

Specified Disease \$20,000 Plan with Skin Cancer

With Skin Cancer Benefit

Specified Disease coverage provides the added layer of security you want and need when illness occurs— a lump-sum cash benefit to help pay for unexpected costs. You decide how to use the benefits: Help pay for out-of-pocket medical costs, prescriptions, hospital bills, X-rays, daily expenses, rent, food, or transportation.

Key features:

- Cash benefit is paid directly to you in a lump-sum, tax-free payment.
- Health screenings, such as a lipid panel or fasting glucose test.
- You can take your coverage with you even if you leave your employer.¹
- Benefits for covered spouse are 50% and children are 50% of the amount shown below, except for Health Screening and Skin Cancer

Cancer Benefits

Benefit	Amount
Invasive Cancer	\$20,000
Non-Invasive Cancer	\$5,000

Vascular Benefits

Benefit	Amount
Heart Attack (Myocardial Infarction)	\$20,000
Stroke	\$20,000
Coronary Artery Disease	\$5,000

Other Specified Disease Benefits

Benefit	Amount
Major Organ Failure	\$20,000
End Stage Renal Disease	\$20,000

Other key features

Benefit	Amount
Health screening benefit: per member, per calendar year	\$50, per covered person, per calendar year
Skin Cancer benefit, per member, once per lifetime	\$250
Additional occurrence of multiple conditions	Covered with no separation period
Pre-Existing Conditions Limitation	None
Lifetime Benefit Maximum - Employee	Lesser of \$500,000 or 2500%
Lifetime Benefit Maximum - Spouse	Lesser of \$500,000 or 2500%
Lifetime Benefit Maximum - Children	Lesser of \$500,000 or 2500%

IMPORTANT: This is a fixed indemnity policy, NOT health insurance. This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying for the cost of your care: the payment you get isn't based on the size of your medical bill; there might be a limit on how much this policy will pay each year; this policy isn't a substitute for comprehensive health insurance; since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance. Looking for comprehensive health insurance? Visit HealthCare.gov or call 1-800-318-2596 (TTY:1-855-889-4325) to find health coverage options. To find out if you get health insurance through your job, or a family member's job, contact the employer. Questions about this policy? For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments." If you have this policy through your job, or a family member's job, contact the employer.

How to file claims

You can file claims online at <https://supplemental-health.Anthem.com> or you can complete a claim form and file it by mail or fax. Contact us at (800) 604-5379 with any questions.

Monthly Cost		Uni-Tobacco Rates			
Employee Age	Employee	Employee + Spouse	Employee + Dependent Child(ren)	Employee + Family	
18-24	\$2.92	\$4.57	\$4.96	\$6.95	
25-29	\$4.05	\$6.22	\$6.10	\$8.61	
30-34	\$4.90	\$7.55	\$6.95	\$9.94	
35-39	\$6.54	\$10.01	\$8.59	\$12.40	
40-44	\$9.21	\$14.13	\$11.26	\$16.52	
45-49	\$13.68	\$21.32	\$15.73	\$23.71	
50-54	\$18.84	\$29.80	\$20.88	\$32.19	
55-59	\$25.41	\$40.75	\$27.45	\$43.13	
60-64	\$34.99	\$56.36	\$37.04	\$58.75	
65-69	\$47.26	\$76.40	\$49.31	\$78.79	
70-74	\$64.29	\$104.00	\$66.34	\$106.39	
75-79	\$86.66	\$138.52	\$88.70	\$140.90	
80-84	\$99.60	\$158.82	\$101.65	\$161.20	

Exclusions

A benefit is not payable for any covered illness that results from or is caused by:

- Suicide, attempted suicide or intentionally self-inflicted injury, whether sane or insane
- War or act of war, declared or undeclared
- A covered person's participation in a felony, riot or insurrection
- A covered person's engaging in any illegal occupation
- A covered person's service in the armed forces or units auxiliary to them

All exclusions may not be applicable, or may be adjusted, as required by state regulations in the situs state of a group.

General Limitations

Benefits under the policy are not payable for any covered illness:

- Diagnosed prior to the effective date of insurance for a covered person (except for newborn children)
- Diagnosed during an applicable Benefit Separation Period
- For which a covered person has already received a benefit payment under the policy, unless the covered illness is included in a Recurrence provision
- For which a covered person has already received a benefit payment under the Recurrence provision

In addition, benefits are not payable for any specified disease not included as a covered illness in a covered person's certificate.

THIS POLICY PROVIDES LIMITED BENEFITS FOR SPECIFIED DISEASES ONLY.

This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

In New York: 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.

¹ Insured will only be able to continue coverage while the policy is in-force with the policyholder and the insured must pay premium if electing to continue coverage after leaving employer.

² Covered accidents or illness must occur after the effective date of coverage.

Group Critical Illness benefits provided by policy form SCI B XX18 P or state equivalent.

This is not a contract; it is a partial listing of benefits and services. All covered service are subject to the conditions, limitations, exclusions, terms and provisions of your policy. In the event of a discrepancy between the information in this summary and the policy, your policy will prevail. If you have any questions, please contact your Human Resources/Benefits manager. If you have any questions, please contact your Human Resources/Benefits manager.

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