Guardian Cancer Insurance: Advantage Plan

Ease the financial burden while healing

Fortunately, we can help with unexpected expenses

Every year, more and more people are being diagnosed with cancer. Treatment of cancer can lead to unexpected expenses that create an additional financial burden. Cancer insurance helps fill in the gaps that medical insurance doesn't cover. Benefits are paid directly to the employee and may be used for any purpose - such as travel to treatment centers, medical co-pays, deductibles and experimental treatment, as well as everyday expenses like groceries, rent and ongoing household bills.

See next page for a schedule of paid benefits and monthly rates.

Enroll today

During this enrollment, you can elect coverage for you and your family:

- · Convenient payroll deductions
- Portable
- · Guarantee Issue: no health question asked at enrollment
- Pre-existing Condition Limitation 3 month look back period, 12 month exclusion period for new enrollees (Does not apply for those transferring coverage)
- Waiver of Premium if you become disabled due to cancer for 90 days,
 premiums will be waived thereinafter so long as you continue to be disabled

Benefits Claim Example

Kidney Cancer Diagnosis and Treatment		
COVERED EVENTS	Benefit Paid	
Cancer Screening Benefit	\$50	
Cancer Screening Follow Up	\$100	
Cancer Initial Diagnosis	\$2,500	
Second Surgical Opinion	\$250	
Hospital Confinement (3 days)	\$300	
Kidney Removal Surgery	\$1,800	
Medical Imaging	\$1,000	
Anesthesia	\$450	
Radiation Therapy (30 treatments)	\$3,000	
2 Months of Anti-Nausea Medication	\$300	
Home Health Care (20 visits)	\$1,500	
Transportation for two travelers:120 miles round-trip (12 trips at \$0.50/mile)	\$720	
Attending Doctor (3 days)	\$120	
TOTAL BENEFIT PAID UNDER POLICY	\$12,090	



Guardian Group Plan ID# 551891

DID YOU KNOW?

2/3 of the cost

of cancer is non-medical1

\$1,266

is the monthly average out-of-pocket cost for cancer²

5% increase

In cancer costs every year³

62% of bankruptcies

are the result of medical causes despite 76% of those claiming bankruptcy had medical insurance⁴

1 www.cdc.gov/nchs/data/nhis/earlyrelease/ emergency_room_use_january-june_2011.pdf; 2 "Study Links Medical Costs and Personal Bankruptcy," Bloomberg BusinessWeek, June 4, 2009

3 Duke University Medical Center, 2011 http://clearhealthcosts.com/tag/dukeuniversity-medical-center

Annual Cancer Screening For Covered Employees and Family Members

This plan pays you \$50 once per calendar year per covered individual. See schedule for a list of covered procedures.

COVERED EVENTS	ADVANTAGE PLAN	
Prevention & Non-Invasive Cancer Related Events		
Cancer Screening Benefit	\$50 per insured per year	
Cancer Screening Benefit	Includes a \$100 cancer screening follow up benefit	
	\$2,500 Employee	
Initial Diagnosis of Cancer	\$2,500 Spouse	
	\$3,750 Child	
Treatment Benefits		
Radiation/Chemotherapy	Actual Costs up to \$100 per day	
Blood, Plasma, Platelets	Actual Costs up to \$300 per day	
Experimental Treatment	\$100 per day, \$1,000 per month	
Surgical Benefit	Schedule amount up to \$2,000	
Second Surgical Opinion	\$250 per surgical procedure	
Anesthesia	25% of surgery benefit	
	Bone Marrow: \$15,000	
Bone Marrow/Stem Cell	Stem Cell: \$15,000,	
	50% for second transplant. \$1,000 for donor	
Immunotherapy	\$500 per month; \$2,500 lifetime max	
Hormone Therapy	\$25 per treatment up to 12 treatments per year	
Outpatient Surgical Center	\$350 per day, 3 days per procedure	
Hospital Confinement Benefits		
Hospital Confinement	\$100 per day first 30 days	
Extended Hospital Confinement	\$200 per day for 31st day thereafter per confinement	
Haspital Intensive Care	\$400/day first 30 days,	
Hospital Intensive Care	\$600/day for 31st day thereafter	
Government or Charity Hospital	\$300 per day in lieu of all other benefits	
Inpatient Special Nursing	\$150/day up to 30 days per year	
Attending Physician	\$40 per day while hospital confined; limit 75 visits	
Extended Care Facility	\$100 per day; up to 90 days per year	
Home Health Care	\$75 per day, up to 30 visits per year	
Lodging and Transportation Bene	efits	
Ambulance/Air Ambulance	\$500/trip, limit 2 trips per hospital confinement /	
Ambulance/All Ambulance	\$1,500 per trip, limit 2 trips per hospital confinement	
Transportation/Companion	\$0.50 per mile up to \$1,000 per round trip/equal benefit	
Transportation	for companion	
Outpatient and Family Member	\$75/down to 00 down nor year	
Lodging	\$75/day, up to 90 days per year	
Miscellaneous Benefits		
Hospice	\$100 per day, up to 100 days lifetime max	
Physical or Speech Therapy	\$25 per visit, up to 4 visits per month; \$4,000 lifetime	
Prosthesis	Surgically Implanted: \$2,000 per device; \$4,000 lifetime	
	Non-Surgically: \$200 per device; \$400 lifetime	
Chia Canaar	Biopsy Only: \$100, Reconstructive Surgery: \$250,	
Skin Cancer	Excision of a skin cancer: \$375, with flap or graft: \$600	
Madical Incomis		
Medical Imaging	\$500 per image up to 2 per year	
Anti-Nausea Medication	\$50 per day up to \$150 per month	
Reconstructive Surgery	Breast TRAM: \$2,000, Breast reconstruction: \$500, Breast Symmetry: \$250, Facial reconstruction: \$500	
Waiver of Premium	Included	

TIER	MONTHLY RATES
Employee	\$12.90
Employee & Spouse	\$20.30
Employee & Child(ren)	\$15.20
Family	\$22.60

INITIAL DIAGNOSIS BENEFIT

This one-time benefit pays \$2,500 for the first time diagnosis of internal cancer, other than carcinoma-in-situ, while covered under this plan.

SPECIFIED DISEASE BENEFIT

For Employees & Covered Family Members

The benefits of this plan will also pay if a covered person is diagnosed with one of the following Specified Diseases while coverage is in force.

Addison's Disease, ALS, Brucellosis, Cerebrospinal Meningitis, Cystic Fibrosis, Diphtheria, Encephalitis, Hansen's Disease, Hepatitis (Chronic B or Chronic C with liver failure), Legionnaire's Disease, Lyme Disease, Multiple Sclerosis, Muscular Dystrophy, Myasthenia Gravis, Osteomyelitis, Poliomyelitis, Primary Biliary Cirrhosis, Primary Sclerosing Cholangitis, Rabies, Reye's Syndrome, Rocky Mountain Spotted Fever, Scarlet Fever, Sickle Cell Anemia, Systemic Lupus Erythematosus, Tetanus, Thallasemia, Tuberculosis, Tularemia, Typhoid Fever

Only one specified disease from this list may be claimed under this plan.