Financial Protection
Critical Illness
Protection Plan
Groups 51+

Give employees more security from the high cost of a major illness.

Supplement your health plan with extra protection.
While a health plan is essential, it may only go so far. Adding the Critical Illness Protection Plan helps give your employees more financial security should a qualifying illness happen.

Heart disease, stroke and cancer are among the leading critical illnesses in the U.S. Americans suffer 1.5 million heart attacks and strokes each year.¹
About 1.6 million new cancer cases are expected to be diagnosed in the U.S. this year.²

Millions of employees are now in high-deductible health plans, making them more susceptible to high out-of-pocket costs.³

Many employees are not prepared for high, unexpected costs. Almost two in three American workers say they have less than $1,000 on hand to pay the out-of-pocket expenses of unexpected, serious illness or emergency.⁴

Plan Highlights
This is insurance that pays a lump-sum benefit directly to the member upon diagnosis of a covered critical illness.

Our plan covers:
• 18 base and additional conditions for employee, spouse and child(ren).
• Child-only conditions.
• Reoccurrence and additional occurrence benefits.
See inside for coverage details.

Conditions and coverage may vary by state and group size.
THIS POLICY PROVIDES LIMITED BENEFITS.

Funding Options and Participation Requirements

Non-contributory:
- Fully paid by the employer.
- 100 percent participation of eligible employees required.

Voluntary:
- Fully paid by the employee.
- 20 percent participation of eligible employees required (51–2,999 employees).
- 10 percent participation of eligible employees required (3,000+ employees).

Base / Buy-up:
- Employer pays 100 percent of Base plan; Employee pays 100 percent of Buy-up plan.
- 100 percent participation of eligible employees required on Base plan.
- 20 percent participation of eligible employees required on Buy-up plan (51–2,999 employees).
- 10 percent participation of eligible employees required on Buy-up plan (3,000+ employees).

Covered Conditions
Conditions and coverage may vary by state and group size. Contact your UnitedHealthcare representative for more information.

Base Conditions
- Benign Brain Tumor
- Cancer — Invasive
- Cancer — Non-Invasive (25% partial benefit)
- Chronic Renal Failure
- Coma
- Coronary Artery Disease (25% partial benefit)
- Heart Attack
- Heart Failure
- Major Organ Failure
- Permanent Paralysis
- Ruptured Aneurysm
- Stroke

Additional Conditions
- Advanced Alzheimer’s
- Advanced Multiple Sclerosis
- Advanced Parkinson’s
- Amyotrophic Lateral Sclerosis (ALS)
- Complete Blindness
- Complete Loss of Hearing

Child-only Conditions
- Cerebral Palsy
- Cleft Lip/Palate
- Cystic Fibrosis
- Down Syndrome
- Muscular Dystrophy
- Spina Bifida

Benefit is 25 percent of employee coverage. Child-only coverage is included with Employee coverage. One covered condition per child. Coverage is from birth to age 26.

All benefits are payable at 100% unless otherwise noted as a partial benefit.

Voluntary Plan Options

<table>
<thead>
<tr>
<th>Plan Options for groups 3,000+</th>
<th>Plan options for groups 101–2,999</th>
<th>Plan options for groups 51–100</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>A</td>
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</tr>
<tr>
<td>Spouse</td>
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<td>B</td>
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<tr>
<td>Child(ren)</td>
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</tbody>
</table>

Base / Buy-up Plan Options

Employer-paid Base of $5,000

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</tbody>
</table>

Employer-paid Base of $10,000

<table>
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* If employee chooses plan option B, C or D for themselves, they may also choose from lower coverage options for Spouse and Child(ren). For example, under the voluntary option, an employee purchasing plan option C ($30,000) may also choose plan option A or B for their spouse ($5,000 or $10,000) or child ($2,500 or $5,000).

Amounts may vary based on underwriting review.
How the plan works.

This plan pays a benefit directly to the member after diagnosis of a covered critical illness. They can use the money any way they choose. They can save it or use it to help pay for:

- Mortgage or rent payments
- Groceries
- Out-of-pocket health plan costs (deductibles, coinsurance, etc.)
- Prescriptions
- Treatment by a specialist
- Transportation to and from treatment

Let’s look at an example.

Sharon signed up for the voluntary plan and has Plan A. During the plan year, she is diagnosed with invasive cancer. Six months later she also has a stroke.

Sharon’s coverage provides the following benefits:

<table>
<thead>
<tr>
<th>Base Plan coverage (Plan A)</th>
<th>Condition</th>
<th>Payout percentage</th>
<th>Payment amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Invasive cancer</td>
<td>100%</td>
<td>$10,000</td>
<td></td>
</tr>
<tr>
<td>Stroke</td>
<td>100%</td>
<td>$10,000</td>
<td></td>
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</tbody>
</table>

Total cash benefit paid to Sharon: **$20,000**

Bundle with our health plans for savings and simplicity.

It’s easy to add a specialty plan and get these advantages at no extra cost.

✔ **See savings.**
   You may qualify for significant savings by bundling your plans. Bundle more, save more. You may also save time with more efficiency.

✔ **Enjoy simplicity.**
   Get one account team, administration process and website and customer service line.

✔ **Inspire healthier.**
   Bridge2Health® uses health plan and specialty plan data to identify and empower your employees with support and resources that can help them make informed decisions and take control of their health.
Plan Features*

Group size
• 51 or more eligible employees.

Eligibility
• Must be actively at work a minimum of 20 hours per week.

Guaranteed Issue
• Guaranteed issue offers for employee, spouse and child(ren).

Pre-existing Condition Exclusion
• 6/12 standard.
• Other options available with underwriting approval.

Rating Basis
• Issue age — premiums will be level throughout coverage.
• Attained age — premiums will increase as member ages.

Portability
• Coverage portable at employer’s group rates.
• See certificate of coverage for additional information.

Rate Guarantee
• Three years (3,000+ employees).
• Two years (51–2,999 employees).

Optional Benefits*

Reoccurrence Benefit
This benefit is equal to 100 percent of the coverage amount if the:
• Covered person is diagnosed with a second occurrence of a covered critical illness for which a benefit was previously paid.
• Diagnosis is made 12 months or more following the initial covered critical illness diagnosis.
• Covered person has not received treatment for the covered critical illness during this 12-month period. Maintenance medication or therapy is not considered to be treatment.

One reoccurrence benefit is payable for each of the covered base conditions. The benefit does not apply to additional or child-only covered conditions.

Additional Occurrence Benefit
This benefit is equal to 100 percent of the coverage amount. The covered person can receive benefits for different covered critical illnesses if the dates of diagnosis for each illness are separated by at least 90 days.

Optional Riders*

Wellness Rider
Provides $50 or $100 benefit per plan year to employee and an insured spouse for designated health screening tests.

The employer may select other wellness coverage options.

Occupational HIV Rider
Provides a one-time, lump-sum benefit equal to 100 percent of the coverage amount.
• Benefit is paid to a covered person who sustains an injury in the performance of occupational duties that results in acquiring or testing positive for HIV.
• Benefit is available to health care or other related professions and is elected at the employer/case level.

Customer Support
Customers receive dedicated support, including enrollment planning and training, online employee enrollment (when available) and employee benefit and enrollment education.

Online enrollment is available in most instances but is subject to employer size and coverage purchased.

*Eligibility and plan features may vary by state and group size.

To learn more about this plan and the value of bundling, contact your UnitedHealthcare representative or visit uhc.com.