

Critical illness insurance

Critical illness insurance may help you cover expenses not covered by your health insurance.

It's a cash payment you receive if you ever experience a serious illness like cancer, a heart attack, or a stroke, giving you the financial support to focus on recovery.

Who is it for?

Critical illness insurance is a supplemental policy for people who already have health insurance. It provides you with an additional payment to cover expenses like deductibles, treatments, and living costs.

What does it cover?

Critical illnesses include strokes, heart attacks, Parkinson's disease and cancer. Our policies can cover over 30 major illnesses, helping you stay financially stable by paying you a lump sum if you're diagnosed with one of them.

Why should I consider it?

Health coverage is becoming more expensive, with higher co-pays, premiums, and deductibles. Critical illness insurance is an affordable way to supplement and pay for additional expenses that your health insurance doesn't cover. Our policies typically provide payments for the first and second time you're diagnosed with a covered illness.

Plus, critical illness insurance is portable and payments are made directly to you.

You will receive these benefits if you meet the conditions listed in the policy.



Critical costs

John is hospitalized after a heart attack, and has to cover the cost of five days as an inpatient.

Average heart attack hospitalization expense: \$53,000

Average Major Medical deductible: **\$1,500**

Major Medical covers 80% of the cost after the deductible is met, but John's still responsible for 20%: **\$10,300**.

Total out-of-pocket amount for John (deductible + coinsurance): \$11,800.

John has a **\$10,000** Guardian Critical Illness policy, which covers the majority of these out-of-pocket expenses.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.





Your critical illness coverage

CRITICAL ILLNESS

Benefit Amount(s)	Employee may choose a lump sum l \$5,000 increments.	Employee may choose a lump sum benefit of \$5,000 to \$30,000 in \$5,000 increments.				
CONDITIONS						
Cancer	Ist OCCURRENCE	2nd OCCURRENCE				
Invasive Cancer	100%	0%				
Carcinoma In Situ	30%	0%				
Benign Brain Tumor	75%	0%				
Skin Cancer	\$250 per lifetime	Not Covered				
Vascular						
Heart Attack	100%	0%				
Stroke	100%	0%				
Heart Failure	100%	0%				
Coronary Arteriosclerosis	30%	0%				
Other						
Organ Failure	100%	0%				
Kidney Failure	100%	0%				
ADDITIONAL CONDITIONS	I st OCCURR	ENCE ONLY				
Addison's Disease	30%					
ALS (Lou Gehrig's Disease)	100%					
Alzheimer's Disease	50	50%				
Coma	100%					
Huntington's Disease	30	0%				
Loss of Hearing	100%					
Loss of Sight	10	100%				
Loss of Speech	100%					
Multiple Sclerosis	30%					
Parkinson's Disease	10	0%				
Permanent Paralysis	50% for I limb,	100% for 2 limbs				
Severe Burns	10	0%				
Childhood Conditions	Ist OCCURR	RENCE ONLY				
Cerebral Palsy	10	0%				
Cleft Lip/Palate	10	0%				
Club Foot	10	0%				
Cystic Fibrosis	10	0%				
Down's Syndrome	10	0%				
Muscular Dystrophy	10	0%				
Spina Bifida	10	0%				
Type I Diabetes	10	0%				





Your critical illness coverage

	CRITICAL ILLNESS			
Spouse/Domestic Partner Benefit	May choose a lump sum benefit of \$2,500 to \$15,000 in \$2,500 increments up to 50% of the employee's lump sum benefit.			
Child Benefit- children age Birth to 26 years	25% of employee's lump sum benefit			
Benefit Reductions: Benefits are reduced by a certain percentage as an employee ages	50% at age 70			
Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period.	We Guarantee Issue up to: e \$30,000 For a spouse: \$15,000 For a child: All Amounts Health questions are required if the elected amount exceeds the Guarantee Issue.			
Portability: Allows you to take your Critical Illness coverage with you if you terminate employment.	Included			
Pre-Existing Condition Limitation: A pre-existing condition includes any condition for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	Not Applicable			
WELLNESS BENEFIT				
Employee Per Year Limit	\$75			
Spouse Per Year Limit	\$75			
Child Per Year Limit	\$75			

Condition Definitions

- Stroke: Stroke must be severe enough to cause neurological deficits at least 30 days after the event.
- Heart Failure: An insured must be placed on an organ transplant list in order to be eligible for the Heart failure benefits.
- Coronary Arteriosclerosis: Coronary Arteriosclerosis must be severe enough to require a coronary artery bypass graft.
- Organ Failure: Organ failure includes both lungs, liver, pancreas or bone marrow and requires the insured to be placed on an organ transplant list.
- Kidney Failure: An insured must be placed on an organ transplant list in order to be eligible for the Kidney failure benefits.

Critical Illness Cost Illustration

To determine the most appropriate level of coverage, you should consider your current basic monthly expenses and expected financial needs during a Critical Illness.

Your premium will not increase as you age.

Spouse/DP coverage premium is based on Employee age

Child cost is included with employee election.

Monthly Premiums Displayed Election Cost Per Age Bracket

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Benefit Amount	Issue Age	< 30	30-39	40-49	50-59	60-69	70+ [†]
Employee							
\$5,000	Non-tobacco	\$3.10	\$4.10	\$7.20	\$13.00	\$20.35	\$41.05
	Tobacco	\$3.85	\$5.50	\$11.30	\$23.05	\$39.05	\$74.05
\$10,000	Non-tobacco	\$6.20	\$8.20	\$14.40	\$26.00	\$40.70	\$82.10
	Tobacco	\$7.70	\$11.00	\$22.60	\$46.10	\$78.10	\$148.10
\$15,000	Non-tobacco	\$9.30	\$12.30	\$21.60	\$39.00	\$61.05	\$123.15
	Tobacco	\$11.55	\$16.50	\$33.90	\$69.15	\$117.15	\$222.15
\$20,000	Non-tobacco	\$12.40	\$16.40	\$28.80	\$52.00	\$81.40	\$164.20
	Tobacco	\$15.40	\$22.00	\$45.20	\$92.20	\$156.20	\$296.20
\$25,000	Non-tobacco	\$15.50	\$20.50	\$36.00	\$65.00	\$101.75	\$205.25
	Tobacco	\$19.25	\$27.50	\$56.50	\$115.25	\$195.25	\$370.25
\$30,000	Non-tobacco	\$18.60	\$24.60	\$43.20	\$78.00	\$122.10	\$246.30
******	Tobacco	\$23.10	\$33.00	\$67.80	\$138.30	\$234.30	\$444.30
Benefit Amount Up 1	o 50% of Employee Amount	to a Maximum of	\$15,000				
Spouse							
\$2,500	Non-tobacco	\$1.55	\$2.05	\$3.60	\$6.50	\$10.18	\$20.53
	Tobacco	\$1.93	\$2.75	\$5.65	\$11.53	\$19.52	\$37.03
\$5,000	Non-tobacco	\$3.10	\$4.10	\$7.20	\$13.00	\$20.35	\$41.05
	Tobacco	\$3.85	\$5.50	\$11.30	\$23.05	\$39.05	\$74.05
\$7,500	Non-tobacco	\$4.65	\$6.15	\$10.80	\$19.50	\$30.53	\$61.58
	Tobacco	\$5.78	\$8.25	\$16.95	\$34.58	\$58.58	\$111.08
\$10,000	Non-tobacco	\$6.20	\$8.20	\$14.40	\$26.00	\$40.70	\$82.10
	Tobacco	\$7.70	\$11.00	\$22.60	\$46.10	\$78.10	\$148.10
\$12,500	Non-tobacco	\$7.75	\$10.25	\$18.00	\$32.50	\$50.88	\$102.63
	Tobacco	\$9.63	\$13.75	\$28.25	\$57.63	\$97.63	\$185.13
\$15,000	Non-tobacco	\$9.30	\$12.30	\$21.60	\$39.00	\$61.05	\$123.15
\$15,000	14011 tobacco	7	7	7	402.00	Ψ01.05	¥

[†]Benefit reductions may apply. See plan details.

EXCLUSIONS AND LIMITATIONS

A SUMMARY OF PLAN LIMITATIONS AND EXCLUSIONS FOR CRITICAL ILLNESS:

We will not pay benefits for the First Occurrence of a Critical Illness if it occurs less than 3 months after the First Occurrence of a related Critical Illness for which this Plan paid benefits. By related we mean either: (a) both Critical Illnesses are contained within the Cancer Related Conditions category; or (b) both Critical Illnesses are contained within the Vascular Conditions category. We will not pay benefits for a Second occurrence (recurrence) of a Critical Illness unless the Covered Person has not exhibited symptoms or received care or treatment for that Critical Illness for at least 12 months in a row prior to the recurrence. For purposes of this exclusion, care or treatment does not include: (1) preventive medications in the absence of disease; and (2) routine scheduled follow-up visits to a Doctor.

We do not pay benefits for claims relating to a covered person: taking part in any war or act of war (including service in the armed forces) committing a felony or taking part in any riot or other civil disorder or intentionally injuring themselves or attempting suicide while sane or insane.

Employees must be legally working in the United States in order to be eligible for coverage. Underwriting must approve coverage for employees on temporary assignment: (a) exceeding I year; or (b) in an area under travel warning by the

US Department of State, subject to state specific variations.

Guardian's Critical Illness plan does not provide comprehensive medical coverage. It is a basic or limited benefit and is not intended to cover all medical expenses. It does not provide "basic hospital," "basic medical," or "medical" insurance as defined by the New York State Insurance Department.

Health questions are required on late enrollees. This coverage will not be effective until approved by a Guardian underwriter.

This policy will not pay for a diagnosis of a listed critical illness that is made before the insured's Critical Illness effective date with Guardian.

The policy has exclusions and limitations that may impact the eligibility for or entitlement to benefits under each covered condition. See your certificate booklet for a full listing of exclusions & limitations...

If Critical Illness insurance premium is paid for on a pre tax basis, the benefit may be taxable. Please contact your tax or legal advisor regarding the tax treatment of your policy benefits..

Contract # GP-I-CI-I4

Guardian's Critical Illness Insurance is underwritten and issued 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. This policy provides limited benefits 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.

Policy Form # GP-1-LAH-12R; GP-1-CI-14