

## **Cancer 1000**

Colonial Life's Cancer 1000 insurance helps employees and their families maintain financial security in the event of a cancer diagnosis. Employees can choose from four levels of coverage amounts. Employee; Employee and Dependent Children; and Employee, Spouse, and Dependent Children plans are available.

### **What this product can do for you**

- You can select from several levels and plan options to help meet the needs of a diverse employee base.
- This plan provides benefits for wellness screening, and early detection of cancer may decrease major medical claims.
- You can attract and retain employees by offering affordable supplemental insurance products that satisfy individual employee needs.
- You can provide a more comprehensive benefits program at no direct cost to you.
- If you are raising deductibles on employee health plans, cancer insurance can help employees offset these deductibles.

### **What this product can do for your employees**

- Cancer treatment is expensive and often lengthy. Colonial Life's cancer insurance helps employees pay for the costs associated with this disease.
- All eligible applicants in an account have the same premium, regardless of risk class or age.
- Your employees can choose from several levels and coverage options to best fit their changing healthcare needs.
- By providing cancer screening benefits, this policy encourages employees to get regular exams that can detect cancer early and increase the probability of successful treatment.
- Employees receive benefits to use for the indirect, non-medical costs associated with cancer, such as lost wages and additional living expenses.

#### Applicable in PA

*This information is only intended for proposal use with employers.*

*Colonial Life products are underwritten by Colonial Life & Accident Insurance Company, for which Colonial Life is the marketing brand.*

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**Benefits-the employer must choose only 2 consecutive plans listed below. (For example, you can choose Level 3 and Level 4, but not Level 1 and Level 4.)**

| <b>Base</b>   | <b>Level 1</b>      | <b>Level 2</b>      | <b>Level 3</b>      | <b>Level 4</b>      |
|---|---------------------|---------------------|---------------------|---------------------|
| <b>Cancer Screening Benefits</b>  |                     |                     |                     |                     |
| Part I. Cancer Screening/Wellness Benefit per calendar year   | \$25                | \$75                | \$100               | \$125               |
| Part II. Additional Invasive Diagnostic Test or Surgical Benefit per calendar year                            | \$25                | \$75                | \$100               | \$125               |
| <b>Cancer Benefits</b>  |                     |                     |                     |                     |
| Air Ambulance per trip limit 2 trips per confinement  | \$1,000             | \$1,000             | \$1,000             | \$1,000             |
| Ambulance per trip limit 2 trips per confinement  | \$200               | \$200               | \$200               | \$200               |
| Anesthesia-Benefit for General is 25% of Surgical Procedures<br>per procedure for local anesthesia            | \$25                | \$30                | \$40                | \$50                |
| Antinausea Medication per day administered or per prescription filled<br>maximum per month                    | \$20<br>\$80        | \$40<br>\$160       | \$50<br>\$200       | \$60<br>\$240       |
| Blood/Plasma/Platelets/Immunoglobulins per day up to \$10,000 per cal year                                    | \$200               | \$200               | \$200               | \$200               |
| Bone Marrow Stem Cell Transplant per lifetime<br>Bone Marrow Stem Cell Donation<br>Benefit per lifetime       | \$10,000<br>\$1,000 | \$10,000<br>\$1,000 | \$10,000<br>\$1,000 | \$10,000<br>\$1,000 |
| Companion Transportation (\$ per mile) up to \$1,500 per round trip   | 0.50                | 0.50                | 0.50                | 0.50                |
| Experimental Treatment per day up to \$10,000 per lifetime  | \$300               | \$300               | \$300               | \$300               |
| Family Care per day   | \$60                | \$60                | \$60                | \$60                |
| Hair/External Breast/Voice Box Prosthesis per cal year  | \$200               | \$200               | \$200               | \$200               |
| Home Health Care Services per day up to greater of 30 days/calendar year or 2 times days confined to hospital | \$75                | \$75                | \$75                | \$75                |
| Hospice per day, no lifetime limit  | \$70                | \$70                | \$70                | \$70                |
| Hospital Confinement, Days 1-30, benefit per day  | \$100               | \$200               | \$300               | \$400               |

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|  |                               |                               |                               |                               |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| Hospital Confinement, Days 31+, benefit per day  | <b>\$200</b>                  | <b>\$400</b>                  | <b>\$600</b>                  | <b>\$800</b>                  |
| Lodging per day up to 70 days per calendar year  | <b>\$75</b>                   | <b>\$75</b>                   | <b>\$75</b>                   | <b>\$75</b>                   |
| Medical Imaging Studies per study, \$500 calendar year max   | <b>\$250</b>                  | <b>\$250</b>                  | <b>\$250</b>                  | <b>\$250</b>                  |
| Outpatient Surgical Center per day   | <b>\$200</b>                  | <b>\$200</b>                  | <b>\$300</b>                  | <b>\$400</b>                  |
| calendar year maximum  | <b>\$600</b>                  | <b>\$600</b>                  | <b>\$900</b>                  | <b>\$1,200</b>                |
| Peripheral Stem Cell Transplant lifetime maximum   | <b>\$5,000</b>                | <b>\$5,000</b>                | <b>\$5,000</b>                | <b>\$5,000</b>                |
| Private Full Time Nursing Services per day   | <b>\$150</b>                  | <b>\$150</b>                  | <b>\$150</b>                  | <b>\$150</b>                  |
| Prosthesis/Artificial Limb per device, limit 1 per site, \$6,000 lifetime  | <b>\$3,000</b>                | <b>\$3,000</b>                | <b>\$3,000</b>                | <b>\$3,000</b>                |
| Radiation/Chemotherapy per day<br>(no monthly limit for chemotherapy injected or radiation delivered by medical personnel)<br><u>Monthly Maximum</u> | <b>\$100</b>                  | <b>\$200</b>                  | <b>\$300</b>                  | <b>\$300</b>                  |
| Self Injected  | <b>\$800</b>                  | <b>\$1,600</b>                | <b>\$2,400</b>                | <b>\$2,400</b>                |
| Pump   | <b>\$400</b>                  | <b>\$800</b>                  | <b>\$1,200</b>                | <b>\$1,200</b>                |
| Topical  | <b>\$400</b>                  | <b>\$800</b>                  | <b>\$1,200</b>                | <b>\$1,200</b>                |
| Oral   | <b>\$400</b>                  | <b>\$800</b>                  | <b>\$1,200</b>                | <b>\$1,200</b>                |
| Any Other Method Not Listed  | <b>\$400</b>                  | <b>\$800</b>                  | <b>\$1,200</b>                | <b>\$1,200</b>                |
| Reconstructive Surgery per unit value maximum per procedure for Surgery and Anesthesia, limit 2 per site   | <b>\$40</b><br><b>\$2,500</b> | <b>\$40</b><br><b>\$2,500</b> | <b>\$60</b><br><b>\$3,000</b> | <b>\$60</b><br><b>\$3,000</b> |
| Second Medical Opinion limit once per malignant condition  | <b>\$300</b>                  | <b>\$300</b>                  | <b>\$300</b>                  | <b>\$300</b>                  |
| Skilled Nursing Care Facility per day up to days confined in hosp  | <b>\$100</b>                  | <b>\$100</b>                  | <b>\$100</b>                  | <b>\$100</b>                  |
| Skin Cancer Initial Diagnosis once per lifetime  | <b>\$300</b>                  | <b>\$300</b>                  | <b>\$300</b>                  | <b>\$300</b>                  |
| Supportive or Protective Care Drugs & Colony Stimulating Factors   |                               |                               |                               |                               |
| per day  | <b>\$50</b>                   | <b>\$100</b>                  | <b>\$150</b>                  | <b>\$200</b>                  |
| calendar year maximum  | <b>\$400</b>                  | <b>\$800</b>                  | <b>\$1,200</b>                | <b>\$1,600</b>                |
| Surgical Procedures lifetime maximum   | <b>\$2,500</b>                | <b>\$3,000</b>                | <b>\$4,000</b>                | <b>\$5,000</b>                |
| Transportation (per mile) up to \$1,500 per trip   | <b>0.50</b>                   | <b>0.50</b>                   | <b>0.50</b>                   | <b>0.50</b>                   |
| Waiver of Premium  | <b>Yes</b>                    | <b>Yes</b>                    | <b>Yes</b>                    | <b>Yes</b>                    |

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## Optional Riders

A choice of optional riders is available and can be purchased at an additional cost to provide extra coverage and benefits.

### Specified Disease

- Paid for hospital confinement for covered specified diseases.
- \$300 per day when hospitalized
- \$125,000 lifetime maximum
- The specified diseases covered under this rider are:

|   |                             |   |
|---|-----------------------------|---|
| Adrenal Hypofunction<br>(Addison's Disease)                                 | Lyme Disease                | Tetanus   |
| Botulism  | Malaria                     | Toxic Epidermal Necrolysis                      |
| Bubonic Plague  | Meningitis (bacterial)      | Toxic Shock Syndrome                            |
| Cerebral Palsy  | Multiple Sclerosis          | Tuberculosis (Mycobacterial)                    |
| Cholera   | Muscular Dystrophy          | Tularemia                                       |
| Cystic Fibrosis   | Myasthenia Gravis           | Typhoid Fever                                   |
| Diphtheria  | Necrotizing Fasciitis       | Variant Creutzfeldt- Jakob Disease<br>(Mad Cow) |
| Encephalitis, including<br>Encephalitis contracted<br>from West Nile Virus. | Osteomyelitis               | Yellow Fever                                    |
| Huntington's Chorea   | Poliomyelitis               |   |
| Legionnaires Disease  | Rabies                      |   |
| Lou Gehrig's Disease<br>(Amyotrophic Lateral<br>Sclerosis)                  | Reye's Syndrome Scleroderma |   |
|   | Scarlet Fever               |   |
|   | Sickle Cell Anemia          |   |
|   | Systemic Lupus              |   |

### Initial Diagnosis

- Paid for the first diagnosis of internal (not skin) cancer.
- Available in \$1,000 units from \$1,000 - \$5,000
- Pays 1.5 times amount for children on family coverage.

### Progressive Payment

- Paid for the first diagnosis of internal (not skin) cancer. The progressive payment accumulates \$50 per month for each month the policy has been in force.
- Issue age for Progressive Payment rider is 17-64.

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## Features

- Benefits are paid directly to the insured unless they specify otherwise.
- Benefits are paid in addition to other insurance your employees may have with other insurance companies.
- The policy is guaranteed renewable.
- Coverage is portable. An employee can take this coverage with him if he changes jobs or leaves your company.
- The spouse may be listed as the primary insured on a Cancer policy if the employee is not eligible for coverage
- Cancer 1000 coverage offers innovative benefits to help address current treatment costs for the care of cancer
- All eligible applicants in an account have the same premium, regardless of risk class or age

## Eligibility Requirements

- Issue ages 17-69 for both the employee and spouse.
- The employee must be permanent and full time working 20 hours per week.
- The employee must be actively at work at the time of application.
- Dependent children (as defined in the policy).

## Participation Requirements

To offer this plan, we require only 3 eligible participants apply.

## Premium Information

- Premiums are based on level of coverage chosen.
- Premium levels are available for Employee; Employee and Dependent Children; and Employee, Spouse and Dependent Children plans.
- Premiums are not age banded.
- Premiums are not based on occupational risk

## Sample Monthly Premiums

| Coverage Description  | Level | Monthly Premium |
|---|-------|-----------------|
| Employee coverage without Optional riders   | 1     | \$11.50         |
| Employee and Dependent Children coverage with Progressive Payment Rider               | 3     | \$34.00         |
| Employee, Spouse and Dependent Children coverage with \$5,000 Initial Diagnosis Rider | 3     | \$55.00         |

### Definitions

**Cancer:** means a disease which is identified by the presence of malignant cells or a malignant tumor characterized by the uncontrolled and abnormal growth and spread of invasive malignant cells.

Pre-malignant conditions or conditions with malignant potential are not defined as cancer.

**Skin Cancer:** means melanoma of Clark's level I or II (Breslow less than .75mm); basal cell carcinoma; or squamous cell carcinoma of the skin.

### What is Not Covered

- We will not pay the Reconstructive Surgery Benefit for melanoma diagnosed as Clarks Level I or II or Breslow less than .75 mm.

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