ENHANCE YOUR PLAN WITH
Critical illness insurance

Financial Protection For:
- Cancer
- Stroke
- Heart Attack
- Major Organ Transplant
- Multiple Sclerosis
- Paralysis
- Blindness
- Deafness
- End-Stage Kidney Failure
- Coronary Bypass
- Coronary Angioplasty

Help protect your family from the devastating financial consequences of a critical illness.

You may apply for up to $10,000 in lump-sum coverage with your health application.

Higher amounts are available under a separate application process.

Sources: American Heart Association, American Cancer Society.
Did you know…

♦ 1 in 6 men, and 1 in 8 women, age 45 and over have had a heart attack or stroke. (2)
♦ More than 16% of all people killed by cardiovascular diseases are under age 65. (2)
♦ In 48% of men, and 63% of women who die suddenly of coronary heart disease, there was no previous evidence of disease. (2)
♦ 45% of all heart attacks occur in people under age 65. (2)
♦ Every 53 seconds, an American suffers a stroke. (3)
♦ Stroke is the leading cause of serious disability in the United States. (2)
♦ 28% of the people who suffer a stroke in a given year are under age 65. (3)
♦ 40% of the population will develop cancer at some point in their lives. (1)
♦ 66% of the costs of cancer are indirect costs, not covered by major-medical insurance. (1)
♦ Two-thirds of heart attack patients do not make a complete recovery, in fact about 20% will be disabled with heart failure within six years after the attack. (2)

The good news is that chances of survival of many critical illnesses are going up (2,1). The bad news is that with higher survival rates, come much higher costs.

Increasing Survival Rates:

Sources: (1) Cancer Facts and Figures, 1995, American Cancer Society; (2) Heart and Stroke Facts, 1995 Statistical Supplement, American Heart Association; (3) 1998 Heart and Stroke Statistical Update, American Heart Association;

---

PLAN FEATURES

- Pays you regardless of other insurance
- Premiums are based on your age at issue and tobacco status. Your premium will not increase due to your increasing age.
- Guaranteed Renewable for life, or until payment of 100% of the face amount.
- Available in $1,000 increments to $10,000 if applying with your Hospital/Medical/Surgical policy, and in higher amounts, up to $100,000 under a separate application process.
- Coverage is available on you and your spouse.
- The face amount reduces by 50% on the first policy anniversary after age 75. After payment of either the Coronary Artery Bypass benefit or the Coronary Angioplasty benefit, the face amount available for other critical illnesses is reduced by the amount previously paid.
STANDARD LIFE AND CASUALTY INSURANCE COMPANY
Salt Lake City, Utah

SPECIFIED DISEASE COVERAGE
OUTLINE OF COVERAGE (Applicable to Policy Form CI-GR(99))

THIS IS NOT A MEDICARE SUPPLEMENT POLICY
If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare available from the Company.

Read your policy carefully. This outline provides a very brief description of the important features of your policy. This is not an insurance contract and only the actual policy provisions will control. The policy states forth in detail the rights and obligations of both you and us. It is, therefore, important that you READ YOUR POLICY CAREFULLY.

Specified Critical Illness. Your policy is designed to provide coverage ONLY for specified critical illnesses, subject to any limitations in your policy. The policy does not provide coverage for basic hospital, basic medical-surgical or major medical expenses.

This policy provides benefits only if the date of diagnosis of specified critical illness is while your policy is in force and, in the case of cancer, coronary artery bypass, coronary angioplasty or major organ transplant, after the waiting period has been satisfied.

Premiums vary depending on the amount of coverage you choose at the time of application.
The amount of coverage you chose is shown in the Policy Schedule.

BENEFITS PAYABLE FOR CRITICAL ILLNESS INSURED CONDITIONS

Face amount on the effective date of coverage: $__________________
We will pay 25% of the face amount for Coronary Artery Bypass Surgery (less any amounts previously paid for Coronary Angioplasty).

We will pay 10% of the face amount for Coronary Angioplasty (unless the benefit for Coronary Artery Bypass Surgery has previously been paid).

We will pay 100% of the face amount if you are diagnosed with one of the following Critical Illness Insured Conditions:
  - Cancer
  - Stroke
  - Heart Attack
  - End-Stage Kidney Failure
  - Major Organ Transplant
  - Multiple Sclerosis
  - Blindness
  - Deafness
  - Paralysis

When you reach age 75, the face amount will decrease by 50%.

DEFINITIONS

Blindness means permanent and uncorrectable loss of sight in both eyes, as confirmed by a Physician who is an Ophthalmologist. The corrected visual acuity must be worse than 20/200 in both eyes or the field of vision must be less than 20 degrees in both eyes.

Cancer: means a disease which is identified by the presence of malignant cells or a malignant tumor characterized by the uncontrolled and abnormal growth and spread of invasive malignant cells. Diagnosis must be based on a microscopic examination of tissue or preparations from the hemic (blood) system (either during life or post-mortem) performed by a qualified pathologist. If a pathological diagnosis of cancer cannot be made, but you are being treated for cancer by a doctor, a clinical diagnosis that contains medical evidence to support the diagnosis of cancer will be accepted.

Coronary Angioplasty means undergoing balloon angioplasty or other forms of catheter-based percutaneous transluminal coronary artery therapy to correct narrowing or blockage of one or more coronary arteries.

Coronary Artery Bypass Surgery: means undergoing open heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts, but excluding procedures such as, but not limited to, balloon angioplasty, laser relief, stints or other non-surgical procedures.

Date of Diagnosis: (a) for Cancer: The day the tissue specimen, blood samples and/or titer(s) are taken on which the first diagnosis of cancer is based; (b) for Heart Attack: The date that the death (infarction) of a portion of the heart muscle occurred based on the criteria listed under the Heart Attack definition; (c) for Stroke: The date a stroke occurred based on documented neurological deficits and neuroimaging studies; (d) for End-Stage Renal Failure: The date that your doctor or physician recommends that you begin renal dialysis; (e) for Major Organ Transplant surgery, Coronary Artery Bypass Surgery or Angioplasty: The date the surgery occurs for covered transplants or covered coronary artery bypass surgery or covered angioplasty; (f) For Multiple Sclerosis, Paralysis, Blindness and Deafness: The date the Diagnosis is established by the Physician based on clinical and/or laboratory findings as supported by the Insured’s medical records.

Deafness means permanent loss of hearing in both ears with an auditory threshold of more than 90 decibels in each ear, as confirmed by a physician who is an Otolaryngologist.

End stage renal failure means chronic irreversible failure of the function of both kidneys such that you must undergo regular hemodialysis or peritoneal dialysis (at least weekly).

CI-GR-OOCa
**Heart Attack** means the death (infarction) of a portion of the heart muscle as a result of inadequate blood supply. The diagnosis must be based on all of the following criteria: (a) associated new electrocardiographic (EKG) changes consistent with injury; and (b) elevation of cardiac enzymes; and (c) confirmatory imaging studies such as thallium scans, MUGA scans, or stress echocardiograms.

**Major Organ Transplant** means undergoing surgery as a recipient of a transplant of a human heart, lung, liver, kidney, or pancreas. We will not pay a benefit for organs received from non-human donors.

**Multiple Sclerosis** means a definitive diagnosis of Multiple Sclerosis, by a Physician who is a certified Neurologist. The Diagnosis must be based on at least two episodes of well-defined neurological abnormalities, with objective evidence of lesions at more than one site within the central nervous system, and must also be supported by modern investigative techniques.

**Paralysis** means complete and permanent loss of the use of two or more limbs through neurological injury producing paralysis, confirmed to have been present by a Physician for a continuous period of at least 180 days.

**Stroke** means a cerebrovascular event resulting in permanent neurological damage, including infarction, hemorrhage or embolization of brain tissue from an extracranial source. Transient ischemic attacks are specifically excluded. The diagnosis must be based on documented neurological deficits and confirmatory neuroimaging studies.

**Waiting Period** means the first thirty days following the Effective Date of this policy. No benefits will be paid for a covered specified Critical Illness Insured Condition which occurs during the Waiting Period for Cancer, Coronary Artery Bypass Surgery, Coronary Angioplasty or Major Organ Transplant.

---

**WHAT IS NOT COVERED BY THIS POLICY**

We will not pay benefits for a diagnosis of a Critical Illness Insured Condition that occurs as a result of the following: participating in a felony; self-inflicted injury; your committing suicide or trying to commit suicide, while sane or insane; war or any act of war (declared or undeclared).

**Renewability:** Your policy is guaranteed renewable as long as you pay the premiums when they are due up to the date of payment of 100% of the face amount for Critical Illness Insured Conditions. Your premium can be changed only if we change it on all policies of this kind in force in the state where your policy was issued. This policy will terminate once we pay 100% of the Face Amount for specified Critical Illness Insured Conditions for the Insured.

---

**OPTIONAL BENEFITS**

**SPOUSE CRITICAL ILLNESS INDEMNITY INSURANCE RIDER (Form # CI-SR(99))**

This Rider provides benefits for the Insured Spouse named in the Policy Schedule, in the same manner as the Critical Illness Indemnity Policy, and for the same Critical Illness Insured Conditions. These benefits are paid against the Rider Face Amount. This rider will terminate once we pay 100% of the Face Amount for specified Critical Illness Insured Conditions for the Insured Spouse.

**Rider Face Amount:** $__________

**DEPENDENT CHILDREN CANCER INDEMNITY INSURANCE RIDER (Form # CI-CCR(99))**

This Rider provides a lump-sum payment of the Rider Face Amount for each Dependent Child of the Insured, when that Dependent Child is Diagnosed with Cancer, as defined in the Critical Illness Indemnity Policy.

**Rider Face Amount:** $__________ (for each Dependent Child)

This Rider terminates with regard to a specific Dependent Child once we pay 100% of the Face Amount for Diagnosis of Cancer in that Dependent Child.

---

**SPECIFICALLY EXCLUDED CONDITIONS**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Form #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blindness</td>
<td>CI-ER-BLIND</td>
</tr>
<tr>
<td>Deafness</td>
<td>CI-ER-DEAF</td>
</tr>
</tbody>
</table>

Some people who would otherwise be declined coverage will be offered a policy with one or more exclusionary riders. If your policy is issued with one or more of the above exclusionary riders, no benefits will be payable for the specified condition(s).