Plan-at-a-Glance | Pennsylvania
Critical Illness Insurance — INDIVIDUAL

Supplement your medical coverage and help protect your family, lifestyle and finances.

Your Independence Blue Cross medical plan offers health care coverage you and your family rely on. Now you can supplement your benefits beyond medical with Critical Illness insurance.

A major health event like a heart attack or cancer can quickly throw an average family into a financial crisis. While health insurance will help cover medical expenses, you may not be prepared for other financial setbacks that can occur when you’re diagnosed with a critical illness. From lost income and medical deductibles to out-of-network office visits and uncovered treatments - these can all contribute to a financial hardship. Cash benefits from a Critical Illness insurance plan can help pay the expenses traditional health insurance doesn’t cover, enabling you to focus on recovery.

**Standard Features**

**Eligible Issue Ages:** 18 through 70. This policy is guaranteed renewable to age 75.

**Benefit Amount:** You choose an amount between $5,000 and $50,000, in $5,000 increments.

The Benefit Amount represents the cash payout you may receive upon diagnosis of a Critical Illness, as shown in the chart below.

**Coverage for the Whole Family**

- If you’re including your Spouse or Partner on your application, his or her Benefit Amount must match yours.
- Each Dependent Child is automatically covered with a $2,500 Benefit Amount — at no additional cost.

**What type of conditions does Critical Illness Insurance pay benefits for?**

<table>
<thead>
<tr>
<th>Critical Illness</th>
<th>% of Benefit Amount payable upon first diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Attack</td>
<td>100%</td>
</tr>
<tr>
<td>Stroke (CVA)</td>
<td>100%</td>
</tr>
<tr>
<td>Coronary Artery Disease</td>
<td>25%</td>
</tr>
<tr>
<td>Invasive Cancer (Sometimes referred to as infiltrating cancer)</td>
<td>100%</td>
</tr>
<tr>
<td>Carcinoma in Situ (Stage 0 and/or TisN0M0)</td>
<td>25%</td>
</tr>
<tr>
<td>Prostate Cancer</td>
<td>25%</td>
</tr>
<tr>
<td>Skin Cancer</td>
<td>5%</td>
</tr>
<tr>
<td>End Stage Renal Failure (Stage 5 Chronic Kidney Disease)</td>
<td>25%</td>
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<tr>
<td>Major Organ Failure</td>
<td>100%</td>
</tr>
</tbody>
</table>

See Limitations and Exclusions on next page for information on the Pre-Existing Condition Limitation and the Benefit Wait Periods.

**Re-Occurrence Benefit**

If you received a cash benefit payout for a Critical Illness, and are later diagnosed with a re-occurrence of that disease, you can receive another cash benefit equal to half of your previous payout, as long as the two diagnoses are at least 12 months apart (or 12 months treatment-free for Invasive Cancer). The Re-Occurrence Benefit is not available for Skin Cancer.

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Policy form series: LS-CI-0001
Subsequent Diagnosis of a Different Critical Illness

If you received a cash benefit payout for a Critical Illness, and are later diagnosed with a different Critical Illness, you can receive another cash benefit equal to the full Benefit Amount payable for the new disease if your diagnosis is at least six months after your diagnosis for the first disease. Subsequent diagnoses for different Critical Illnesses must be at least six months apart from one another.

Health Screening Benefit

Once per calendar year, each covered person can receive $50 for one of the wellness procedures listed below. The procedure must occur after a one-time 30 day Benefit Wait Period.

Covered Procedures: blood test for triglycerides; or Serum cholesterol test to determine level of HDL and LDL; or Cholesterol panel; or Fast blood glucose test; or HgA1C; or Carotid Doppler; or Doppler screening for abdominal aortic aneurysm; or Chest x-ray; or Stress test (bicycle or treadmill); or Echocardiogram; or Electrocardiogram; or Breast ultrasound; or Breast MRI; or Thermography; or Mammography; or CA 15-3 (blood test for breast cancer); or Pelvic exam; or Pap smear; or Thin Prep Pap; or CA 125 (blood test for ovarian cancer); or CA 19-9 (blood test for pancreatic cancer); or PSA (blood test for prostate cancer); or Biopsy for skin cancer; or CEA (blood test for colon cancer and cervical cancer); or Colonoscopy; or Virtual colonoscopy; or Flexible sigmoidoscopy; or Hemoccult stool analysis; or Fecal occult analysis; or Serum protein electrophoresis (blood test for Myeloma); or Bone marrow biopsy and aspiration.

Return of Premium Benefit

If you die while your policy is in force, 100% of all premiums (less any benefits paid) will be returned to your estate. The premium amount will be calculated without interest and after any pending claims have been settled.

Limitations and Exclusions

No Benefit Amount will be payable for or on account of: a Covered Person’s suicide or any attempt at suicide or intentionally self-inflicted injury or sickness; or a Covered Person’s commission of or attempt to commit an assault or felony; or a Covered Person’s engagement in an illegal occupation; or a Covered Person’s voluntary participation in any riot or civil insurrection; or any illness specifically excluded from the definition of any Critical Illness; or an act of war whether declared or undeclared while on active duty as a member of the armed forces of any nation; or balloon angioplasty, laser relief of an obstruction, and other intra-arterial procedure; or practicing or participating in any semiprofessional or professional competitive athletic contest for which compensation or remuneration is received; or medically related Critical Illness that are diagnosed within a 12 month period between each Diagnosis; or any loss sustained or contracted in consequence of the Insured’s being intoxicated, or under the influence of any narcotic unless administered on the advice of a physician.

Pre-Existing Condition Limitation

We will not pay a Benefit Amount for Diagnosis of a Critical Illness that:
- Is diagnosed within 12 months after the Policy Effective Date of coverage; and
- Is caused by, contributed by, or results from a Pre-Existing Condition.

Pre-Existing Condition means a sickness or injury for which medical advice or treatment was recommended by, or received from, a Physician within a 12 month period before the Policy Effective Date.

Benefit Wait Periods

No Benefit Amount will be payable during the first 30 days following the Policy Effective Date.

If the Diagnosis of a Critical Illness occurs during the Benefit Wait Period, you may cancel this Policy and all premium paid will be returned. Alternatively, you may choose to keep your Policy in effect in case of a future occurrence of a Critical Illness.

THIS IS A LIMITED BENEFIT POLICY.

For more information, contact your agent or visit us at YourLifeSecure.com

Independence Blue Cross is an independent licensee of the Blue Cross and Blue Shield Association. Critical Illness insurance is offered by LifeSecure Insurance Company, an independent company. This is not a Blue Cross product. Independence Blue Cross is acting solely as an agent for LifeSecure. LifeSecure is solely responsible for the administration of its product.

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