



Specified Disease Insurance

can pay money directly to you when you're diagnosed with certain serious illnesses.

How does it work?

If you're diagnosed with an illness that is covered by this insurance, you can receive a benefit payment in one lump sum. You can use the money however you want.

Why is this coverage so valuable?

- The money can help you pay out-of-pocket medical expenses, like co-pays and deductibles.
- You can use this coverage more than once.
Even after you receive a payout for one illness, you're still covered for the remaining conditions or categories. If you have a different condition later, you can receive another benefit.

What's covered?

Category 1

- Heart attack
- Stroke
- Coronary artery disease (pays at 25% of lump sum benefit)

Category 2

- Benign brain tumor
- Major organ failure
- End stage renal (kidney) failure

Category 3

- Cancer coverage

Coverage is also included for:

- Cancer
- Carcinoma in situ — pays 25% of your coverage amount. (Carcinoma in situ is defined as cancer that involves only cells in the tissue in which it began and that has not spread to nearby tissues.)
- Skin cancer — pays a \$250 benefit per covered person per lifetime. Not part of the 100% payout.

Why should I buy coverage now?

- It's more affordable when you buy it through your employer.
- The cost is conveniently deducted from your paycheck.
- You can keep coverage if you leave the company or retire. You'll be billed at home.

What else is included?

A Wellness Benefit

Every year, each family member who has Specified Disease coverage can also receive \$50 for getting a health screening test, such as:

- Blood tests
- Chest X-rays
- Stress tests
- Colonoscopies
- Mammograms
- And other tests listed in your policy

Please refer to the policy for complete details about these covered conditions. Coverage may vary by state. See exclusions and limitations.

Effective date of coverage: Coverage becomes effective on the first day of the month in which payroll deductions begin. Employees must be legally authorized to work in the United States and actively working at a U.S. location to receive coverage. Spouses and dependent children must reside in the United States to receive coverage.

Specified Disease Insurance

Who can get coverage?

If you didn't get coverage for you or your spouse when you were first eligible, both of you will have to answer medical questions now. If you're newly eligible, you and your spouse are guaranteed coverage now with no medical questions. If you already have coverage, you and your spouse can increase it up to the maximum available, but will be subject to medical questions. To purchase spouse coverage you must purchase coverage for yourself. New coverage may be subject to pre-existing condition limitations.

You:	Choose \$5,000, \$10,000, \$15,000 or \$20,000 of coverage. If you do not sign up now but decide to apply later, you will have to answer a few medical questions.
Your spouse:	Spouses from age 17 to 64 can get \$5,000 or \$10,000 of coverage during this enrollment as long as you have purchased coverage for yourself. Spouse coverage is guaranteed up to \$10,000, if applicable.
Your children:	Dependent children from newborns to age 26 are automatically covered at no extra cost. Their coverage amount is 50% of yours. They are covered for all the same illnesses.

premium for \$10,000 of coverage		
Age	Non-tobacco	Tobacco
0-24	\$5.60	\$8.60
25-29	\$6.40	\$10.60
30-34	\$8.40	\$15.10
35-39	\$11.40	\$21.90
40-44	\$16.30	\$32.00
45-49	\$22.80	\$45.40
50-54	\$30.90	\$61.70
55-59	\$42.20	\$81.80
60-64	\$57.70	\$105.20
65-69	\$75.30	\$127.50
70-99	\$94.50	\$144.30

Cost of coverage example

Example: The cost of \$10,000 of coverage for a 50 year old non-tobacco user would be \$30.90 + \$1.60 = \$32.50.

Wellness benefit premium of \$1.60 is in addition to the base premium
Actual billed amounts may vary. For illustrative purposes only.

Exclusions and limitations

This policy provides limited benefit health insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services.

Individuals must have comprehensive medical coverage to be eligible for this specified disease insurance.

Pre-existing Condition Limitation

Unum will not pay benefits for a claim that is caused by, contributed to by or occurs as a result of a Pre-existing Condition for which the Date of Diagnosis is in the first 6 months after the Insured's coverage effective date. Pre-existing Condition means a Sickness or Injury for which the Insured received medical treatment, consultation, care or services, including diagnostic measures during the 6 months just prior to the Insured's coverage effective date or effective date of a change in coverage. This limitation will not apply to any Date of Diagnosis for specified disease or Date of Diagnosis for skin cancer that occurs more than six months after the insured's coverage effective date.

Exclusions and limitations

Unum will not pay benefits for a claim that is caused by, contributed to by or occurs as a result of:

- Participating or attempting to participate in a felony;
- Committing or trying to commit suicide or injuring oneself intentionally; or
- Participating in war or any act of war, whether declared or undeclared; or
- Being addicted to intoxicants or narcotics. This would not include physician-prescribed medication, taken in the prescribed dosage

Termination of employee coverage

If you choose to cancel your coverage under the policy, your coverage ends on the first of the month following the date you provide notification to your employer. Otherwise, your coverage under the policy ends on the earliest of the:

- Date this policy is canceled;
- Date you are no longer in an eligible group;
- Date your eligible group is no longer covered;
- Date of your death;
- Last day of the period for which you made any required contributions; or
- Last day you are in active employment. However, as long as premium is paid as required, coverage will continue if you elect to continue coverage under the portability provision or in accordance with the Layoff and Leave of Absence provisions of this policy.

Coverage on your dependent children ends on the earliest of the date your coverage under this policy ends or the date a dependent child no longer meets the definition of dependent children.

Unum will provide coverage for a payable claim which occurs while you are covered under this policy.

THIS INSURANCE PROVIDES LIMITED BENEFITS

This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and imitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form CI-1 or contact your Unum representative.

Underwritten by:

First Unum Life Insurance Company, Garden City, New York

© 2019 Unum Group. All rights reserved. Unum is a registered trademark and marketing brand of Unum Group and its insuring subsidiaries.