

## GET THE FACTS - QUICK REFERENCE GUIDE

# CRITICAL ILLNESS INSURANCE PLANS

As an important voluntary coverage, Critical Illness Insurance helps round out an employee benefit package while helping employees protect savings during treatment and recovery from a critical condition.

Here are the facts on the Critical Illness Plans from **The Hartford's Employee Choice Benefits<sup>SM</sup>**.

PLAN DESIGN & BENEFIT INFORMATION		OPTIONS AVAILABLE		
<b>Eligibility Basics</b>	<ul style="list-style-type: none"> <li>Employee (EE) -                             <ul style="list-style-type: none"> <li>- 4-49 lives: 30 hours/week; Under age 80</li> <li>- 50+ lives: 20 hours/week; Under age 80</li> </ul> </li> <li>Spouse (SP) - Under age 80</li> <li>Child(ren) (CH) - Under age 26</li> </ul>	<ul style="list-style-type: none"> <li>Work hours can be set by the employer; Minimum is 16/week</li> <li>Term age range is 65-85</li> <li>CH term age range is 18-26</li> </ul>		
<b>Funding Options</b>	100% EE-paid (voluntary)	<ul style="list-style-type: none"> <li>100% ER-paid (non-contributory)</li> <li>ER/EE cost sharing contingent on group size (contributory)</li> </ul>		
<b>Coverage Amounts</b>	<ul style="list-style-type: none"> <li>EE - \$5K to \$30K (contingent on group size)</li> <li>SP - 50% of EE amount</li> <li>CH - \$5K</li> </ul>	Higher amounts available, contingent on group size and participation		
<b>Coverage Election</b>	<ul style="list-style-type: none"> <li>EE Only</li> <li>EE &amp; SP</li> <li>EE &amp; CH</li> <li>EE &amp; Family</li> </ul>			
UNDERWRITING GUIDELINES		OPTIONS AVAILABLE		
<b>Preferred Info to Quote</b>	<ul style="list-style-type: none"> <li>Group - Name, state, SIC, effective date, current participation</li> <li>Employee census not required</li> </ul>			
<b>GI &amp; SI Amounts</b>	<ul style="list-style-type: none"> <li>4-24 lives: GI up to \$10K; SI over \$10K</li> <li>25 - 499 lives: GI up to \$20K; SI over \$20K</li> <li>500+ lives: GI up to \$30K; SI over \$30K</li> </ul>	For larger groups, alternate amounts available subject to UW discretion		
<b>Participation</b>	100% EE-paid <ul style="list-style-type: none"> <li>- 4-49 lives: 4 enrolled lives</li> <li>- 50+ lives: 10 enrolled lives</li> </ul>	<ul style="list-style-type: none"> <li>100% ER-paid - 100% of eligible lives</li> <li>ER/EE cost sharing - contingent on group size</li> </ul>		
<b>Rate Structure</b>	<ul style="list-style-type: none"> <li>Attained age</li> <li>Tobacco distinct and unisex</li> <li>EE age used for SP</li> <li>5-year age bands</li> </ul>	<ul style="list-style-type: none"> <li>Issue age rates</li> <li>Uni-tobacco rates</li> <li>10-year or custom age bands</li> </ul>		
<b>Rate Guarantee Period</b>	<ul style="list-style-type: none"> <li>2 years</li> <li>For groups with 50+ lives and multi-year rate guarantees:               <ul style="list-style-type: none"> <li>- A group must achieve 10% participation to secure the rate guarantee</li> <li>- If 10% participation is not achieved, the rate guarantee may revert to 1 year</li> </ul> </li> </ul>	1 and 3 years		
<b>Renewability</b>	Annually renewable at the discretion of the group			
STANDARD PRODUCT PROVISIONS		OPTIONS AVAILABLE		
<b>Benefits</b>	Lump sum cash payment upon diagnosis for covered illnesses			
<b>Covered Illnesses</b>	<table border="0"> <tr> <td> <b>Cancer</b>            Invasive Cancer* (100%)            Non-Invasive Cancer (25%)            Benign Brain Tumor* (100%)  <b>Vascular</b>            Heart Attack* (100%)            Heart Transplant* (100%)            Coronary Artery Bypass (25%)            Angioplasty/Stent (25%)            Stroke* (100%)            Aneurysm (25%)         </td> <td> <b>Other</b>            Major Organ Transplant* (100%)            End Stage Renal Failure (100%)            Bone Marrow Transplant (25%)            Coma* (100%)            Paralysis (100%)            Loss of Vision (100%)            Loss of Hearing (100%)            Loss of Speech (100%)         </td> </tr> </table>	<b>Cancer</b> Invasive Cancer* (100%) Non-Invasive Cancer (25%) Benign Brain Tumor* (100%) <b>Vascular</b> Heart Attack* (100%) Heart Transplant* (100%) Coronary Artery Bypass (25%) Angioplasty/Stent (25%) Stroke* (100%) Aneurysm (25%)	<b>Other</b> Major Organ Transplant* (100%) End Stage Renal Failure (100%) Bone Marrow Transplant (25%) Coma* (100%) Paralysis (100%) Loss of Vision (100%) Loss of Hearing (100%) Loss of Speech (100%)	<ul style="list-style-type: none"> <li>Cancer can be removed, ex. in presence of a stand-alone cancer policy also offered by a group</li> <li>For larger groups:               <ul style="list-style-type: none"> <li>- Individual illnesses can be removed</li> <li>- Benefit amounts can be 10% - 100%</li> </ul> </li> </ul>
<b>Cancer</b> Invasive Cancer* (100%) Non-Invasive Cancer (25%) Benign Brain Tumor* (100%) <b>Vascular</b> Heart Attack* (100%) Heart Transplant* (100%) Coronary Artery Bypass (25%) Angioplasty/Stent (25%) Stroke* (100%) Aneurysm (25%)	<b>Other</b> Major Organ Transplant* (100%) End Stage Renal Failure (100%) Bone Marrow Transplant (25%) Coma* (100%) Paralysis (100%) Loss of Vision (100%) Loss of Hearing (100%) Loss of Speech (100%)			

continued



STANDARD PRODUCT PROVISIONS		OPTIONS AVAILABLE
<b>Benefit Separation Period</b>	<ul style="list-style-type: none"> <li>Different/Non-related illness - None</li> <li>Related illness - 30 days</li> </ul>	Periods of up to 12 months available for related illnesses
<b>Coverage Maximum</b>	<ul style="list-style-type: none"> <li>EE &amp; SP - 500% of coverage amount</li> <li>CH - 300% of coverage amount</li> </ul>	Max can be 100% - 500%
<b>Recurrence Benefit</b>	<ul style="list-style-type: none"> <li>100% for specific illnesses (*)</li> <li>12 month separation period</li> </ul>	Benefit can be 25% - 100%
<b>Expanded Cancer Benefits</b>	<ul style="list-style-type: none"> <li>Second Opinion Cancer - \$500 each diagnosis</li> <li>Prosthesis/Wig - \$500 one-time</li> </ul>	<ul style="list-style-type: none"> <li>\$250 benefit</li> <li>Can be removed from plan</li> </ul>
<b>Benefit Age Reduction</b>	50% at age 70	For larger groups, 50% @ 75 available
<b>Pre-Ex</b>	<ul style="list-style-type: none"> <li>12/12</li> <li>Some states may require a specific pre-ex</li> </ul>	For larger groups, alternate pre-ex available subject to UW discretion
<b>Portability</b>	Included; Extended continuation may be offered instead of portability in some states	Can be removed from plan
<b>Ability Assist® EAP<sup>1</sup></b>	24/7/365 access to help for financial, legal or emotional issues	
<b>HealthChampion<sup>SM1</sup></b>	Administrative and clinical support following serious illness or injury	
OPTIONAL PRODUCT PROVISIONS		OPTIONS AVAILABLE
<b>Transitional Care Benefits Package</b>	<ul style="list-style-type: none"> <li>Rehabilitation Facility - \$50 per day for up to 10 days</li> <li>Home Health Care - \$50 per day for up to 10 days</li> <li>Physical Therapy - \$50 per visits for up to 10 visits</li> </ul>	For larger groups, alternate amounts and # of days/visits available
<b>Travel Benefits Package</b>	<ul style="list-style-type: none"> <li>Transportation - \$100 per round trip for up to 5 trips</li> <li>Lodging - \$100 per night for up to 5 nights</li> </ul>	For larger groups, alternate amounts and # of trips/nights available
<b>Child-Specified Benefits Package</b>	100% of coverage amount for covered child(ren) for the following: <ul style="list-style-type: none"> <li>Cerebral Palsy</li> <li>Muscular Dystrophy</li> <li>Congenital Heart Disease</li> <li>Spina Bifida</li> <li>Cystic Fibrosis</li> </ul>	For larger groups: <ul style="list-style-type: none"> <li>Individual illnesses can be removed</li> <li>Benefit can be 10% - 100%</li> </ul>
<b>Neurological Benefits Package</b>	100% of coverage amount for the following: <ul style="list-style-type: none"> <li>Advanced Multiple Sclerosis</li> <li>ALS (Lou Gehrig's)</li> <li>Advanced Parkinson's</li> </ul>	For larger groups: <ul style="list-style-type: none"> <li>Individual illnesses can be removed</li> <li>Benefit amounts can be 10% - 100%</li> </ul>
<b>Occ HIV/Hep B&amp;C Benefit</b>	100% of coverage amount for the EE	Benefit can be 10% - 100%
<b>Health Screening Benefit</b>	\$50 per year	Benefit can be \$25 - \$100
ENROLLMENT		OPTIONS AVAILABLE
<b>Enrollment Type</b>	Annual open enrollment	<ul style="list-style-type: none"> <li>One-time open enrollment</li> <li>Traditional (EOI) Enrollment</li> </ul>

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**THIS POLICY PROVIDES LIMITED BENEFITS FOR SPECIFIED DISEASE ONLY.**

This limited health 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.

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