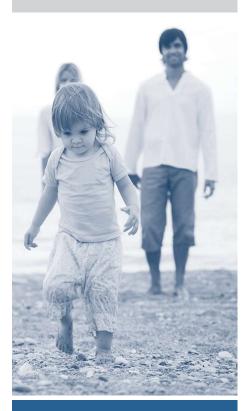
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Cancer Insurance Level 2 Benefits

BENEFIT DESCRIPTION

Cancer insurance helps provide financial protection through a variety of benefits. These benefits are not only for you but also for your covered family members.



For more information, talk with your benefits counselor.

Ambulance	. \$100 per trip
Anesthesia Administered during a surgical procedure for cancer treatment General anesthesia. Local anesthesia.	
Anti-nausea medication Doctor-prescribed medication for radiation or chemotherapy [\$200 max. per calendar year.	
Blood/plasma/platelets/immunoglobulins A transfusion required during cancer treatment [\$5000 calendar year max.]	. \$150 per day
Bone marrow or peripheral stem cell transplant Transplant you receive in connection with cancer treatment [max. of two bone marrow transplant benefits per lifetime]	. \$10,000 per lifetime
Companion transportation	. \$0.40 per mile
Experimental treatment. Hospital, medical or surgical care for cancer [\$10,000 lifetime max.]	. \$300 per day
Hair/external breast/voice box prosthesis Prosthesis needed as a direct result of cancer	. \$200 per calendar year
Home health care services Examples include physical therapy, occupational therapy, speech therapy and audiology; prosthesis and orthopedic appliances; rental or purchase of durable medical equipment [up to 30 days per calendar year or twice the number of days hospital confined, whichever is greater]	. \$300 per day
Hospice (initial or daily care) An initial, one-time benefit and a daily benefit for treatment [\$15,000 lifetime max. for both) Daily hospice care	
Hospital confinement Hospital stay (including intensive care) required for cancer treatment 30 days or less	. \$100 per day

Hotel/motel expenses when being treated for cancer more than 50 miles from home

Services while hospital confined other than those regularly furnished by the hospital

A surgical implant needed because of cancer surgery [payable one per site, \$4,000 lifetime max.]

Surgery at an outpatient center for cancer treatment [\$750 per calendar year.]

Outpatient surgical center \$250 per pay

Private full-time nursing services \$100 per day

Prosthetic device/artificial limb \$2,000 per device or limb

[70-day calendar year max.]

BENEFIT AMOUNT

BENEFIT DESCRIPTION BENEFIT AMOUNT

Radiation/chemotherapy [max. of \$5,000 per calendar year]	\$150 per day
Reconstructive surgery A surgery to reconstruct anatomic defects that result from cancer treatment [up to \$1500 per procedure, including general anesthesia]	\$30 per surgical unit
Second medical opinion	\$300 per malignant condition
Skilled nursing care facility	\$300 per day
Supportive or protective care drugs and colony stimulating factors Doctor-prescribed drugs to enhance or modify radiation/chemotherapy treatments [up to \$800 calendar year max.]	\$100 per day
Surgical procedures	\$30 per surgical unit
Transportation Travel expenses when being treated for cancer more than 50 miles from home [up to700 miles round trip]	\$0.40 per mile
Waiver of premium No premiums due if the named insured is disabled longer than 90 consecutive days	Is available



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THIS POLICY PROVIDES LIMITED BENEFITS.

The policy has limitations and exclusions that may affect benefits payable. Most benefits require that a charge be incurred. Coverage may vary by state and may not be available in all states. For cost and complete details, see your benefits counselor.

This chart is not complete without form GCAN-C-TX.