



Maryland

Critical Illness Cash Plan

Cash payments to help your family breathe easier in case of a serious illness

Plan basics

What it is

- This plan pays cash to you or your designee if a covered person is diagnosed with a covered critical illness
- You can use the cash however you want
- This is not a comprehensive health insurance plan

Who's eligible to apply

- Anyone age 0 – 69 (children must apply with a parent; child-only coverage is not available)
- U.S. Citizens or U.S. Permanent Resident Card (green card) holders who have lived in the U.S. for a minimum of one year

Options with this plan

Choose who the plan covers

- ✔ **Important to know:**
 - Domestic partners are defined as partners of the same or opposite sex.

Individual – One adult
 Couple – Individual and spouse
 Single Parent – One parent and all children
 Family – Two parents and all children

Choose the type of coverage you would like

Vascular, cancer, and other illnesses
 Vascular and other illnesses
 Cancer only

Choose your benefit amount

- ✔ **Important to know:**
 - The benefit amount is per covered person

- For each type of coverage selected, choose any amount between \$5,000 and \$50,000 in \$5,000 increments, up to a total of \$50,000 coverage
 The benefit amount is per covered adult. The benefit amount for children is 20% of that amount. For example, if you choose \$10,000 coverage for yourself, each covered child would have \$2,000 coverage.

Choose to enhance your coverage

- ✔ **Important to know:**
 - There is an additional cost for this benefit

Return of Premium with Cash Value option – If you continue to pay your premiums (with no lapse in coverage) and no claims have been paid or incurred, you'll receive a full refund of all premiums paid on the policy's 20-year anniversary; cash values begin at the end of the fifth policy year (upon lapse, proof of death or request to surrender the policy, you will receive the cash value benefit if no claim for critical illness benefit has been paid or incurred)

Critical Illness Cash Plan

How your plan pays

	Covered illness	Benefit amount
Coverage for vascular conditions Important to know: > The plan pays benefits for a vascular condition only if the policy option you select includes vascular coverage	Heart attack	100%
	Heart transplant	100%
	Stroke	100%
	Coronary artery bypass surgery	25%
Coverage for cancer Important to know: > The plan pays benefits for cancer only if the policy option you select includes cancer coverage	First diagnosis of invasive cancer or malignant melanoma (other skin cancers aren't covered)	100%
	Carcinoma In-situ (a cancer that hasn't spread)	25%
Coverage for other illnesses Important to know: > The plan pays benefits for other illnesses only if the policy option you select includes coverage for other illnesses	Major organ transplant	100%
	End-stage renal failure	100%
	Loss of speech or vision	100%
	Coma	100%
	Permanent paralysis due to accidental injury	100%
Total benefit payments available	For each category – vascular, cancer, and other illnesses – the plan will pay up to 100% of your benefit amount over the lifetime of the policy; for example, if you receive a 25% benefit for bypass surgery, the remaining 75% is payable if you're diagnosed with another covered vascular condition later	



When your coverage starts

Generally, your coverage starts on the day you sign the application. In some cases, if medical records are requested, it may be later.

Waiting periods

In the first 30 days after coverage starts, the plan will not provide any benefits for critical illness. During the first 12 months of coverage, the plan will not pay claims on any pre-existing conditions; pre-existing condition limitations do not apply to newborn children or to newly adopted children.

Plan premiums

With this plan, you have a choice of how often you pay your premium:

- Monthly
- Semi-annually
- Annually

In addition, you can choose from these payment methods:

- Bank draft
- Credit card
- Direct bill/check (annual billing only)

You will receive a full refund of any premiums paid, if you cancel your policy within the first 30 days of coverage.

Your premium can be changed if we change the premium on all policies in your premium class (state and age group). Also, your premium could change if you move to another state.

As long as you continue to pay premiums, you can keep this policy for the primary insured's lifetime. At the age of 70, the premium remains the same but the plan benefit reduces to 50 percent.

Benefit limitations and exclusions

The following will apply to the policy for each covered person:

General

- When a named critical illness is contributed to or caused by another named critical illness, we will pay only one benefit. The benefit paid will be the larger. If the benefits are equal, the policyholder may choose the benefit to be paid.
- No benefits of the policy or riders attached to it will be paid for loss that is contributed to, caused by, or occurs during:
 - Any intentionally self-inflicted injury
 - Suicide, or attempted suicide, while sane or insane
 - Active duty military service
 - Psychosis
- We reserve the right to obtain valid proof upon the filing of a claim.

Vascular

- All vascular benefits end when we have paid 100% of the covered person's benefit amount for any of the following:
 - Heart attack;
 - Heart transplant; or
 - Stroke.
- When we pay a benefit for coronary artery bypass surgery, the covered person's benefit amount for other vascular benefits is reduced by 25%.

Cancer

- A tentative, clinical or pathological diagnosis of invasive cancer during the 30-day period after his or her effective date is not covered.
- Benefits for invasive cancer or carcinoma in situ will not be payable based on a tentative diagnosis.
- When we pay a benefit for carcinoma in situ, his or her face amount for invasive cancer is reduced by 25%.
- All cancer benefits end when we have paid 100% of the covered person's benefit amount for invasive cancer.



All other critical illness benefits

All other critical illness benefits end when we have paid 100% of the covered person's benefit amount for any of the following:

- Major organ transplant;
- End-stage renal disease;
- Loss of speech or vision;
- Coma; or
- Permanent paralysis.

Details about the optional Return of Premium and Cash Value Benefit

On the 20-year anniversary of the policy, we will refund all premiums paid for the policy - including premiums for this optional benefit – if:

- You've paid premiums for the policy and optional benefits on time for the entire 20-year period
- The policy and this optional benefit are in force
- And no claims have been paid or incurred under the policy

After we pay a Return of Premium Benefit, you can keep the policy. However, the Return of Premium Benefit ends, so you stop paying a premium for this optional benefit.

Cash value is based on a percentage of total premiums paid for the policy and any optional benefits during the first 20 years the policy is in force. Cash value for the policy begins at the end of the fifth policy year. Cash value ends at the 20-year anniversary of the policy when we pay the Return of Premium Benefit.

This optional benefit terminates upon payment of a claim. If a claim is paid under this policy:

- No refund of premium or cash value is due
- You no longer need to pay premiums for this optional benefit



Applications are subject to approval. Waiting periods, limitations and exclusions apply. This summary gives you a general idea of covered benefits for this plan. Please refer to the policy for the actual terms and conditions. In the event there are discrepancies with the information provided in this document, the terms and conditions of the policy will govern. The benefits and riders offered are supplemental and not intended to cover all medical expenses. The total amount of coverage available from Kanawha Insurance Company is limited.

Underwritten by Kanawha Insurance Company - a member of the Humana family of companies.

Policy # 70620 MD 001, 70620 MD 002 or 70620 MD 003 and 70623