this rider would

otherwise become effective, coverage will not be effective until the date such person is able to engage in the normal activities of a person in good health of like age and sex. This will not apply to an eligible dependant child who is incapable of self-sustaining employment by reason of mental or physical incapacity, and who is primarily dependent on the Insured for support and maintenance.

### *Underwriting Guidelines – Guaranteed Issue*

#### **Guaranteed Issue**

Guaranteed Issue is offered during the initial enrollment and for new hires thereafter to groups based on participation requirements being met. The following options are available for Guaranteed Issue.

- o \$10,000 employee and \$5,000 spouse

#### **Modified Guaranteed Issue**

For employee amounts of \$50,000 or less, and spouse amounts of \$25,000 or less:

All applicants are required to answer underwriting questions. These questions are knockout questions. Any “yes” response results in a declination. If participation requirements are met, employees who would otherwise be declined will be issued the lesser of the amount applied for or the Guaranteed Issue limit. Please refer to the application for these questions.



Underwritten by:

Continental American Insurance Company

P.O. Box 427

Columbia, SC 29202

**Customer Service**

800.433.3036

csc@caicworksite.com

***CAIC Group Critical Illness Without Cancer Plan  
Employee and Spouse Monthly Rates***

**NON-TOBACCO - Employee Monthly**

	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
<b>18-29</b>	\$5.35	\$7.20	\$9.05	\$10.90	\$12.75	\$14.60	\$16.45	\$18.30	\$20.15	\$22.00
<b>30-39</b>	\$6.55	\$9.60	\$12.65	\$15.70	\$18.75	\$21.80	\$24.85	\$27.90	\$30.95	\$34.00
<b>40-49</b>	\$9.70	\$15.90	\$22.10	\$28.30	\$34.50	\$40.70	\$46.90	\$53.10	\$59.30	\$65.50
<b>50-59</b>	\$13.45	\$23.40	\$33.35	\$43.30	\$53.25	\$63.20	\$73.15	\$83.10	\$93.05	\$103.00
<b>60-69</b>	\$19.50	\$35.50	\$51.50	\$67.50	\$83.50	\$99.50	\$115.50	\$131.50	\$147.50	\$163.50

**NON-TOBACCO - Spouse Monthly**

	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
<b>18-29</b>	\$5.35	\$6.28	\$7.20	\$8.13	\$9.05	\$9.98	\$10.90	\$11.83	\$12.75
<b>30-39</b>	\$6.55	\$8.08	\$9.60	\$11.13	\$12.65	\$14.18	\$15.70	\$17.23	\$18.75
<b>40-49</b>	\$9.70	\$12.80	\$15.90	\$19.00	\$22.10	\$25.20	\$28.30	\$31.40	\$34.50
<b>50-59</b>	\$13.45	\$18.43	\$23.40	\$28.38	\$33.35	\$38.33	\$43.30	\$48.28	\$53.25
<b>60-69</b>	\$19.50	\$27.50	\$35.50	\$43.50	\$51.50	\$59.50	\$67.50	\$75.50	\$83.50

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**TOBACCO - Employee Monthly**

	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
<b>18-29</b>	\$6.30	\$9.10	\$11.90	\$14.70	\$17.50	\$20.30	\$23.10	\$25.90	\$28.70	\$31.50
<b>30-39</b>	\$8.35	\$13.20	\$18.05	\$22.90	\$27.75	\$32.60	\$37.45	\$42.30	\$47.15	\$52.00
<b>40-49</b>	\$15.80	\$28.10	\$40.40	\$52.70	\$65.00	\$77.30	\$89.60	\$101.90	\$114.20	\$126.50
<b>50-59</b>	\$23.15	\$42.80	\$62.45	\$82.10	\$101.75	\$121.40	\$141.05	\$160.70	\$180.35	\$200.00
<b>60-69</b>	\$34.10	\$64.70	\$95.30	\$125.90	\$156.50	\$187.10	\$217.70	\$248.30	\$278.90	\$309.50

**TOBACCO - Spouse Monthly**

	\$5,000	\$7,500	\$10,000	\$12,500	\$15,000	\$17,500	\$20,000	\$22,500	\$25,000
<b>18-29</b>	\$6.30	\$7.70	\$9.10	\$10.50	\$11.90	\$13.30	\$14.70	\$16.10	\$17.50
<b>30-39</b>	\$8.35	\$10.78	\$13.20	\$15.63	\$18.05	\$20.48	\$22.90	\$25.33	\$27.75
<b>40-49</b>	\$15.80	\$21.95	\$28.10	\$34.25	\$40.40	\$46.55	\$52.70	\$58.85	\$65.00
<b>50-59</b>	\$23.15	\$32.98	\$42.80	\$52.63	\$62.45	\$72.28	\$82.10	\$91.93	\$101.75
<b>60-69</b>	\$34.10	\$49.40	\$64.70	\$80.00	\$95.30	\$110.60	\$125.90	\$141.20	\$156.50

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