



Critical Care Protector

Combined Insurance's Critical Care Protector — a good decision

This policy provides cash benefits which can be used to help pay the out-of-pocket costs associated with the major illnesses listed below.

The Critical Care Protector benefits are payable directly to you (or someone you designate), regardless of any other insurance coverage you may have. This policy can provide benefits that can be used any way you choose. The coverage is portable, which means if you change employers you can keep your coverage without interruption.

Below is a summary of the benefits provided by the Critical Care Protector.

SECTION ONE*

We will pay you 100% of the total benefit amount you select, up to \$100,000, upon diagnosis of one of the following conditions:

Critical Care Protector with Cancer Benefit (Policy No. 46534)

- Heart Disease (Heart Attack or Coronary Artery Disease)
- Kidney Failure
- Multiple Sclerosis
- Organ Transplant (heart, kidney, liver, lung, pancreas)
- Stroke
- Life Threatening Cancer



Critical Care Protector (Policy No. 46535)

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- Multiple Sclerosis
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- Stroke

SECTION TWO

Critical Care Protector with Cancer Benefit (Policy No. 46534)

We will pay a one-time benefit during the lifetime of the policy of \$250 if you are diagnosed with either:

- Stage A Prostate Cancer
- Carcinoma In-Situ
- Skin Cancer

* Section One benefit is payable once during the lifetime of the policy, and you can use the money in any way you choose. This policy terminates upon payment of the Section One benefit.

Heart disease and stroke are among the 5 most expensive disease to treat in the U.S.¹





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Critical Care Protector Limitations and Exclusions

Exclusions

No benefit is payable for loss due to:

- Intentionally self-inflicted injury.

Renewability

Your right to renew this policy is guaranteed until payment of the Section One benefit, at which time the policy terminates. Benefits for loss under both Section One and Section Two of your policy are payable only once during the lifetime of the policy.

Your policy will remain in force after the payment of the benefit for a Section Two loss. However, your policy will terminate immediately upon payment of the Section One benefit.

We can only change the premium for your policy if we change everyone in your class (for example: everyone in your state).

Pre-existing Conditions

Loss caused by a Pre-existing Condition is not covered unless the loss is incurred after 6 months from the issue date of this policy.

Pre-existing Condition means a condition for which you received medical advice or treatment which was recommended by, or received from, a Physician within 6 months preceding the issue date of the policy.

Waiting Period Conditions

Loss caused by a Waiting Period Condition will not be covered. Any premium paid for the policy will be refunded and the policy will be void from its beginning.

Waiting Period Condition means a condition for which you received medical advice or treatment from a Physician within 30 days after the issue date.

This is very important

If a covered individual is a Medicaid recipient, policy benefits may be assigned and payable to your state Medicaid agency. Also, benefit payments you receive may count as income for Medicaid eligibility purposes.

Important Notice

This is a supplement to health insurance and is not a substitute for Major Medical or other minimum essential coverage.

Notice of Claim / Proof of Loss

Written proof of loss must be given to Combined within 90 days after such loss. If it was not reasonably possible to give written proof within 90 days, the proof required must be given no later than 1 year from the time specified unless the claimant was legally incapacitated.

This document contains a brief description of policy Form No. 46534 and Form No. 46535. See the policy for complete details of policy benefits, exclusions and limitations. Products may vary by State and are subject to availability and qualifications.