Plan Description

The Aflac Group Critical Illness Plan provides cash benefits when an insured person is diagnosed with a covered critical illness-and these benefits are paid directly to your employees (unless otherwise assigned). The plan provides a lump-sum benefit to help with out-of-pocket medical expenses and the living expenses that can accompany a covered critical illness. It is also H.S.A.-compatible.

(spe	Features and Plan Provisions (specific benefit provisions may vary by situs state)								
Benefit Amounts	See Premium Rates and Plan Benefits for available options								
Spouse Coverage	Up to 100% of the face amount elected by the employee								
Child Coverage	Up to 50% of the face amount elected by the employee								
Guaranteed Issue Amounts	Employee: Up to \$50,000 Spouse: Up to \$50,000 Participation Requirement: 0%								
Requirement for Group Billing	To establish group billing, 25 distinct individuals must be paying premiums								
Payment Method	Payroll Deducted								
Pre-existing Condition Exclusion	None								
Waiting Period	There is no waiting period								
Benefit Reductions	No reduction at any age								
Rate Guarantee	3 Year(s)								
Portability/Continuation	Evergreen								
Rate Type	Issue Age								
Eligibility	Work Week Hours:Employee must work at least 16 hours per weekLength of Employment:No minimum requirement; set by employer								
Waiver of Premium	After 90 days of total disability for an employee due to a covered critical illness, we will fully waive all premiums for the duration specified in the certificate								
Successor Insured Waiver of Premium	Not Included								
Separation Period - Additional Diagnosis/ Reoccurrence	Additional Diagnosis:6 consecutive monthsReoccurrence:6 consecutive months								
Successor Insured	Included								
Issue Ages	Employee: 18+ Spouse: 18+ Children: Under age 26								
Termination Age	None								
Certificate Effective Date	Coverage is effective on the billing effective date								

Plan Benefits

(Benefit provisions may vary by situs state)

Base Benefits							
Heart Attack (Myocardial Infarction)	100%						
Sudden Cardiac Arrest	100%						
Coronary Artery Bypass Surgery	100%						
Major Organ Transplant*	100%						
Bone Marrow Transplant (Stem Cell Transplant)	100%						
Kidney Failure (End-Stage Renal Failure)	100%						
Stroke (Ischemic or Hemorrhagic)	100%						
Type I Diabetes	100%						
Coma	100%						
Loss of Hearing	100%						
Loss of Sight	100%						
Loss of Speech	100%						
Paralysis	100%						

*25% of this benefit is payable for Insureds placed on a transplant list for a major organ transplant

Cancer Benefits				
Cancer (Internal or Invasive)	100%			
Non-Invasive Cancer	25%			
Skin Cancer	\$1000 per calendar year			
Metastatic Cancer	25%			
Health Screening Benefit				
Health Screening (payable for employee and spouse only)	\$50			
Health Screening (payable for dependent children)	100% of the Health Screening Amount			
Payable per calendar year	1			

Acc	ident Benefits*
Coma	100%
Loss of Hearing	100%
Loss of Sight	100%
Loss of Speech	100%
Paralysis	100%
Severe Burns	100%

*Benefits are payable for loss due to, caused by, and attributed to, a covered accident

Childhood Conditions Rider									
Cystic Fibrosis, Cerebral Palsy, Cleft Lip or Cleft Palate, Down Syndrome, Phenylalanine Hydroxylase Deficiency Disease (PKU), Spina Bifida	50% of employee benefit								
Autism Spectrum Disorder	\$3,000								
Progressive Diseases Rider									
Advanced Alzheimer's Disease	100%								
Advanced Parkinson's Disease	100%								
Amyotrophic Lateral Sclerosis (ALS)	100%								
Sustained Multiple Sclerosis (MS)	100%								
Chronic Obstructive Pulmonary Disease (COPD)	25%								
Crohn's Disease	25%								
Specified Diseases Rider									
Tier 1 – Adrenal Hypofunction (Addison's Disease), Cerebrospinal Meningitis, Diphtheria, Encephalitis, Huntington's Chorea, Legionnaire's Disease, Lyme Disease, Malaria, Muscular Dystrophy, Myasthenia Gravis, Necrotizing Fasciitis, Osteomyelitis, Poliomyelitis (Polio), Rabies, Sickle Cell Anemia, Systemic Lupus, Systemic Sclerosis (Scleroderma), Tetanus, Tuberculosis	25%								

Tier 2 Human Corona Virus Only	
Hospitalization: 4+days	10%
Hospitalization: 10+days	25%
Hospitalization: Intensive Care Unit (ICU)	40%

Please request a sample policy for full benefit provisions and descriptions.

Premium Rates

Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
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18-29	\$2.95	\$5.90	\$8.85	\$11.80	\$14.75	\$17.70	\$20.65	\$23.60	\$26.56	\$29.51
30-39	\$4.94	\$9.87	\$14.81	\$19.74	\$24.68	\$29.61	\$34.55	\$39.49	\$44.42	\$49.36
40-49	\$8.94	\$17.87	\$26.81	\$35.75	\$44.69	\$53.62	\$62.56	\$71.50	\$80.44	\$89.37
50-59	\$15.01	\$30.02	\$45.04	\$60.05	\$75.06	\$90.07	\$105.09	\$120.10	\$135.11	\$150.12
60+	\$26.80	\$53.60	\$80.41	\$107.21	\$134.01	\$160.81	\$187.62	\$214.42	\$241.22	\$268.02

Spouse No	on-Tobacc	co Monthly	Premiums	•						
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$2.95	\$5.90	\$8.85	\$11.80	\$14.75	\$17.70	\$20.65	\$23.60	\$26.56	\$29.51
30-39	\$4.94	\$9.87	\$14.81	\$19.74	\$24.68	\$29.61	\$34.55	\$39.49	\$44.42	\$49.36
40-49	\$8.94	\$17.87	\$26.81	\$35.75	\$44.69	\$53.62	\$62.56	\$71.50	\$80.44	\$89.37
50-59	\$15.01	\$30.02	\$45.04	\$60.05	\$75.06	\$90.07	\$105.09	\$120.10	\$135.11	\$150.12
60+	\$26.80	\$53.60	\$80.41	\$107.21	\$134.01	\$160.81	\$187.62	\$214.42	\$241.22	\$268.02

Employee Tobacco Monthly Premiums

Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$3.73	\$7.45	\$11.18	\$14.90	\$18.63	\$22.36	\$26.08	\$29.81	\$33.53	\$37.26
30-39	\$7.42	\$14.85	\$22.27	\$29.69	\$37.12	\$44.54	\$51.97	\$59.39	\$66.81	\$74.24
40-49	\$14.53	\$29.05	\$43.58	\$58.10	\$72.63	\$87.15	\$101.68	\$116.20	\$130.73	\$145.25
50-59	\$27.37	\$54.74	\$82.11	\$109.49	\$136.86	\$164.23	\$191.60	\$218.97	\$246.34	\$273.71
60+	\$48.29	\$96.58	\$144.86	\$193.15	\$241.44	\$289.73	\$338.01	\$386.30	\$434.59	\$482.88

Spouse Tobacco Monthly Premiums

Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$3.73	\$7.45	\$11.18	\$14.90	\$18.63	\$22.36	\$26.08	\$29.81	\$33.53	\$37.26
30-39	\$7.42	\$14.85	\$22.27	\$29.69	\$37.12	\$44.54	\$51.97	\$59.39	\$66.81	\$74.24
40-49	\$14.53	\$29.05	\$43.58	\$58.10	\$72.63	\$87.15	\$101.68	\$116.20	\$130.73	\$145.25
50-59	\$27.37	\$54.74	\$82.11	\$109.49	\$136.86	\$164.23	\$191.60	\$218.97	\$246.34	\$273.71
60+	\$48.29	\$96.58	\$144.86	\$193.15	\$241.44	\$289.73	\$338.01	\$386.30	\$434.59	\$482.88

Benefits Summary

(Benefit provisions vary by situs state)

Where applicable, covered conditions must be caused by underlying diseases as defined in the plan. Benefits will be based on the face amount in effect on the critical illness date of diagnosis.

Initial Diagnosis

An insured may receive up to 100% of his face amount upon the diagnosis of a covered critical illness.

Additional Diagnosis

Once benefits have been paid for a covered critical illness, we will pay benefits for each different critical illness when the date of diagnosis is separated by at least 6 consecutive months.

Reoccurrence

Once benefits have been paid for a covered critical illness, benefits are payable for that same critical illness when the date of diagnosis is separated by at least 6 consecutive months.

Health Screening Benefit

The Health Screening Benefit is payable once per calendar year for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations. See Master Policy for the full list of covered health screening tests.

Accident Benefits

Accident Benefits are payable if the loss is solely due to, caused by, and attributed to, a covered accident.

Childhood Conditions Rider

Benefits are payable if a dependent child is diagnosed with one of the conditions listed. Autism benefit is not payable if the DSM severity level specifier is less than Level 1. For any subsequent childhood condition to be covered, the two dates of diagnosis must satisfy the separation period for Reoccurrence.

Progressive Diseases Rider

One benefit per disease is payable if an insured is diagnosed with one of the diseases listed. For any subsequent progressive disease to be payable, the two dates of diagnosis must satisfy the separation period for Reoccurrence.

Specified Diseases Rider

Tier 1 - Benefits are payable if an insured is diagnosed with one of the diseases listed. For any subsequent Tier 1 specified disease to be payable, the two dates of diagnosis for Tier 1 diseases must satisfy the separation period for Reoccurrence.

Tier 2 – Benefits are payable if an insured is diagnosed with one of the diseases listed and such diagnosis results in either a period of Hospital confinement or a period of Hospital Intensive Care Unit confinement as a direct result of the disease. For any subsequent Tier 2 specified disease to be payable, the two dates of diagnosis for Tier 2 diseases must satisfy the separation period for Reoccurrence.

Limitations & Exclusions

Exclusions

We will not pay for loss due to:

- Self-Inflicted Injuries injuring or attempting to injure oneself intentionally or taking action that causes oneself to become injured
- Suicide committing or attempting to commit suicide, while sane or insane
- · Illegal Acts participating or attempting to participate in an illegal activity, or working at an illegal job
- Participation in Aggressive Conflict of any kind, including:
- War (declared or undeclared) or military conflicts
- Insurrection or riot
- · Civil commotion or civil state of belligerence
- · Illegal substance abuse, which includes the following:
 - Abuse of legally-obtained prescription medication
 - Illegal use of non-prescription drugs

Diagnosis must be made and treatment must be received in the United States or its territories.

All benefits under the plan, including benefits for diagnoses, treatment, confinement and covered tests, are payable only while coverage is in force.

All limitations and exclusions that apply to the critical illness plan also apply to the riders unless amended by the riders.

Occupational Diseases Rider Exclusions

The benefits specified in this rider are subject to all of the exclusions in the policy as well as the following additional exclusions:

We will not pay an occupational disease benefit if the insured:

- Becomes HIV positive or hepatitis positive as a result of a transmission other than an occupational-specific covered injury,
- Tested HIV positive or hepatitis positive prior to the occupational-specific covered Injury, unless the insured
 previously tested positive on a screening test and subsequently tested negative for that disease prior to the date
 of the occupational-specific covered injury, or