



Ease the financial burden while healing

Fortunately, we can help with unexpected expenses

Every year, more and more people are being diagnosed with cancer.¹ 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 thereafter so long as you continue to be disabled

Benefits Claim Example

Kidney Cancer Diagnosis and Treatment	
COVERED EVENTS	Benefit Paid
Cancer Screening Benefit	\$100
Cancer Screening Follow Up	\$100
Second Surgical Opinion	\$300
Hospital Confinement (3 days)	\$1,200
Kidney Removal Surgery	\$3,000
Medical Imaging (2 images)	\$400
Anesthesia	\$750
Radiation Therapy	\$10,000
2 Months of Anti-Nausea Medication	\$500
Home Health Care (20 visits)	\$2,000
Transportation for two travelers:120 miles round-trip (12 trips at \$0.50/mile)	\$720
Attending Doctor (3 days)	\$75
TOTAL BENEFIT PAID UNDER POLICY	\$20,145

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/duke-university-medical-center

Annual Cancer Screening For Covered Employees and Family Members

This plan pays you \$100 once per calendar year per covered individual. See schedule for a list of covered procedures

COVERED EVENTS	Premier Plan 1
Prevention & Non-Invasive Cancer Related Events	
Cancer Screening Benefit	\$100/insured/year Includes a \$100 cancer screening follow up benefit
Treatment Benefits	
Radiation/Chemotherapy	Actual Costs up to \$10,000 per year
Blood, Plasma, Platelets	Actual Costs up to \$10,000 per year
Experimental Treatment	\$200 per day up to \$2,400 per month
Surgical Benefit	Schedule amount up to \$5,500
Second Surgical Opinion	\$300 per surgical procedure
Anesthesia	25% of surgery benefit
Bone Marrow/Stem Cell	Bone Marrow: \$10,000, Stem Cell: \$2,500, 50% for second transplant. \$1,500 for donor
Immunotherapy	\$500 per month
Hormone Therapy	\$50 per treatment up to 12 treatments per year
Outpatient Surgical Center	\$350 per day, 3 days per procedure
Hospital Confinement Benefits	
Hospital Confinement	\$400 per day first 30 days
Extended Hospital Confinement	\$800 per day for 31 st day thereafter
Hospital Intensive Care	\$600/day first 30 days, \$800/day for 31 st day thereafter
Government or Charity Hospital	\$400 per day in lieu of all other benefits
Inpatient Special Nursing	\$150/day
Attending Physician	\$25 per day while hospital confined
Extended Care Facility	\$150 per day
Home Health Care	\$100 per day
Lodging and Transportation Benefits	
Ambulance	\$250 per trip, limit 2 trips per hospital confinement
Transportation/Companion Transportation	\$0.50 per mile up to \$1,500 per round trip/equal benefit for companion
Outpatient and Family Member Lodging	\$100/day
Miscellaneous Benefits	
Hospice	\$100 per day
Physical or Speech Therapy	\$50 per visit up to 4 visits per month
Prosthesis	Surgically implanted \$3,000 per device, \$6,000 lifetime Non-surgical \$300/device, \$600 lifetime
Skin Cancer	Biopsy Only: \$100, Reconstructive Surgery: \$250, Excision of a skin cancer: \$375, with flap or graft: \$600
Medical Imaging	\$200 per image up to 2 per year
Anti-Nausea Medication	\$50 per day up to \$250 per month
Reproductive Benefit	\$1500 egg harvesting, \$500 egg or sperm storage
Reconstructive Surgery	Breast TRAM: \$3,000, Breast reconstruction: \$700, Breast Symmetry: \$350, Facial reconstruction: \$700
Waiver of Premium	Included

Tier	Plan 1
Employee	\$21.64
Employee & Spouse	\$34.56
Employee & Child(ren)	\$23.04
Family	\$35.96

Specified Disease

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, Thalassemia, Tuberculosis, Tularemia, Typhoid Fever

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