sync

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
- 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	\$100	
Cancer Screening Follow Up	\$100	
Cancer Initial Diagnosis	\$4,000	
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	¢700	
(12 trips at \$0.50/mile)	\$720	
Attending Doctor (3 days)	\$75	
TOTAL BENEFIT PAID UNDER POLICY	\$24,145	

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/dukeuniversity-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		
Prevention & Non-Invasive Can	cer Related Events		
\$100/insured/year			
Cancer Screening Benefit	Includes a \$100 cancer screening follow up benefit		
	\$4,000 Employee		
Initial Diagnosis of Cancer	\$4,000 Spouse		
	\$4,000 Child		
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: \$10,000, Stem Cell: \$2,500, 50% for		
Bone Marrow/Stem Cell	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 Extended Care Facility	\$25 per day while hospital confined		
Home Health Care	\$150 per day		
	\$100 per day		
Lodging and Transportation Ben			
Ambulance	\$250 per trip, limit 2 trips per hospital confinement		
Transportation/Companion	\$0.50 per mile up to \$1,500 per round trip/equal benefit		
Transportation	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		
	\$500/day up to 45 days for each period of confinement.		
ICU Rider (Plan 2 Only)	ICU confinement rider is paid for treatment of any		
	sickness or injury other than internal Cancer		
Waiver of Premium	Included		

Tier	Plan1	Plan 2
Employee	\$25.16	\$28.40
Employee & Spouse	\$40.32	\$46.24
Employee & Child(ren)	\$27.20	\$31.12
Family	\$42.36	\$48.96

INITIAL DIAGNOSIS BENEFIT

This one-time benefit pays \$4,000 for the first time diagnosis of internal cancer, other than carcinoma-in-situ, while covered under this plan.

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, Thallasemia, Tuberculosis, Tularemia, Typhoid Fever

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

Guardian Cancer Insurance is underwritten by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage.