



# CRITICAL ILLNESS INSURANCE

Presented by



**WELLFLEET**  
WORKPLACE

A personalized guide to understanding your Critical Illness coverage



# CRITICAL ILLNESS INSURANCE BENEFIT SUMMARY

## What is Critical Illness Insurance?

This coverage pays a lump-sum benefit following the diagnosis of a critical illness, such as a heart attack or stroke. Critical Illness Insurance is supplemental coverage that can complement your health insurance and help cover your out-of-pocket expenses.

## Use your benefits any way you like.

Benefit proceeds can be used however you want, whether it's toward your mortgage, medical bills or student loans. It's up to you.

## Coverage highlights

- Select the coverage amount that fits your life
- Guaranteed issue coverage up to \$20,000
- Affordable premiums
- Simplified claims-filing
- No age-related benefit reductions

## How does the coverage work?

When you carry Critical Illness Insurance and have a covered event, simply file a Critical Illness claim with our Claims Care Team over the phone or via US mail. You'll be paid a total cash benefit based on:

- The benefit amount elected from the chart below,
- The diagnosed critical illness, and
- Whether it is an initial occurrence, a reoccurrence of the same critical illness or an occurrence of a different critical illness, up to the maximum payment.

There is no wait between initial occurrences and different critical illnesses. Reoccurrences of the same critical illness can be paid six months after the initial critical illness.

Coverage	Amount range	Maximum payout
Employee	\$10,000 or \$20,000	Unlimited
Spouse & Child(ren)	<ul style="list-style-type: none"><li>• <b>Premier 2:</b> 50% of employee benefit amount</li><li>• <b>Premier Plus 2 &amp; Premier Elite 2:</b> 100% of employee benefit amount</li></ul>	



CRITICAL ILLNESS PLAN BENEFITS	Premier 2	Premier Plus 2	Premier Elite 2
<b>Critical Illness Benefits</b>			
Heart Attack	100%	100%	100%
Stroke	100%	100%	100%
Major Organ Failure	100%	100%	100%
End Stage Renal Failure	100%	100%	100%
Benign Brain Tumor	100%	100%	100%
Coronary Artery Bypass Surgery	25%	25%	25%
<b>Cancer Benefits</b>			
Cancer	100%	100%	100%
Carcinoma in Situ	25%	25%	25%
Skin Cancer	-	-	5%
<b>Enhanced Package</b>			
Coma	100%	100%	100%
Paralysis	100%	100%	100%
Sudden Cardiac Arrest	-	-	25%
Angioplasty	-	-	10%
Loss of Hearing	100%	100%	100%
Loss of Sight	100%	100%	100%
<b>Progressive Disease Benefits</b>			
Parkinson's Disease	25%	25%	25%
Advanced Dementia	25%	25%	25%
Type 1 Diabetes	-	-	100%
Infectious Disease	-	-	10%
<b>Enhanced Cancer Rider</b>			
Cancer Treatments (up to 15 treatments per diagnosis)	-	-	\$600
Blood, Plasma, Platelets	-	-	\$300
Surgery			
Inpatient	-	-	\$600
Outpatient	-	-	\$800
Hospital Confinement (Up to 60 days)	-	-	\$200
Durable Goods and Equipment	-	-	\$600
Experimental Drug or Medical Service	-	-	\$500
Extended Care			
Facility (up to 60 days)	-	-	\$200
Home Health Care (up to 60 days)	-	-	\$200
NCI Evaluation or Consultation	-	-	\$500
<b>Optional Riders &amp; Benefits</b>			
Health Screening Benefits Rider (1 test per insured per benefit year)*	\$100	\$100	\$100

Examples of Eligible Screening Events			
Blood tests for triglycerides	Colonoscopy	Hepatitis B immunization	Sports physicals
Annual exam for adults	Bone marrow testing	HPV immunization	Stress test
Bone density screening	Chicken pox immunization	Mammography	Tetanus
Breast MRI	Fasting blood glucose test	Pap smear	Virtual colonoscopy
Carotid ultrasound	Flu vaccination	Pneumonia immunization	Well child visits
Concussion baseline testing	Dermatological screenings for skin cancer	Genetic screening for medical diagnosis & treatment	Serum cholesterol HDL/LDL



## Monthly Rates – Premier 2

\$10,000		No Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$9.59	\$15.41	\$14.07	\$19.89		
30-39	\$14.23	\$22.36	\$18.70	\$26.84		
40-49	\$23.14	\$35.73	\$27.61	\$40.21		
50-59	\$41.02	\$62.56	\$45.49	\$67.03		
60-64	\$55.55	\$84.35	\$60.03	\$88.83		
65-69	\$67.31	\$102.00	\$71.79	\$106.47		
70+	\$80.36	\$121.57	\$84.84	\$126.05		

\$10,000		Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$12.29	\$19.46	\$15.24	\$24.41		
30-39	\$20.10	\$31.17	\$25.05	\$36.13		
40-49	\$35.11	\$53.70	\$40.06	\$58.65		
50-59	\$65.25	\$98.89	\$70.20	\$103.85		
60-64	\$89.73	\$135.62	\$95.68	\$140.57		
65-69	\$109.55	\$165.35	\$114.50	\$170.30		
70+	\$131.54	\$198.33	\$136.49	\$203.28		

\$20,000		No Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$13.53	\$21.32	\$18.70	\$26.49		
30-39	\$22.80	\$35.23	\$27.97	\$40.40		
40-49	\$40.62	\$61.96	\$45.79	\$67.13		
50-59	\$76.39	\$115.61	\$81.56	\$120.78		
60-64	\$105.45	\$159.21	\$110.62	\$164.38		
65-69	\$128.98	\$194.49	\$134.15	\$199.66		
70+	\$155.08	\$233.64	\$160.25	\$238.81		

\$20,000		Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$18.93	\$29.42	\$25.05	\$35.55		
30-39	\$34.55	\$52.85	\$40.67	\$58.97		
40-49	\$64.58	\$97.89	\$70.70	\$104.01		
50-59	\$124.84	\$188.29	\$130.96	\$194.41		
60-64	\$173.81	\$261.74	\$179.94	\$267.87		
65-69	\$213.45	\$321.20	\$219.57	\$327.32		
70+	\$257.42	\$387.16	\$263.55	\$393.29		

\*Spouse covered at 50% and child(ren) covered at 50% of the employee benefit amount.

## Monthly Rates – Premier Plus 2

\$10,000		No Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$9.59	\$17.38	\$14.76	\$22.55		
30-39	\$14.23	\$26.65	\$19.40	\$31.82		
40-49	\$23.14	\$44.47	\$28.31	\$49.64		
50-59	\$41.02	\$80.24	\$46.19	\$85.41		
60-64	\$55.55	\$109.30	\$60.72	\$114.47		
65-69	\$67.31	\$132.83	\$72.49	\$138.00		
70+	\$80.36	\$158.93	\$85.53	\$164.10		

\$10,000		Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$12.29	\$22.78	\$18.42	\$28.91		
30-39	\$20.10	\$38.40	\$26.22	\$44.52		
40-49	\$35.11	\$68.43	\$41.24	\$74.55		
50-59	\$65.25	\$128.69	\$71.37	\$134.82		
60-64	\$89.73	\$177.66	\$95.86	\$183.79		
65-69	\$109.55	\$217.30	\$115.67	\$223.42		
70+	\$132.54	\$261.27	\$137.66	\$267.40		

\$20,000		No Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$13.53	\$25.26	\$20.10	\$31.83		
30-39	\$22.80	\$43.80	\$29.36	\$50.37		
40-49	\$40.62	\$79.44	\$47.19	\$86.01		
50-59	\$76.39	\$150.98	\$82.95	\$157.54		
60-64	\$105.45	\$209.11	\$112.02	\$215.67		
65-69	\$128.98	\$256.15	\$135.54	\$262.72		
70+	\$155.08	\$308.35	\$161.64	\$314.92		

\$20,000		Tobacco			Monthly	
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family		
< 30	\$18.93	\$36.06	\$27.40	\$44.53		
30-39	\$34.55	\$67.30	\$43.02	\$75.77		
40-49	\$64.58	\$127.35	\$73.05	\$135.82		
50-59	\$124.84	\$247.88	\$133.31	\$256.35		
60-64	\$173.81	\$345.82	\$182.28	\$354.29		
65-69	\$213.45	\$425.10	\$221.92	\$433.57		
70+	\$257.42	\$513.05	\$265.89	\$521.52		

\*Spouse covered at 100% and child(ren) covered at 100% of the employee benefit amount.



## Monthly Rates – Premier Elite 2

\$10,000	No Tobacco	Monthly		
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family
< 30	\$15.92	\$30.04	\$25.70	\$39.82
30-39	\$26.03	\$50.26	\$35.80	\$60.03
40-49	\$45.34	\$88.89	\$55.12	\$98.66
50-59	\$79.51	\$157.21	\$89.28	\$166.99
60-64	\$104.19	\$206.57	\$113.96	\$216.35
65-69	\$124.01	\$246.23	\$133.79	\$256.00
70+	\$144.39	\$286.97	\$154.16	\$296.75

\$10,000	Tobacco	Monthly		
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family
< 30	\$21.96	\$43.12	\$35.84	\$57.00
30-39	\$38.99	\$77.17	\$52.87	\$91.05
40-49	\$71.53	\$142.26	\$85.41	\$156.14
50-59	\$129.09	\$257.38	\$142.97	\$271.26
60-64	\$170.68	\$340.55	\$184.56	\$354.43
65-69	\$204.08	\$407.37	\$217.97	\$421.25
70+	\$238.41	\$476.03	\$252.29	\$489.91

\$20,000	No Tobacco	Monthly		
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family
< 30	\$21.24	\$40.67	\$34.45	\$53.88
30-39	\$36.19	\$70.59	\$49.40	\$83.80
40-49	\$64.98	\$128.16	\$78.19	\$141.37
50-59	\$118.35	\$234.90	\$131.56	\$248.11
60-64	\$158.99	\$316.18	\$172.20	\$329.38
65-69	\$192.41	\$381.02	\$205.62	\$396.23
70+	\$226.27	\$450.75	\$239.48	\$463.95

\$20,000	Tobacco	Monthly		
Age Band	Employee	Employee & Spouse	Employee & Child(ren)	Family
< 30	\$31.91	\$62.03	\$51.58	\$81.69
30-39	\$57.11	\$112.43	\$76.78	\$132.09
40-49	\$105.62	\$209.43	\$125.28	\$229.10
50-59	\$195.55	\$389.29	\$215.21	\$408.96
60-64	\$264.01	\$526.23	\$283.68	\$545.89
65-69	\$320.33	\$638.85	\$339.99	\$658.52
70+	\$377.38	\$753.97	\$397.05	\$772.64

\*Spouse covered at 100% and child(ren) covered at 100% of the employee benefit amount.



## Exclusions & limitations

This is not a complete disclosure of plan qualifications and limitations. Benefits and riders may vary by state and may not be available in all states. In addition to any benefit-specific exclusion, benefits will not be paid for any loss which, directly or indirectly, in whole or in part, is caused by or results from any of the following, unless coverage is specifically provided for by name in insurance certificate:

- A specified health event for insured or covered spouse or for a specified health event for covered dependent child(ren) occurring prior to the effective date of coverage for a covered person;
- Any condition not specifically listed as a specified health event for insured or covered spouse or for a specified health event for covered dependent child(ren);
- Suicide or attempt at suicide, or intentional self-inflicted injury or sickness;
- Participation in any activity or event, including the operation of a vehicle, while under the influence of a controlled substance (unless administered by a physician or taken according to the physician's Instructions) or while intoxicated as defined by the law of the jurisdiction in which the cause of the loss occurs;
- Use of alcohol, drugs or narcotics;
- Commission of or attempt to commit an assault or felony;
- Engaging in an illegal activity or occupation; or
- Declared war or any act of declared war.

## Pre-existing conditions

This coverage includes a 12/12 pre-existing condition limitation. The insured is given credit toward their pre-existing condition limitation period based on the length of time and amount of coverage they had with the prior carrier.



### Questions?

Contact your plan administrator with questions about the offered Critical Illness coverage.

This document is meant to highlight some, but not all the features Wellfleet coverage provides. It is not an insurance contract. Wellfleet Workplace benefits provide limited benefits and are not a substitute for mandated ACA healthcare coverage. This coverage is available in: AL, AK, AZ, AR, CT, FL, GA, HI, IL, KS, KY, LA, ME, MA, MS, MO, MT, NE, NV, NC, ND, OK, OR, PA, SC, SD, TX, UT, VA, WV, WI, WY. Like most supplemental offerings, these benefits may have state-specific variations, and some product offerings and details may not be available in all states. Rates are subject to change. Wellfleet reserves the right to raise premium rates with proper notice, as noted in the policy. For complete details see your certificate.

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